

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Westmoreland for Congress

ADDRESS (number and street) P.O. Box 458
 Check if different than previously reported. (ACC)
Sharpsburg GA 30277

2. **FEC IDENTIFICATION NUMBER** C00387126
CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
GA 03

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 07 15 2008 in the State of GA
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 04 01 2008 through 06 25 2008

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 Ann Hand

Signature of Treasurer Electronically Filed by Ann Hand Date 07 02 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Westmoreland for Congress

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
2	5

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	113171.84	531597.84
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	1750.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	113171.84	529847.84
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	79165.42	302993.07
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2047.97
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	79165.42	300945.10
8. Cash on Hand at Close of Reporting Period (from Line 27).....	557603.42	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Westmoreland for Congress

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
2	5

Y	Y	Y	Y
2	0	0	8

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

46000.00

269805.00

(ii) Unitemized.....

1600.00

17821.00

(iii) TOTAL of contributions

47600.00

287626.00

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

65571.84

243971.84

(c) Other Political Committees (such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

113171.84

531597.84

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

2047.97

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

113171.84

533645.81

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	79165.42	302993.07
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	5000.00	131000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	750.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1750.00
21. OTHER DISBURSEMENTS.....	19750.00	57550.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	103915.42	493293.07

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	548347.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	113171.84
25. SUBTOTAL (add Line 23 and Line 24).....	661518.84
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	103915.42
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	557603.42

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 5 / 79
(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
Action Comm. for Rural Electrificat. PAC

Mailing Address 4301 Wilson Blvd

City Arlington State VA Zip Code 22203-1867

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt MM / DD / YYYY
05 / 02 / 2008

Transaction ID: 80626.C5895

Amount of Each Receipt this Period 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Anheuser-Busch PAC

Mailing Address 1 Busch PI # 202-5

City Saint Louis State MO Zip Code 63118-1849

FEC ID number of contributing federal political committee. **C** C00034488

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4900.00

Date of Receipt MM / DD / YYYY
04 / 14 / 2008

Transaction ID: 80416.C5880

Amount of Each Receipt this Period 2500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Association of American Railroads PAC

Mailing Address 50 F St NW

City Washington State DC Zip Code 20001-1530

FEC ID number of contributing federal political committee. **C** C00280743

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt MM / DD / YYYY
05 / 02 / 2008

Transaction ID: 80626.C5898

Amount of Each Receipt this Period 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 6500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
AT&T PAC
Mailing Address 175 E Houston St Rm 7-A-50
City San Antonio State TX Zip Code 78205-2255
FEC ID number of contributing federal political committee. **C** C00109017
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00
Date of Receipt MM / DD / YYYY
05 / 16 / 2008
Transaction ID: 80626.C5913
Amount of Each Receipt this Period 1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
AT&T PAC
Mailing Address 175 E Houston St Rm 7-A-50
City San Antonio State TX Zip Code 78205-2255
FEC ID number of contributing federal political committee. **C** C00109017
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt MM / DD / YYYY
05 / 16 / 2008
Transaction ID: 80626.C5910
Amount of Each Receipt this Period 1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
BNSF RailPAC
Mailing Address PO Box 961039
City Fort Worth State TX Zip Code 76161-0039
FEC ID number of contributing federal political committee. **C** C00235739
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4500.00
Date of Receipt MM / DD / YYYY
05 / 02 / 2008
Transaction ID: 80626.C5899
Amount of Each Receipt this Period 2000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
Coca-Cola Enterprises PAC

Mailing Address Attn: Gene Rackley
P.O. Box 723040

City Atlanta State GA Zip Code 31139-0040

FEC ID number of contributing federal political committee. **C** C00250134

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 05 / 02 / 2008
Transaction ID: 80626.C5904
 Amount of Each Receipt this Period 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
CSX Corp. Good Govt Fund

Mailing Address 1331 Pennsylvania Ave NW Ste 560
Attn: Stephen R. Rippin

City Washington State DC Zip Code 20004-1745

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 05 / 02 / 2008
Transaction ID: 80626.C5900
 Amount of Each Receipt this Period 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Dealers Election Action Committee of

Mailing Address National Auto Dealers Association
8400 Westpark Drive

City Mc Lean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 04 / 14 / 2008
Transaction ID: 80416.C5881
 Amount of Each Receipt this Period 2500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 6500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
Every Republican is Crucial - ERICPAC

Mailing Address 25 E Main St Ste 200
Attn: Congressman Eric Cantor

City Richmond State VA Zip Code 23219-2109

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt MM / DD / YYYY
06 / 12 / 2008

Transaction ID: 80626.C5973

Amount of Each Receipt this Period 5000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
FAA Managers Association PAC

Mailing Address 4410 Massachusetts Ave NW # 315

City Washington State DC Zip Code 20016-5561

FEC ID number of contributing federal political committee. **C** C00366070

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt MM / DD / YYYY
05 / 28 / 2008

