

# REPORT OF RECEIPTS AND DISBURSEMENTS

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## BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

<b>1. NAME OF COMMITTEE (in full)</b> <b>John Edwards for President</b>		<b>2. IDENTIFICATION NUMBER</b> C00431205
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported 1705 DeSales Street 8th Floor		
<b>CITY, STATE, and ZIP CODE</b> Washington                      DC                      20036		<b>3. IS THIS REPORT FOR :</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General

**4. TYPE OF REPORT** (Check here  if this is a Termination Report.)

<input type="checkbox"/> April 15 Quarterly Report <input type="checkbox"/> July 15 Quarterly Report <input type="checkbox"/> October 15 Quarterly Report <input type="checkbox"/> January 31 Year End Report	<p style="text-align: center;">Monthly Report Due On:</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> February 20</td> <td><input checked="" type="checkbox"/> June 20</td> <td><input type="checkbox"/> October 20</td> </tr> <tr> <td><input type="checkbox"/> March 20</td> <td><input type="checkbox"/> July 20</td> <td><input type="checkbox"/> November 20</td> </tr> <tr> <td><input type="checkbox"/> April 20</td> <td><input type="checkbox"/> August 20</td> <td><input type="checkbox"/> December 20</td> </tr> <tr> <td><input type="checkbox"/> May 20</td> <td><input type="checkbox"/> September 20</td> <td><input type="checkbox"/> January 31</td> </tr> </table> <input type="checkbox"/> Twelfth day report preceding _____ <span style="margin-left: 150px;">(Type of Election)</span> election on _____ in the State of _____  <input type="checkbox"/> Thirtieth day report following the General Election on _____ on _____	<input type="checkbox"/> February 20	<input checked="" type="checkbox"/> June 20	<input type="checkbox"/> October 20	<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20	<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20	<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31
<input type="checkbox"/> February 20	<input checked="" type="checkbox"/> June 20	<input type="checkbox"/> October 20											
<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20											
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20											
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31											

IS THIS REPORT AN AMENDMENT       YES       NO

<b>5. COVERING PERIOD</b>	<b>FROM</b> 05/01/2008	<b>THROUGH</b> 05/31/2008
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SUMMARY		
6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	.....	805762.77
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	.....	29191.83
8. SUBTOTAL (Lines 6 and 7)	.....	834954.60
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	.....	222630.77
10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	.....	612323.83
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	.....	0.00
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	.....	21133.71
13. EXPENDITURES SUBJECT TO LIMITATION	.....	0.00
<b>NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES</b>		
14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	.....	35163487.29
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2)	.....	39600035.72

**I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.**

Type or Print Name of Treasurer <b>Julius Chambers</b>	Date 06/20/2008
Signature of Treasurer	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

<b>For further information contact:</b> Federal Election Commission 999 E Street, N.W. Washington, DC 20463	Toll Free 800-424-9530 Local 202-694-1100	<b>FEC FORM 3P</b> <b>(01/2001)</b>
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**DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**

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(PAGE 2, FEC FORM 3P)

Name of committee (in full) <b>John Edwards for President</b>		Report Covering the Period From: 05/01/2008 To: 05/31/2008	
<b>I. RECEIPTS</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
16. FEDERAL FUNDS (Itemize on Schedule A-P) .....		0.00	7404068.77
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees .....		949.58	38977973.75
(b) Political Party Committees .....		0.00	200.00
(c) Other Political Committees .....		0.00	20.00
(d) The Candidate .....		0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		949.58	38978193.75
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....		0.00	0.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate .....		0.00	0.00
(b) Other Loans .....		0.00	8974714.00
(c) TOTAL LOANS (Add 19(a) and 19(b)) .....		0.00	8974714.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating .....		27286.11	1141137.50
(b) Fundraising .....		0.00	0.00
(c) Legal and Accounting .....		0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		27286.11	1141137.50
21. OTHER RECEIPTS (Dividend, Interest, etc.) .....		956.14	158801.58
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21) .....		29191.83	56656915.60
<b>II. DISBURSEMENTS</b>			
23. OPERATING EXPENDITURES .....		124491.40	40741173.22
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....		0.00	0.00
25. FUNDRAISING DISBURSEMENTS .....		0.00	3746635.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS .....		0.00	176298.09
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate .....		0.00	0.00
(b) Other Repayments .....		0.00	7565511.16
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)) .....		0.00	7565511.16
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees .....		98139.37	3814706.46
(b) Political Party Committees .....		0.00	0.00
(c) Other Political Committees .....		0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c)) .....		98139.37	3814706.46
29. OTHER DISBURSEMENTS .....		0.00	267.84
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) .....		222630.77	56044591.77
<b>III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)</b>			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) .....		0.00	

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE**  
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)  
 (PAGE 3, FEC FORM 3P)

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<b>1. NAME OF COMMITTEE (in full)</b> John Edwards for President					
<b>ADDRESS (number and street)</b> 1705 DeSales Street 8th Floor					
<b>CITY, STATE, and ZIP CODE</b> Washington DC 20036			<b>2. IDENTIFICATION NUMBER</b> C00431205		

### ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	3000.00	Nebraska	0.00	296992.59
Alaska	0.00	1000.00	Nevada	0.00	114523.09
Arizona	0.00	0.00	New Hampshire	0.00	724777.63
Arkansas	0.00	2500.00	New Jersey	0.00	3610.97
California	0.00	41560.72	New Mexico	0.00	1500.00
Colorado	0.00	9651.07	New York	0.00	93499.94
Connecticut	0.00	11.00	North Carolina	0.00	179760.76
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	82751.68	Ohio	0.00	3409.06
Florida	0.00	6855.63	Oklahoma	0.00	5791.34
Georgia	0.00	216835.99	Oregon	0.00	26345.30
Hawaii	0.00	56.07	Pennsylvania	0.00	3453.89
Idaho	0.00	3.85	Rhode Island	0.00	0.00
Illinois	0.00	280512.40	South Carolina	0.00	1307731.16
Indiana	0.00	664.26	South Dakota	0.00	7152.54
Iowa	0.00	1453306.02	Tennessee	0.00	32789.49
Kansas	0.00	0.00	Texas	0.00	17114.07
Kentucky	0.00	1179.92	Utah	0.00	500.00
Louisiana	0.00	14077.40	Vermont	0.00	26238.64
Maine	0.00	45048.54	Virginia	0.00	60124.97
Maryland	0.00	16921.56	Washington	0.00	3275.67
Massachussetts	0.00	1443456.92	West Virginia	0.00	4272.59
Michigan	0.00	83.56	Wisconsin	0.00	775.08
Minnesota	0.00	105742.53	Wyoming	0.00	0.00
Mississippi	0.00	1400.00	Puerto Rico	0.00	0.00
Missouri	0.00	61192.18	Guam	0.00	0.00
Montana	0.00	2328.62	Virgin Islands	0.00	0.00
			<b>TOTALS</b>	<b>0.00</b>	<b>6703778.70</b>

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4 / 70
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	Full Name (Last, First, Middle Initial) James Cowen		Date of Receipt
	Mailing Address 2826 Alamo Trl		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 2 4 / 2 0 0 8
	City	State	Zip Code
	Temple	TX	76502
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 25.00
Name of Employer IRS		Occupation Federal Employee	Transaction ID: 165001
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 325.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Tim Fulbright		Date of Receipt
	Mailing Address 10 Friarswood Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Newcastle-under-Ly	ST	ST5 2-EG
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00
Name of Employer Retired		Occupation Retired	Transaction ID: 165002
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Unitemized Contributions		Date of Receipt
	Mailing Address 410 Market Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 3 1 / 2 0 0 8
	City	State	Zip Code
	Chapel Hill	NC	27516
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 674.58
Name of Employer Unitemized		Occupation Contributions	Transaction ID: 165003
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 674.58	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>949.58</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>949.58</b>

**Schedule A-P  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 / 70
	(check only one)
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input type="checkbox"/> 17a <input type="checkbox"/> 19b
<input type="checkbox"/> 17b <input type="checkbox"/> 20a	<input type="checkbox"/> 17c <input type="checkbox"/> 20b
<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Wachovia Bank	Date of Receipt MM / DD / YYYY 05 / 31 / 2008
	Mailing Address Fayetteville Street Mall	Amount of Each Receipt this Period 429.31
	City State Zip Code Raleigh NC 27606	
	FEC ID number of contributing federal political committee.	Interest
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 6887.76
		<b>Transaction ID: SA21-14279</b>

<b>B.</b>	Full Name (Last, First, Middle Initial) BB&T	Date of Receipt MM / DD / YYYY 05 / 31 / 2008
	Mailing Address Branch 12501	Amount of Each Receipt this Period 526.83
	City State Zip Code Alexandria VA 22314	
	FEC ID number of contributing federal political committee.	Interest
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 16204.46
		<b>Transaction ID: SA21-14281</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	956.14
<b>TOTAL</b> This Period (last page this line number only) .....	▶	956.14

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 70
	(check only one)	
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b	<input checked="" type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Frederick Ryan, Jr		Date of Receipt
	Mailing Address 10832 Alloway Dr.		<input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Potomac	MD	20854
	FEC ID number of contributing federal political committee.		<input type="text" value=""/>
Name of Employer		Occupation	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General			<input type="text" value="1398.83"/>
<input type="checkbox"/> Other (specify) ▼			Press Travel Reimbursement
Receipt For:		Election Cycle-to-Date ▼	Transaction ID: SA20A-14177
		<input type="text" value="1398.83"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) New Hampshire Electric Co-Op		Date of Receipt
	Mailing Address PO Box 9612		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Manchester	NH	03108
	FEC ID number of contributing federal political committee.		<input type="text" value=""/>
Name of Employer		Occupation	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General			<input type="text" value="226.23"/>
<input type="checkbox"/> Other (specify) ▼			Refund
Receipt For:		Election Cycle-to-Date ▼	Transaction ID: SA20A-14169
		<input type="text" value="423.18"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Edward L Niles		Date of Receipt
	Mailing Address 25 Vinton St., #1		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Boston	MA	02127
	FEC ID number of contributing federal political committee.		<input type="text" value=""/>
Name of Employer		Occupation	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General			<input type="text" value="376.19"/>
<input type="checkbox"/> Other (specify) ▼			Equipment Purchase
Receipt For:		Election Cycle-to-Date ▼	Transaction ID: SA20A-14170
		<input type="text" value="376.19"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="2001.25"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value=""/>

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 7 / 70</span>
	(check only one)
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input type="checkbox"/> 17a <input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 17b <input type="checkbox"/> 20a	<input type="checkbox"/> 17c <input type="checkbox"/> 20b
<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Atlantic Technology Group	Date of Receipt MM / DD / YYYY 05 / 16 / 2008
	Mailing Address 9125 Industrial Court	Amount of Each Receipt this Period 1764.00
	City State Zip Code Gaithersburg MD 20877	Equipment Purchase
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1764.00 <b>Transaction ID: SA20A-14171</b>

<b>B.</b>	Full Name (Last, First, Middle Initial) CobraServ Natl. Service Center	Date of Receipt MM / DD / YYYY 05 / 16 / 2008
	Mailing Address 3201 34th Street South	Amount of Each Receipt this Period 17608.30
	City State Zip Code St. Petersburg FL 33711-3828	Refund
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 36173.91 <b>Transaction ID: SA20A-14172</b>

<b>C.</b>	Full Name (Last, First, Middle Initial) Qwest	Date of Receipt MM / DD / YYYY 05 / 16 / 2008
	Mailing Address PO Box 91154	Amount of Each Receipt this Period 1612.90
	City State Zip Code Seattle WA 98111-9254	Refund
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 33545.27 <b>Transaction ID: SA20A-14173</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>20985.20</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 8 / 70</span>
	(check only one)
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input type="checkbox"/> 17a <input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 17b <input type="checkbox"/> 20a	<input type="checkbox"/> 17c <input type="checkbox"/> 20b
<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Qwest Mailing Address PO Box 91154 City State Zip Code Seattle WA 98111-9254 FEC ID number of contributing federal political committee.		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	6		2	0	0	8													
Name of Employer Occupation  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <table border="1"> <tr> <td>948.82</td> </tr> </table> Refund  Transaction ID: SA20A-14174	948.82																			
948.82																						
Election Cycle-to-Date ▼ <table border="1"> <tr> <td>33545.27</td> </tr> </table>		33545.27																				
33545.27																						

<b>B.</b> Full Name (Last, First, Middle Initial) Qwest Mailing Address PO Box 91154 City State Zip Code Seattle WA 98111-9254 FEC ID number of contributing federal political committee.		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	6		2	0	0	8													
Name of Employer Occupation  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <table border="1"> <tr> <td>1060.77</td> </tr> </table> Refund  Transaction ID: SA20A-14175	1060.77																			
1060.77																						
Election Cycle-to-Date ▼ <table border="1"> <tr> <td>33545.27</td> </tr> </table>		33545.27																				
33545.27																						

<b>C.</b> Full Name (Last, First, Middle Initial) Qwest Mailing Address PO Box 91154 City State Zip Code Seattle WA 98111-9254 FEC ID number of contributing federal political committee.		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	6		2	0	0	8													
Name of Employer Occupation  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <table border="1"> <tr> <td>1116.96</td> </tr> </table> Refund  Transaction ID: SA20A-14176	1116.96																			
1116.96																						
Election Cycle-to-Date ▼ <table border="1"> <tr> <td>33545.27</td> </tr> </table>		33545.27																				
33545.27																						

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<table border="1"> <tr> <td>3126.55</td> </tr> </table>	3126.55
3126.55		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1"> <tr> <td></td> </tr> </table>	

**Schedule A-P  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 70
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Damon Winter	Date of Receipt
	Mailing Address 330 Wythe Ave	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 19 / 2008
	City State Zip Code Brooklyn NY 11211	Amount of Each Receipt this Period 1173.11
	FEC ID number of contributing federal political committee.	Press Travel Reimbursement
	Name of Employer Occupation	Transaction ID: SA20A-14269
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1173.11

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1173.11
<b>TOTAL</b> This Period (last page this line number only) .....	▶	27286.11



# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Authorize.net Mailing Address 915 South 500 East Suite 200 City American Fork State UT Zip Code 84003 Purpose of Disbursement Bank Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-14274 Date of Disbursement 05 / 05 / 2008
	Amount of Each Disbursement this Period 82.80 Category/Type
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>B.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 650448 City Dallas State TX Zip Code 75265-0448 Purpose of Disbursement Travel Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-14156 Date of Disbursement 05 / 06 / 2008
	Amount of Each Disbursement this Period 14923.16 Category/Type
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	See Attached Memo Entry