Transaction ID: 80626.C5944

Amount of Each Receipt this Period 5000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Georgia Oilmens Assoc. PAC

Mailing Address 1775 Spectrum Drive
Suite 100

City Lawrenceville State GA Zip Code 30043

FEC ID number of contributing federal political committee. **C** C00319194

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
06 / 12 / 2008

Transaction ID: 80626.C5974

Amount of Each Receipt this Period 500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 10500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
Georgia Power Company PAC

Mailing Address 241 Ralph McGill Blvd NE
Bin 10230

City Atlanta State GA Zip Code 30308-3374

FEC ID number of contributing federal political committee. **C** C00119776

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

Date of Receipt 04 / 14 / 2008
Transaction ID: 80416.C5879
 Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
GOPAC America

Mailing Address PO Box 365

City Mc Lean State VA Zip Code 22101-0365

FEC ID number of contributing federal political committee. **C** C00435594

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 06 / 12 / 2008
Transaction ID: 80626.C5971
 Amount of Each Receipt this Period 5000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Home Depot Inc., PAC

Mailing Address 101 Constitution Ave NW Ste 800W

City Washington State DC Zip Code 20001-2127

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 05 / 28 / 2008
Transaction ID: 80626.C5941
 Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 7000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
Home Depot Inc., PAC
Mailing Address 101 Constitution Ave NW Ste 800W
City Washington State DC Zip Code 20001-2127
FEC ID number of contributing federal political committee. **C** C00284885
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 7000.00
Date of Receipt 05 / 30 / 2008
Transaction ID: 80626.C5964
Amount of Each Receipt this Period 5000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Home Depot Inc., PAC
Mailing Address 101 Constitution Ave NW Ste 800W
City Washington State DC Zip Code 20001-2127
FEC ID number of contributing federal political committee. **C** C00284885
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00
Date of Receipt 05 / 30 / 2008
Transaction ID: 80626.C5963
Amount of Each Receipt this Period 3000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
ITW Better Government Committee
Mailing Address 3600 W Lake Ave
City Glenview State IL Zip Code 60026-1215
FEC ID number of contributing federal political committee. **C** C00000042
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 05 / 16 / 2008
Transaction ID: 80626.C5908
Amount of Each Receipt this Period 1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 9000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
McKenna Long Aldridge PAC

Mailing Address 303 Peachtree St.
Suite 5300

City Atlanta State GA Zip Code 30308

FEC ID number of contributing federal political committee. **C** C00391383

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2071.84

Date of Receipt: 05 / 29 / 2008
Transaction ID: 80627.C5997
 Amount of Each Receipt this Period: 1071.84
 In-Kind
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 Event Reception Expense

B. Full Name (Last, First, Middle Initial)
Natl Air Traffic Controllers Assoc PAC

Mailing Address 1325 Massachusetts Ave NW

City Washington State DC Zip Code 20005-4171

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 05 / 02 / 2008
Transaction ID: 80626.C5902
 Amount of Each Receipt this Period: 3000.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
National Beer Wholesalers Assoc PAC

Mailing Address 1101 King St Ste 600

City Alexandria State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 06 / 20 / 2008
Transaction ID: 80626.C5993
 Amount of Each Receipt this Period: 2500.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **6571.84**

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
NRA Political Victory PAC

Mailing Address 11250 Waples Mill Road
Attn: Brandi Graham Pensoneau

City State Zip Code
Fairfax VA 22030-7400

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: 80626.C5896

Amount of Each Receipt this Period
1500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Orthopaedic PAC

Mailing Address 317 Massachusetts Ave NE

City State Zip Code
Washington DC 20002-5769

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: 80626.C5903

Amount of Each Receipt this Period
3000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
PHCC - PAC

Mailing Address 160 S Washington St

City State Zip Code
Falls Church VA 22046-2919

FEC ID number of contributing federal political committee. **C** C00157875

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 3 1 / 2 0 0 8

Transaction ID: 118

Amount of Each Receipt this Period
1000.00

MEMO
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Supporting Info from Prev. Period

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
PHCC - PAC
Mailing Address 160 S Washington St
City Falls Church State VA Zip Code 22046-2919
FEC ID number of contributing federal political committee. **C** C00157875
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 6000.00
Date of Receipt 04 / 16 / 2008
Transaction ID: 80416.C5885
Amount of Each Receipt this Period 1000.00
Redesignation FROM Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
PHCC - PAC
Mailing Address 160 S Washington St
City Falls Church State VA Zip Code 22046-2919
FEC ID number of contributing federal political committee. **C** C00157875
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 6000.00
Date of Receipt 04 / 16 / 2008
Transaction ID: 80416.C5884
Amount of Each Receipt this Period -1000.00
Redesignation TO Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
Powell Goldstein LLP PAC
Mailing Address Attn: Joel Williams
1201 W. Peachtree St., NW
City Atlanta State GA Zip Code 30309-3471
FEC ID number of contributing federal political committee. **C** C00218891
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00
Date of Receipt 05 / 30 / 2008
Transaction ID: 80626.C5961
Amount of Each Receipt this Period 500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
PricewaterhouseCoopers PAC