<b>C.</b> Full Name (Last, First, Middle Initial) Delta Airlines Mailing Address P.O. Box 20706 City Atlanta State GA Zip Code 30320 Purpose of Disbursement Airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-14156-10000 Date of Disbursement 05 / 06 / 2008
	Amount of Each Disbursement this Period 2163.12 Category/Type
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15005.96
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) National Car Rental  Mailing Address 6929 North Lakewood Avenue Suite 100  City Tulsa State OK Zip Code 74117  Purpose of Disbursement Auto Rental Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14156-20000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 8  Amount of Each Disbursement this Period 3463.18  <b>[MEMO ITEM]</b> Memo Entry
B.	Full Name (Last, First, Middle Initial) UPS- Carol Stream  Mailing Address Lockbox 577  City Carol Stream State IL Zip Code 60132-0577  Purpose of Disbursement Delivery Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14156-30000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 8  Amount of Each Disbursement this Period 1047.11  <b>[MEMO ITEM]</b> Memo Entry
C.	Full Name (Last, First, Middle Initial) Staples Credit Plan  Mailing Address PO Box 689020  City Des Moines State IA Zip Code 50368  Purpose of Disbursement Office Supplies Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14156-40000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 8  Amount of Each Disbursement this Period 585.48  <b>[MEMO ITEM]</b> Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) New York Times</p> <p>Mailing Address PO Box 371456</p> <p>City Pittsburgh State PA Zip Code 15250-7456</p> <p>Purpose of Disbursement Subscriptions</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-14156-50000</p> <p>Date of Disbursement 05 / 06 / 2008</p> <p>Amount of Each Disbursement this Period -48.64</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Atlantic Waste Systems North</p> <p>Mailing Address 295 Forest St.</p> <p>City Peabody State MA Zip Code 01960</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-14156-60000</p> <p>Date of Disbursement 05 / 06 / 2008</p> <p>Amount of Each Disbursement this Period -73.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Volusion Inc.</p> <p>Mailing Address 1736 Erringer Rd.</p> <p>City Simi Valley State CA Zip Code 93065</p> <p>Purpose of Disbursement Computer Software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-14156-70000</p> <p>Date of Disbursement 05 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 49.95</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Penske Truck Leasing Mailing Address 204 Trans Air Dr. City Morrisville State NC Zip Code 27560 Purpose of Disbursement Auto Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-14156-80000 Date of Disbursement 05 / 06 / 2008
	Amount of Each Disbursement this Period 581.84 [MEMO ITEM] Memo Entry

<b>B.</b> Full Name (Last, First, Middle Initial) Hotels.com Mailing Address 3150 139th Ave SE City Bellevue State WA Zip Code 98005 Purpose of Disbursement Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-14156-90000 Date of Disbursement 05 / 06 / 2008
	Amount of Each Disbursement this Period 698.57 [MEMO ITEM] Memo Entry

<b>C.</b> Full Name (Last, First, Middle Initial) Peer 1 Dedicated Hosting Mailing Address P.O. Box 643 607 City Cincinatti State OH Zip Code 45264 Purpose of Disbursement Computer Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-14156-100000 Date of Disbursement 05 / 06 / 2008
	Amount of Each Disbursement this Period 2896.95 [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Boston City Ride Mailing Address 41 Belvedere St. City Boston State MA Zip Code 02115 Purpose of Disbursement Auto Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-14156-110000 Date of Disbursement 05 / 06 / 2008
	Amount of Each Disbursement this Period 99.50 [MEMO ITEM] Memo Entry

<b>B.</b> Full Name (Last, First, Middle Initial) Bronto Software Inc. Mailing Address 324 Blackwell Street City Durham State NC Zip Code 27701 Purpose of Disbursement Computer Software Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-14156-120000 Date of Disbursement 05 / 06 / 2008
	Amount of Each Disbursement this Period 550.00 [MEMO ITEM] Memo Entry

<b>C.</b> Full Name (Last, First, Middle Initial) TiVo Inc. Mailing Address 2160 Gold Street P.O. Box 2160 City Alviso State CA Zip Code 95002 Purpose of Disbursement Subscriptions Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-14156-130000 Date of Disbursement 05 / 06 / 2008
	Amount of Each Disbursement this Period 42.80 [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) Manpower Inc.	Transaction ID: SB23-14156-170000
	Mailing Address 100 Manpower Pl.	Date of Disbursement 05 / 06 / 2008
	City Milwaukee State WI Zip Code 53212	Amount of Each Disbursement this Period 254.16
	Purpose of Disbursement Office Expense Candidate Name	[MEMO ITEM] Memo Entry
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) JK Moving	Transaction ID: SB23-14156-180000
	Mailing Address 44112 Mercure Circle	Date of Disbursement 05 / 06 / 2008
	City Sterling State VA Zip Code 20166	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement Office Expense Candidate Name	[MEMO ITEM] Memo Entry
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Webair Internet Development	Transaction ID: SB23-14156-190000
	Mailing Address 333 Jericho Turnpike Suite 200	Date of Disbursement 05 / 06 / 2008
	City Jericho State NY Zip Code 11753	Amount of Each Disbursement this Period 399.00
	Purpose of Disbursement Internet Services Candidate Name	[MEMO ITEM] Memo Entry
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	Full Name (Last, First, Middle Initial) PMI  Mailing Address 1725 DeSales St.  City Washington State DC Zip Code 20036 Purpose of Disbursement Auto Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14156-200000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 8  Amount of Each Disbursement this Period 500.00  <b>[MEMO ITEM]</b> Memo Entry
<b>B.</b>	Full Name (Last, First, Middle Initial) Hotel Tabard Inn  Mailing Address 1739 N St. NW  City Washington State DC Zip Code 20036 Purpose of Disbursement Lodging Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14156-210000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 8  Amount of Each Disbursement this Period 497.78  <b>[MEMO ITEM]</b> Memo Entry
<b>C.</b>	Full Name (Last, First, Middle Initial) US Airways  Mailing Address 4000 E. Sky Harbor Blvd.  City Phoenix State AZ Zip Code 85034 Purpose of Disbursement Airfare Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14156-220000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 8  Amount of Each Disbursement this Period 249.00  <b>[MEMO ITEM]</b> Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: SB23-14153 Date of Disbursement 05 / 09 / 2008
	Mailing Address 4101 Doie Cope Road Suite 110	Amount of Each Disbursement this Period 38.00
	City Raleigh State NC Zip Code 27613	
	Purpose of Disbursement Payroll Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: SB23-14275 Date of Disbursement 05 / 09 / 2008
	Mailing Address 4101 Doie Cope Road Suite 110	Amount of Each Disbursement this Period 38.00
	City Raleigh State NC Zip Code 27613	
	Purpose of Disbursement Payroll Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23-14276 Date of Disbursement 05 / 09 / 2008
	Mailing Address Fayetteville Street Mall	Amount of Each Disbursement this Period 158.57
	City Raleigh State NC Zip Code 27606	
	Purpose of Disbursement Bank Charges	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	234.57
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Varia Systems, Inc. <hr/> Mailing Address 1730 Twin Springs Road Suite 211 <hr/> City Baltimore State MD Zip Code 21227 <hr/> Purpose of Disbursement Rent/Utilities/ Improvements Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-14120 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1875.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Shimar Recycling, Inc. <hr/> Mailing Address PO Box 51334 <hr/> City Durham State NC Zip Code 27717-1334 <hr/> Purpose of Disbursement Rent/Utilities/ Improvements Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-14121 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 526.62
<b>C.</b>	Full Name (Last, First, Middle Initial) AVF Consulting <hr/> Mailing Address 1220-C East Joppa Road Suite 514 <hr/> City Baltimore State MD Zip Code 21286 <hr/> Purpose of Disbursement Computer Software Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-14122 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 540.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2941.62

**TOTAL** This Period (last page this line number only) ..... ▶

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 70

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) Covad Communications Dept. 33258 Mailing Address PO Box 39000 City San Francisco State CA Zip Code 94139-3258 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14123 Date of Disbursement 05 / 12 / 2008 Amount of Each Disbursement this Period 2024.55 Category/Type
B.	Full Name (Last, First, Middle Initial) Pitney Bowes Inc Mailing Address PO Box 856390 City Louisville State KY Zip Code 40285-6390 Purpose of Disbursement Equipment Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14124 Date of Disbursement 05 / 12 / 2008 Amount of Each Disbursement this Period 33.58 Category/Type
C.	Full Name (Last, First, Middle Initial) Lexis Nexis Mailing Address PO Box 7247-7090 City Philadelphia State PA Zip Code 19170-7090 Purpose of Disbursement Dues/Subscriptions/ Publications Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14125 Date of Disbursement 05 / 12 / 2008 Amount of Each Disbursement this Period 150.00 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2208.13
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ceridian Benefit Services</p> <p>Mailing Address P.O. Box 10989</p> <p>City Newark State NJ Zip Code 07193</p> <p>Purpose of Disbursement Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-14126</p> <p>Date of Disbursement 05 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 113.00</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Susan Jackson</p> <p>Mailing Address 221 Ironwoods Dr.</p> <p>City Chapel Hill State NC Zip Code 27516</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-14127</p> <p>Date of Disbursement 05 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 60.00</p> <p>See Attached Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) RDU Airport Authority</p> <p>Mailing Address P.O. Box 80001</p> <p>City RDU Airport State NC Zip Code 27623</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-14127-10000</p> <p>Date of Disbursement 05 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 60.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

173.00

**TOTAL** This Period (last page this line number only) ..... ▶

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) Susan Jackson  Mailing Address 221 Ironwoods Dr.  City Chapel Hill State NC Zip Code 27516  Purpose of Disbursement Lodging Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14128 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8  Amount of Each Disbursement this Period 486.00  See Attached Memo Entry
B.	Full Name (Last, First, Middle Initial) Hotel Monaco Alexandria  Mailing Address 480 King St.  City Alexandria State VA Zip Code 22314  Purpose of Disbursement Lodging Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14128-10000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8  Amount of Each Disbursement this Period 486.00  [MEMO ITEM] Memo Entry
C.	Full Name (Last, First, Middle Initial) Jonathan Prince  Mailing Address 123 Baxter Street Apt. 5C  City New York State NY Zip Code 10013  Purpose of Disbursement Auto Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14136 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8  Amount of Each Disbursement this Period 9635.34  See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional) ..... ▶

10121.34

TOTAL This Period (last page this line number only) ..... ▶

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) Arlington Yellow Cab	Transaction ID: SB23-14136-10000
	Mailing Address 1000 N. Irving St.	Date of Disbursement 05 / 12 / 2008
	City Arlington State VA Zip Code 22201	Amount of Each Disbursement this Period 18.00
	Purpose of Disbursement Auto Travel	[MEMO ITEM] Memo Entry
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Friendly Cab Co.	Transaction ID: SB23-14136-20000
	Mailing Address 3022 22nd St. S.	Date of Disbursement 05 / 12 / 2008
	City Arlington State VA Zip Code 22204	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Auto Travel	[MEMO ITEM] Memo Entry
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Checker Yellow Cab	Transaction ID: SB23-14136-30000
	Mailing Address P.O. Box 419	Date of Disbursement 05 / 12 / 2008
	City Ballentine State SC Zip Code 29002	Amount of Each Disbursement this Period 27.00
	Purpose of Disbursement Auto Travel	[MEMO ITEM] Memo Entry
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.** Full Name (Last, First, Middle Initial)  
Boston Cab Association

Mailing Address 72 Kilmarnock St.

City Boston State MA Zip Code 02215

Purpose of Disbursement Auto Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB23-14136-40000  
Date of Disbursement 05 / 12 / 2008

Amount of Each Disbursement this Period 27.00

**[MEMO ITEM]**  
Memo Entry

**B.** Full Name (Last, First, Middle Initial)  
MetroCab

Mailing Address 84 Braintree St.

City Boston State MA Zip Code 02134

Purpose of Disbursement Auto Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB23-14136-50000  
Date of Disbursement 05 / 12 / 2008

Amount of Each Disbursement this Period 112.00

**[MEMO ITEM]**  
Memo Entry

**C.** Full Name (Last, First, Middle Initial)  
RadioShack - Boston

Mailing Address 730 Commonwealth Ave.

City Boston State MA Zip Code 02215

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB23-14136-60000  
Date of Disbursement 05 / 12 / 2008

Amount of Each Disbursement this Period 20.99

**[MEMO ITEM]**  
Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 0.00

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Airport & Intown Taxi Mailing Address 109 N. Graham St., Suite 105 City Chapel Hill State NC Zip Code 27516 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-14136-70000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 420.00 [MEMO ITEM] Memo Entry

<b>B.</b> Full Name (Last, First, Middle Initial) King Limo & Shuttle Mailing Address P.O. Box 1351 City Chapel Hill State NC Zip Code 27514 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-14136-80000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 455.00 [MEMO ITEM] Memo Entry

<b>C.</b> Full Name (Last, First, Middle Initial) Main Street Taxi Mailing Address PO Box 9633 City Chapel Hill State NC Zip Code 27515 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-14136-90000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 125.00 [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# Schedule B-P ITEMIZED DISBURSEMENTS

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Tar Heel Taxi Mailing Address 110 N. Graham St. City Chapel Hill State NC Zip Code 27514 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-14136-100000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 1360.00 [MEMO ITEM] Memo Entry

<b>B.</b> Full Name (Last, First, Middle Initial) University Transportation Mailing Address PO Box 991 City Chapel Hill State NC Zip Code 27514 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-14136-110000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 436.80 [MEMO ITEM] Memo Entry

<b>C.</b> Full Name (Last, First, Middle Initial) Chicago Carriage Cab Co. Mailing Address 2617 S. Wabash Ave. City Chicago State IL Zip Code 60616 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23-14136-120000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 80.00 [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# Schedule B-P ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Taxi Affiliation Services Mailing Address 2230 S. Michigan Ave. City Chicago State IL Zip Code 60616 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14136-130000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 174.00 [MEMO ITEM] Memo Entry

<b>B.</b> Full Name (Last, First, Middle Initial) Capitol City Cab Co. Mailing Address 415 S. Assembly St. City Columbia State SC Zip Code 29201 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14136-140000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 100.00 [MEMO ITEM] Memo Entry

<b>C.</b> Full Name (Last, First, Middle Initial) Marriott- Des Moines Mailing Address 700 Grand Ave City Des Moines State IA Zip Code 50309 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14136-150000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 68.00 [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# Schedule B-P ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) Yellow Cab Co. of Des Moines	Transaction ID: SB23-14136-160000
	Mailing Address 1710 Guthrie, Suite V	Date of Disbursement MM / DD / YYYY 05 / 12 / 2008
	City Des Moines State IA Zip Code 50316	Amount of Each Disbursement this Period 174.00
	Purpose of Disbursement Auto Travel	[MEMO ITEM] Memo Entry
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Durham's Best Cab Co.	Transaction ID: SB23-14136-170000
	Mailing Address 1005 Chapel Hill St.	Date of Disbursement MM / DD / YYYY 05 / 12 / 2008
	City Durham State NC Zip Code 27707	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Auto Travel	[MEMO ITEM] Memo Entry
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Washington Flyer Taxi	Transaction ID: SB23-14136-180000
	Mailing Address 23271 Autopilot Dr.	Date of Disbursement MM / DD / YYYY 05 / 12 / 2008
	City Sterling State VA Zip Code 20166	Amount of Each Disbursement this Period 40.00
	Purpose of Disbursement Auto Travel	[MEMO ITEM] Memo Entry
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) Starbucks - Keene, NH	Transaction ID: SB23-14136-190000
	Mailing Address 281 West St.	Date of Disbursement MM / DD / YYYY 05 / 12 / 2008
	City Keene State NH Zip Code 03431	Amount of Each Disbursement this Period 15.66
	Purpose of Disbursement Catering	[MEMO ITEM] Memo Entry
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Western Cab Co.	Transaction ID: SB23-14136-200000
	Mailing Address 5010 S. Valley View Blvd. B	Date of Disbursement MM / DD / YYYY 05 / 12 / 2008
	City Las Vegas State NV Zip Code 89118	Amount of Each Disbursement this Period 18.00
	Purpose of Disbursement Auto Travel	[MEMO ITEM] Memo Entry
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Whittlesea / Henderson Taxi	Transaction ID: SB23-14136-210000
	Mailing Address 1910 Industrial Rd.	Date of Disbursement MM / DD / YYYY 05 / 12 / 2008
	City Las Vegas State NV Zip Code 89102	Amount of Each Disbursement this Period 11.90
	Purpose of Disbursement Auto Travel	[MEMO ITEM] Memo Entry
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Yellow-Checker-Star Cab  Mailing Address 5225 West Post Rd.  City Las Vegas State NV Zip Code 89118 Purpose of Disbursement Auto Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14136-220000 Date of Disbursement 05 / 12 / 2008  Amount of Each Disbursement this Period 85.00  <b>[MEMO ITEM]</b> Memo Entry
<b>B.</b>	Full Name (Last, First, Middle Initial) Queen City Taxi  Mailing Address 146 Londonderry Turnpike  City Manchester State NH Zip Code 03104 Purpose of Disbursement Auto Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14136-230000 Date of Disbursement 05 / 12 / 2008  Amount of Each Disbursement this Period 80.00  <b>[MEMO ITEM]</b> Memo Entry
<b>C.</b>	Full Name (Last, First, Middle Initial) Central Cab  Mailing Address 11041 NW 17th Ave.  City Miami State FL Zip Code 33167 Purpose of Disbursement Auto Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14136-240000 Date of Disbursement 05 / 12 / 2008  Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b> Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Flamingo Taxi <hr/> Mailing Address 198 Northwest 79th St. <hr/> City Miami State FL Zip Code 33150 <hr/> Purpose of Disbursement Auto Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14136-250000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 38.00 <hr/> <b>[MEMO ITEM]</b> Memo Entry
<b>B.</b>	Full Name (Last, First, Middle Initial) Dulles Airport Taxi Inc. <hr/> Mailing Address PO Box 1036 <hr/> City Morrisville State NC Zip Code 27560 <hr/> Purpose of Disbursement Auto Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14136-260000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1105.00 <hr/> <b>[MEMO ITEM]</b> Memo Entry
<b>C.</b>	Full Name (Last, First, Middle Initial) NYC Taxi Inc. <hr/> Mailing Address 62 East 1 Street <hr/> City New York State NY Zip Code 10003 <hr/> Purpose of Disbursement Auto Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14136-270000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2749.80 <hr/> <b>[MEMO ITEM]</b> Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) Newark Cab Association <hr/> Mailing Address Newark International Airport <hr/> City Newark State NJ Zip Code 07102 <hr/> Purpose of Disbursement Auto Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14136-280000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 45.00 <hr/> [MEMO ITEM] Memo Entry
B.	Full Name (Last, First, Middle Initial) Crescent Cab Association <hr/> Mailing Address 7009-21 Grays Ave. <hr/> City Philadelphia State PA Zip Code 19142 <hr/> Purpose of Disbursement Auto Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14136-290000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 102.00 <hr/> [MEMO ITEM] Memo Entry
C.	Full Name (Last, First, Middle Initial) Philadelphia Taxi <hr/> Mailing Address 488 Avon St. <hr/> City Philadelphia State PA Zip Code 19115 <hr/> Purpose of Disbursement Auto Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14136-300000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 5.00 <hr/> [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Laclede Cab Co. <hr/> Mailing Address 600 S. Vandeventer Ave. <hr/> City St. Louis State MO Zip Code 63110 <hr/> Purpose of Disbursement Auto Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14136-310000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 50.00 <hr/> [MEMO ITEM] Memo Entry

<b>B.</b> Full Name (Last, First, Middle Initial) St. Louis American Cab Co. <hr/> Mailing Address 4242 Lindell Blvd. <hr/> City St. Louis State MO Zip Code 63108 <hr/> Purpose of Disbursement Auto Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14136-330000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 90.00 <hr/> [MEMO ITEM] Memo Entry

<b>C.</b> Full Name (Last, First, Middle Initial) Renaissance M St. Hotel <hr/> Mailing Address 1143 New Hampshire Ave NW <hr/> City Washington State DC Zip Code 20037 <hr/> Purpose of Disbursement Auto Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14136-340000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 9.00 <hr/> [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Yellow Cab Co. of DC</p> <p>Mailing Address 1626 Bladensburg Rd. NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-14136-350000</p> <p>Date of Disbursement 05 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 992.70</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) American Airlines</p> <p>Mailing Address P.O. Box 619612</p> <p>City DFW Airport State TX Zip Code 76021</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-14136-360000</p> <p>Date of Disbursement 05 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 90.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Amtrak</p> <p>Mailing Address P.O. Box 7717</p> <p>City Itasca State IL Zip Code 60143</p> <p>Purpose of Disbursement Rail Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-14136-370000</p> <p>Date of Disbursement 05 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 413.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶



# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) Delta Airlines  Mailing Address P.O. Box 20706  City Atlanta State GA Zip Code 30320  Purpose of Disbursement Auto Travel  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14137-20000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8  Amount of Each Disbursement this Period 448.50  <b>[MEMO ITEM]</b> Memo Entry
B.	Full Name (Last, First, Middle Initial) Executive Sedan & Limo  Mailing Address 4113 Lee Highway  City Arlington State VA Zip Code 22207  Purpose of Disbursement Auto Travel  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14137-30000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8  Amount of Each Disbursement this Period 45.00  <b>[MEMO ITEM]</b> Memo Entry
C.	Full Name (Last, First, Middle Initial) Yellow Cab Co.  Mailing Address 2129 W. Rosecrans Ave  City Gardena State CA Zip Code 90249  Purpose of Disbursement Auto Travel  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14137-40000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8  Amount of Each Disbursement this Period 727.29  <b>[MEMO ITEM]</b> Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Premium Financing Specialists <hr/> Mailing Address PO Box 905131 <hr/> City Charlotte State NC Zip Code 28290-5131 <hr/> Purpose of Disbursement Insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-14138 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 3841.72
<b>B.</b>	Full Name (Last, First, Middle Initial) Premiere Global Services Data Communications Division <hr/> Mailing Address 1268 Paysphere Circle <hr/> City Chicago State IL Zip Code 60674 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-14139 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1489.90
<b>C.</b>	Full Name (Last, First, Middle Initial) BlueCross BlueShield of North Carolina <hr/> Mailing Address PO Box 538660 <hr/> City Atlanta State GA Zip Code 30353-8660 <hr/> Purpose of Disbursement Insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-14140 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 31934.21

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**37265.83**

**TOTAL** This Period (last page this line number only) ..... ▶

# Schedule B-P ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.** Full Name (Last, First, Middle Initial)  
ADP

Mailing Address 4101 Doie Cope Road  
Suite 110

City Raleigh State NC Zip Code 27613

Purpose of Disbursement Salary  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23-14134  
Date of Disbursement  
05 / 15 / 2008

Amount of Each Disbursement this Period  
21302.15

See Attached Memo Entry

**B.** Full Name (Last, First, Middle Initial)  
Lora M. Haggard

Mailing Address 29 Briarwood Drive

City Ringgold State GA Zip Code 30736

Purpose of Disbursement Salary  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23-14134-10000  
Date of Disbursement  
05 / 15 / 2008

Amount of Each Disbursement this Period  
3205.29

[MEMO ITEM]  
Memo Entry

**C.** Full Name (Last, First, Middle Initial)  
Susan Jackson

Mailing Address 221 Ironwoods Dr.

City Chapel Hill State NC Zip Code 27516

Purpose of Disbursement Salary  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23-14134-20000  
Date of Disbursement  
05 / 15 / 2008

Amount of Each Disbursement this Period  
1588.73

[MEMO ITEM]  
Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 21302.15

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Edward L Niles  Mailing Address 605 Jones Ferry Road Apt TT14  City Carrboro State NC Zip Code 27510  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-14134-30000 Date of Disbursement 05 / 15 / 2008  Amount of Each Disbursement this Period 582.38  <b>[MEMO ITEM]</b> Memo Entry
<b>B.</b>	Full Name (Last, First, Middle Initial) Jay Petterson  Mailing Address 1415 Chapin Street, NW Unit #2  City Washington State DC Zip Code 20009  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-14134-40000 Date of Disbursement 05 / 15 / 2008  Amount of Each Disbursement this Period 2355.09  <b>[MEMO ITEM]</b> Memo Entry
<b>C.</b>	Full Name (Last, First, Middle Initial) Jessica Lynn TeSelle  Mailing Address 1304 Drewhill Lane  City Chapel Hill State NC Zip Code 27514  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-14134-50000 Date of Disbursement 05 / 15 / 2008  Amount of Each Disbursement this Period 1541.49  <b>[MEMO ITEM]</b> Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# Schedule B-P ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) John Dervin	Transaction ID: SB23-14134-60000 Date of Disbursement 05 / 15 / 2008
	Mailing Address 105-C Barksdale Drive	Amount of Each Disbursement this Period 1880.03
	City Chapel Hill State NC Zip Code 27516	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	[MEMO ITEM] Memo Entry

B.	Full Name (Last, First, Middle Initial) Matthew L Nelson	Transaction ID: SB23-14134-70000 Date of Disbursement 05 / 15 / 2008
	Mailing Address 2025 Freeport Drive	Amount of Each Disbursement this Period 3063.03
	City Cary State NC Zip Code 27519	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	[MEMO ITEM] Memo Entry

C.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: SB23-14134-80000 Date of Disbursement 05 / 15 / 2008
	Mailing Address 4101 Doie Cope Road Suite 110	Amount of Each Disbursement this Period 7086.11
	City Raleigh State NC Zip Code 27613	
	Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	[MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

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(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	Full Name (Last, First, Middle Initial) ADP  Mailing Address 4101 Doie Cope Road Suite 110  City Raleigh State NC Zip Code 27613  Purpose of Disbursement Payroll Services Candidate Name <span style="float: right;">Category/Type</span>  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-14277 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 8  Amount of Each Disbursement this Period 137.00
<b>B.</b>	Full Name (Last, First, Middle Initial) BB&T  Mailing Address Branch 12501  City Alexandria State VA Zip Code 22314  Purpose of Disbursement Bank Charges Candidate Name <span style="float: right;">Category/Type</span>  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-14270 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 0 / 2 0 0 8  Amount of Each Disbursement this Period 993.06
<b>C.</b>	Full Name (Last, First, Middle Initial) The Synetech Group, Inc.  Mailing Address 1228 Cedars Court Suite E  City Charlottesville State VA Zip Code 22903  Purpose of Disbursement Consulting/ Contrib. Processing Candidate Name <span style="float: right;">Category/Type</span>  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-14241 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 8  Amount of Each Disbursement this Period 10016.92

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>11146.98</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) Susan Jackson  Mailing Address 221 Ironwoods Dr.  City Chapel Hill State NC Zip Code 27516  Purpose of Disbursement Auto Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14242 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 8  Amount of Each Disbursement this Period 382.12
B.	Full Name (Last, First, Middle Initial) ADP  Mailing Address 4101 Doie Cope Road Suite 110  City Raleigh State NC Zip Code 27613  Purpose of Disbursement Payroll Services Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14278 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 8  Amount of Each Disbursement this Period 197.76
C.	Full Name (Last, First, Middle Initial) AT&T Long Distance  Mailing Address PO Box 660688  City Dallas State TX Zip Code 75266-0688  Purpose of Disbursement Telephone Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-14271 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8  Amount of Each Disbursement this Period 347.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

926.88

**TOTAL** This Period (last page this line number only) ..... ▶

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) ADP</p> <p>Mailing Address 4101 Doie Cope Road Suite 110</p> <p>City Raleigh State NC Zip Code 27613</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-14267 <b>Date of Disbursement:</b> 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 19083.32</p> <p>See Attached Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Lora M. Haggard</p> <p>Mailing Address 29 Briarwood Drive</p> <p>City Ringgold State GA Zip Code 30736</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-14267-10000 <b>Date of Disbursement:</b> 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 3205.29</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Susan Jackson</p> <p>Mailing Address 221 Ironwoods Dr.</p> <p>City Chapel Hill State NC Zip Code 27516</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-14267-20000 <b>Date of Disbursement:</b> 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 1588.73</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

19083.32

**TOTAL** This Period (last page this line number only) ..... ▶

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jay Petterson</p> <p>Mailing Address 1415 Chapin Street, NW Unit #2</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-14267-30000 <b>Date of Disbursement</b> 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 2355.09</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jessica Lynn TeSelle</p> <p>Mailing Address 1304 Drewhill Lane</p> <p>City Chapel Hill State NC Zip Code 27514</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-14267-40000 <b>Date of Disbursement</b> 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 1541.48</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) John Dervin</p> <p>Mailing Address 105-C Barksdale Drive</p> <p>City Chapel Hill State NC Zip Code 27516</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-14267-50000 <b>Date of Disbursement</b> 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 1880.03</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶



# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	Full Name (Last, First, Middle Initial) J.E. Ladd & Son  Mailing Address 112 N. Benjamin  City Durham State NC Zip Code 27703  Purpose of Disbursement Auto Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-14243 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 8  Amount of Each Disbursement this Period 425.00
<b>B.</b>	Full Name (Last, First, Middle Initial) BB&T  Mailing Address Branch 12501  City Alexandria State VA Zip Code 22314  Purpose of Disbursement Bank Charges Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-14282 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 8  Amount of Each Disbursement this Period 587.83
<b>C.</b>	Full Name (Last, First, Middle Initial) Unitemized Line 23 Expenditures  Mailing Address  City State Zip Code  Purpose of Disbursement Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23UNITEMIZED-1 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 8  Amount of Each Disbursement this Period 0.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1012.83</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>124491.40</b>

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) G Anthony Bertig <hr/> Mailing Address 121 Lincolnway <hr/> City Valparaiso State IN Zip Code 46383-5637 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-14130 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1800.00
B.	Full Name (Last, First, Middle Initial) O. Wendell Horne <hr/> Mailing Address 850 Walnut Street <hr/> City Macon State GA Zip Code 31201 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-14131 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2300.00
C.	Full Name (Last, First, Middle Initial) Nathaniel Toben <hr/> Mailing Address 207 Waterside Dr <hr/> City Carrboro State NC Zip Code 27510-1288 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-14141 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2300.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) Robert Huffman	Transaction ID: SB28A-14178 Date of Disbursement 05 / 20 / 2008
	Mailing Address 110 South Washington Street	Amount of Each Disbursement this Period 2300.00
	City Monroe State NC Zip Code 28112	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Margaret Abrams	Transaction ID: SB28A-14193 Date of Disbursement 05 / 21 / 2008
	Mailing Address 5101 Huntingwood Dr	Amount of Each Disbursement this Period 2300.00
	City Raleigh State NC Zip Code 27606-9639	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Herbert Abrams	Transaction ID: SB28A-14194 Date of Disbursement 05 / 21 / 2008
	Mailing Address 620 Sand Hill road, ap't 109g	Amount of Each Disbursement this Period 950.00
	City palo alto State CA Zip Code 94304	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5550.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) Caryn Acker Mailing Address 8621 Hendrie Blvd City Huntington Woods State MI Zip Code 48070-1619 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-14195 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8 Amount of Each Disbursement this Period 2300.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Ronald Adrianse Mailing Address 1523A 19th Ave City Seattle State WA Zip Code 98122-2850 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-14196 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8 Amount of Each Disbursement this Period 1800.00 Category/Type
C.	Full Name (Last, First, Middle Initial) Michael Anderson Mailing Address 211 Drummond Dr City Raleigh State NC Zip Code 27609-7002 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-14197 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8 Amount of Each Disbursement this Period 2300.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ..... ▶

6400.00

TOTAL This Period (last page this line number only) ..... ▶

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Seth Armstrong  Mailing Address 2222 16th Ave E  City Seattle State WA Zip Code 98112-2109  Purpose of Disbursement Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-14198 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8	Amount of Each Disbursement this Period  160.81
<b>B.</b>	Full Name (Last, First, Middle Initial) Joan W Arnow  Mailing Address 14 Butler Rd  City Scarsdale State NY Zip Code 10583-1618  Purpose of Disbursement Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-14199 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8	Amount of Each Disbursement this Period  2300.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Karen Bahl  Mailing Address 809 Ridge Rd S  City Preston State MN Zip Code 55965-1216  Purpose of Disbursement Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-14200 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8	Amount of Each Disbursement this Period  2300.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**4760.81**

**TOTAL** This Period (last page this line number only) ..... ▶

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) David Beecher	Transaction ID: SB28A-14201 Date of Disbursement 05 / 21 / 2008
	Mailing Address 337 Robin Hill St	Amount of Each Disbursement this Period 1600.00
	City Marlborough State MA Zip Code 01752-8022	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Janet Beger	Transaction ID: SB28A-14202 Date of Disbursement 05 / 21 / 2008
	Mailing Address 1612 Maplewood Dr	Amount of Each Disbursement this Period 4600.00
	City Rockford State IL Zip Code 61107-1877	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bjarne Berg	Transaction ID: SB28A-14203 Date of Disbursement 05 / 21 / 2008
	Mailing Address 145 Steeplechase Ave	Amount of Each Disbursement this Period 2300.00
	City Mooresville State NC Zip Code 28117-9179	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	8500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) Andy Birchfield <hr/> Mailing Address 9813 Wynchase Cir <hr/> City Montgomery State AL Zip Code 36117-5185 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-14204 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2500.00
B.	Full Name (Last, First, Middle Initial) Bonnie Bradley <hr/> Mailing Address 8 Hampshire Ct <hr/> City Ladera Ranch State CA Zip Code 92694-1411 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-14205 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 529.00
C.	Full Name (Last, First, Middle Initial) Arnold R Brody <hr/> Mailing Address 1910 Glenmartin Dr <hr/> City Raleigh State NC Zip Code 27615-4700 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-14206 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2300.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5329.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) Anthony M Cafaro	Transaction ID: SB28A-14207 Date of Disbursement 05 / 21 / 2008
	Mailing Address 1374 Warner Rd	Amount of Each Disbursement this Period 2300.00
	City Hubbard State OH Zip Code 44425-2755	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Verlyn B Calhoun	Transaction ID: SB28A-14208 Date of Disbursement 05 / 21 / 2008
	Mailing Address 4155 Lomac St Ste G	Amount of Each Disbursement this Period 2500.00
	City Montgomery State AL Zip Code 36106-2864	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Michael Cucchiara	Transaction ID: SB28A-14209 Date of Disbursement 05 / 21 / 2008
	Mailing Address 81 Meadow Ridge Ln	Amount of Each Disbursement this Period 2100.00
	City Chapel Hill State NC Zip Code 27517-8810	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6900.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Thomas F Curnin

Transaction ID: SB28A-14210  
Date of Disbursement

Mailing Address 40 Ocean Ave

/   /

City Larchmont State NY Zip Code 10538-4236

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution Refund

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Peter Strand

Transaction ID: SB28A-14211  
Date of Disbursement

Mailing Address 574 Lado Dr

/   /

City Goleta State CA Zip Code 93111-1520

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution Refund

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Jonathan Dorris

Transaction ID: SB28A-14212  
Date of Disbursement

Mailing Address 72 Callabell Rd

/   /

City Louisville State KY Zip Code 40206-2224

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution Refund

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	Full Name (Last, First, Middle Initial) Thiele Dunaway  Mailing Address 7254 Cutting Blvd  City El Cerrito State CA Zip Code 94530-1826  Purpose of Disbursement Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-14213 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8  Amount of Each Disbursement this Period 150.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Frayda Feldman  Mailing Address 4 Helena Dr  City Chappaqua State NY Zip Code 10514-1905  Purpose of Disbursement Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-14214 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8  Amount of Each Disbursement this Period 2300.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Marilyn M Forbes  Mailing Address 52B Las Tres  City Galisteo State NM Zip Code 87540-9663  Purpose of Disbursement Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-14215 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8  Amount of Each Disbursement this Period 2300.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) Michelle Fotheringham Mailing Address 2286 Carriage Lane #83 City Salt Lake City State UT Zip Code 84117 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-14216 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8 Amount of Each Disbursement this Period 1355.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Anne O Fountain Mailing Address 14009 Clayton Rd City San Jose State CA Zip Code 95127-5202 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-14217 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8 Amount of Each Disbursement this Period 600.00 Category/Type
C.	Full Name (Last, First, Middle Initial) Chris R Freedman Mailing Address 51 Perry St # 2 City Somerville State MA Zip Code 02143-3818 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-14218 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8 Amount of Each Disbursement this Period 4600.00 Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

6555.00

**TOTAL** This Period (last page this line number only) ..... ▶

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b> Full Name (Last, First, Middle Initial) Dennis Gilardi</p> <p>Mailing Address 3301 Kerner Blvd</p> <p>City San Rafael State CA Zip Code 94901-4856</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-14219</p> <p>Date of Disbursement 05 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 2300.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ron Ginsburg</p> <p>Mailing Address 1101 30th St NW Ste 500</p> <p>City Washington State DC Zip Code 20007-3772</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-14220</p> <p>Date of Disbursement 05 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 200.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Andre Sherman</p> <p>Mailing Address 3555 Giddings Ranch Rd</p> <p>City Altadena State CA Zip Code 91001-3800</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-14221</p> <p>Date of Disbursement 05 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 4600.00</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

7100.00

**TOTAL** This Period (last page this line number only) ..... ▶

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Lois Ani Haigazian

Mailing Address 2121 Carnegie Ln

City Redondo Beach State CA Zip Code 90278-3632

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-14222  
Date of Disbursement

05 / 21 / 2008

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)  
Philip Lasher

Mailing Address Cmr 421 Box 688

City APO State AE Zip Code 09056-0688

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-14223  
Date of Disbursement

05 / 21 / 2008

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)  
Richard A Lepping

Mailing Address 1634 Sherman Ave

City Madison State WI Zip Code 53704-5931

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-14224  
Date of Disbursement

05 / 21 / 2008

Amount of Each Disbursement this Period

1580.00

SUBTOTAL of Disbursements This Page (optional) ▶

2080.00

TOTAL This Period (last page this line number only) ▶





# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) J. Cole Portis  Mailing Address 9232 Gainswood  City Montgomery State AL Zip Code 36117-5120  Purpose of Disbursement Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-14231 Date of Disbursement 05 / 21 / 2008  Amount of Each Disbursement this Period 4600.00
B.	Full Name (Last, First, Middle Initial) Edward Hart Rice  Mailing Address 2217 Halcyon Ln  City Vienna State VA Zip Code 22181-3042  Purpose of Disbursement Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-14232 Date of Disbursement 05 / 21 / 2008  Amount of Each Disbursement this Period 2300.00
C.	Full Name (Last, First, Middle Initial) Michael Delijani  Mailing Address 9735 Wilshire Blvd  City Beverly Hills State CA Zip Code 90212-2101  Purpose of Disbursement Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-14233 Date of Disbursement 05 / 21 / 2008  Amount of Each Disbursement this Period 2500.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

9400.00

**TOTAL** This Period (last page this line number only) ..... ▶

# Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Landis Sexton

Transaction ID: SB28A-14234  
Date of Disbursement

Mailing Address 7172 Wynlakes Blvd

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	0	8

City Montgomery State AL Zip Code 36117-7553

Amount of Each Disbursement this Period

1400.00
---------

Purpose of Disbursement  
Contribution Refund

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
John J Sobrato

Transaction ID: SB28A-14235  
Date of Disbursement

Mailing Address 16000 Cuvilly Ct

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	0	8

City Saratoga State CA Zip Code 95070-6376

Amount of Each Disbursement this Period

4600.00
---------

Purpose of Disbursement  
Contribution Refund

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: District:

C.

Full Name (Last, First, Middle Initial)  
Lauren Speeth

Transaction ID: SB28A-14236  
Date of Disbursement

Mailing Address PO Box 431

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	0	8

City Burlingame State CA Zip Code 94011-0431

Amount of Each Disbursement this Period

1550.00
---------

Purpose of Disbursement  
Contribution Refund

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ▶

7550.00
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TOTAL This Period (last page this line number only) ..... ▶

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**Schedule B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.	Full Name (Last, First, Middle Initial) Thomas Taft, Sr	Transaction ID: SB28A-14237
	Mailing Address PO Box 566	Date of Disbursement 05 / 21 / 2008
	City Greenville State NC Zip Code 27835-0566	Amount of Each Disbursement this Period 400.00
	Purpose of Disbursement Contribution Refund	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Nariman Teymourian	Transaction ID: SB28A-14238
	Mailing Address 247 Atherton Ave	Date of Disbursement 05 / 21 / 2008
	City Atherton State CA Zip Code 94027-5436	Amount of Each Disbursement this Period 2300.00
	Purpose of Disbursement Contribution Refund	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Laurie White	Transaction ID: SB28A-14239
	Mailing Address 101 Boulder Cv	Date of Disbursement 05 / 21 / 2008
	City Macon State GA Zip Code 31220-8717	Amount of Each Disbursement this Period 40.00
	Purpose of Disbursement Contribution Refund	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2740.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**Schedule B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Bettina Lawton

Mailing Address 2303 Riviera Dr

City Vienna State VA Zip Code 22181-3116

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A-14240

Date of Disbursement

05 / 22 / 2008

Amount of Each Disbursement this Period

2100.00

SUBTOTAL of Disbursements This Page (optional) .....

2100.00

TOTAL This Period (last page this line number only) .....

98139.37

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11  
 12

NAME OF COMMITTEE (In Full)  
 John Edwards for President

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> SIA - Stallings			Nature of Debt (Purpose): Liability Insurance
Mailing Address 4007 Dr. ML King Jr. Boulevard			
City New Bern	State NC	ZIP Code 28562	

Outstanding Balance Beginning This Period		<b>Transaction ID: SD-244</b>	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="120.00"/>	<input type="text" value="0.00"/>	<input type="text" value="120.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Edward L Niles			Nature of Debt (Purpose): Mileage
Mailing Address 25 Vinton St., #1			
City Boston	State MA	ZIP Code 02127	

Outstanding Balance Beginning This Period		<b>Transaction ID: SD-232</b>	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="1301.71"/>	<input type="text" value="681.80"/>	<input type="text" value="619.91"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> American Express			Nature of Debt (Purpose): Travel
Mailing Address PO Box 650448			
City Dallas	State TX	ZIP Code 75265-0448	

Outstanding Balance Beginning This Period		<b>Transaction ID: SD-219</b>	
<input type="text" value="14923.16"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="11927.42"/>	<input type="text" value="14923.16"/>	<input type="text" value="11927.42"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="12667.33"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 67 / 70
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12

NAME OF COMMITTEE (In Full)  
 John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Principal Financial Group	Nature of Debt (Purpose): Insurance/Benefits
Mailing Address PO Box 14513	
City State ZIP Code Des Moines IA 50306-3513	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: SD-236</b>	
Amount Incurred This Period 6607.12	Payment This Period 4232.72	Outstanding Balance at Close of This Period 2374.40

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Ryan, Phillips, Utrecht & MacKinnon	Nature of Debt (Purpose): Legal Fees
Mailing Address 1133 Connecticut Avenue, NW Suite 300	
City State ZIP Code Washington DC 20036	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: SD-233</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor NGP Software, Inc.	Nature of Debt (Purpose): Database Module
Mailing Address 1225 I Street, NW Suite 1225	
City State ZIP Code Washington DC 20005	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: SD-235</b>	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>3874.40</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11  
 12

NAME OF COMMITTEE (In Full)  
 John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor ShipOnSite	Nature of Debt (Purpose): Shipping
Mailing Address 300 Market Street	
City State ZIP Code Chapel Hill NC 27516	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: SD-242</b>	
Amount Incurred This Period 83.77	Payment This Period 0.00	Outstanding Balance at Close of This Period 83.77

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Covad Communications Dept. 33258	Nature of Debt (Purpose): Technology Expense
Mailing Address PO Box 39000	
City State ZIP Code San Francisco CA 94139-3258	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: SD-234</b>	
Amount Incurred This Period 4024.55	Payment This Period 2024.55	Outstanding Balance at Close of This Period 2000.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Soundpath Conferencing	Nature of Debt (Purpose): Technology Expense
Mailing Address PO Box 33667	
City State ZIP Code Washington DC 20033-3667	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: SD-238</b>	
Amount Incurred This Period 7.69	Payment This Period 0.00	Outstanding Balance at Close of This Period 7.69

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>2091.46</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

11  
 12

NAME OF COMMITTEE (In Full)  
 John Edwards for President

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Shred-It North Carolina			Nature of Debt (Purpose): Office Expense
Mailing Address PO Box 669			
City Alamance	State NC	ZIP Code 27201	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID: SD-237</b>	
Amount Incurred This Period <input type="text" value="125.52"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="125.52"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Rights Group, LLC			Nature of Debt (Purpose): Consulting/Internet
Mailing Address 86 Chambers Street Suite 701			
City New York	State NY	ZIP Code 10007	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID: SD-241</b>	
Amount Incurred This Period <input type="text" value="1500.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1500.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Premiere Global Services Data Communications Division			Nature of Debt (Purpose): Technology Expense
Mailing Address 1268 Paysphere Circle			
City Chicago	State IL	ZIP Code 60674	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID: SD-243</b>	
Amount Incurred This Period <input type="text" value="1564.90"/>	Payment This Period <input type="text" value="1489.90"/>	Outstanding Balance at Close of This Period <input type="text" value="75.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="1700.52"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**Schedule D-P**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 70 / 70	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12

NAME OF COMMITTEE (In Full)  
 John Edwards for President

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor McLean Building Company			Nature of Debt (Purpose): Janitorial
Mailing Address 202 South Greensboro Street			
City Carrboro	State NC	ZIP Code 27517	

Outstanding Balance Beginning This Period		Transaction ID: SD-240	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
800.00	0.00	800.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	800.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	21133.71
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	21133.71