Mailing Address 1900 K St NW
Attn: Allen Weltmann

City Washington State DC Zip Code 20006-1108

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 05 / 28 / 2008
Transaction ID: 80626.C5942
 Amount of Each Receipt this Period 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Red Rooster Leadership PAC

Mailing Address Attn: Congressman Nathan Deal
228 S Washington St Ste 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00424184

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 05 / 28 / 2008
Transaction ID: 80626.C5943
 Amount of Each Receipt this Period 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Troutman Sanders PAC

Mailing Address Bank of America Plaza, Ste 5200
600 Peachtree Street, N.E.

City Atlanta State GA Zip Code 30308-2216

FEC ID number of contributing federal political committee. **C** C00311142

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 05 / 02 / 2008
Transaction ID: 80626.C5897
 Amount of Each Receipt this Period 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **6000.00**

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 15 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
Union Pacific Fund for Good Govt PAC

Mailing Address 600 Thirteenth St., NW
Suite 340

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: 80626.C5901

Amount of Each Receipt this Period
2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Watkins PAC

Mailing Address Attn: Rogers Wade
P.O. Box 1738

City State Zip Code
Atlanta GA 30301-1738

FEC ID number of contributing federal political committee. **C** C00142307

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 3 0 / 2 0 0 8

Transaction ID: 80626.C5962

Amount of Each Receipt this Period
2500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4500.00

TOTAL This Period (last page this line number only) ► 65571.84

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 79
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
Ronald Barfield

Mailing Address 1007 W Gordon St

City State Zip Code
Thomaston GA 30286-3428

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Adams, Barfield, Evans et. al Attorney

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 28 / 2008

Transaction ID: 80626.C5924

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Clayton Barker

Mailing Address 4779 Sedberry Hill Ct SE

City State Zip Code
Atlanta GA 30339-5362

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mueller Water Products, Inc. General Counsel

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 30 / 2008

Transaction ID: 80626.C5957

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Thomas Bell

Mailing Address 40 Valley Rd NW

City State Zip Code
Atlanta GA 30305-1116

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Cousins Properties CEO

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 12 / 2008

Transaction ID: 80626.C5970

Amount of Each Receipt this Period
2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Scott Blackstock

Mailing Address 1839 Woodland Rd

City State Zip Code
Thomaston GA 30286-4933

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SS Blackstock President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 28 / 2008

Transaction ID: 80626.C5925

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
George Bowen

Mailing Address 50 Hurt Plz SE Ste 985

City State Zip Code
Atlanta GA 30303-2941

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GTMA Government Affairs

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 28 / 2008

Transaction ID: 80626.C5918

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Robert Bowers

Mailing Address 1205 Stuart Rdg

City State Zip Code
Alpharetta GA 30022-6364

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Wells Real Estate Funds CFO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: 80626.C5990

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Anna Cablik

Mailing Address 1513 Johnson Ferry Rd

City State Zip Code
Marietta GA 30062-8101

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Anatek, Inc. CEO

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
06 / 12 / 2008

Transaction ID: 80626.C5969

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Ed Clark

Mailing Address 112 Sweetwater Oaks

City State Zip Code
Peachtree City GA 30269-2110

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Atlanta Motor Speedway Owner

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
06 / 20 / 2008

Transaction ID: 80626.C5988

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Margaret Clarke

Mailing Address 2960 Millwater Xing

City State Zip Code
Dacula GA 30019-3201

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
None Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
05 / 28 / 2008

Transaction ID: 80626.C5921

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
Jay Copley
Mailing Address 7305 Sesame St
City Columbus State GA Zip Code 31909-2636
FEC ID number of contributing federal political committee. **C**

Date of Receipt MM / DD / YYYY
06 / 12 / 2008
Transaction ID: 80626.C5968
Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Information Requested Occupation Information Requested
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

B. Full Name (Last, First, Middle Initial)
Anne Eldridge
Mailing Address 3886 Northside Dr NW
City Atlanta State GA Zip Code 30342-4044
FEC ID number of contributing federal political committee. **C**

Date of Receipt MM / DD / YYYY
06 / 20 / 2008
Transaction ID: 80626.C5991
Amount of Each Receipt this Period 500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Self Employed Occupation Lumber Company
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 850.00

C. Full Name (Last, First, Middle Initial)
Linda Evans
Mailing Address 1500 Soaring Hawk Pt
City Atlanta State GA Zip Code 30339-5661
FEC ID number of contributing federal political committee. **C**

Date of Receipt MM / DD / YYYY
05 / 30 / 2008
Transaction ID: 80626.C5959
Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Self Employed Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

SUBTOTAL of Receipts This Page (optional) 2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 79
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
Michael Faulkner

Mailing Address 235 Creek View Trail

City Fayetteville State GA Zip Code 30214-7231

FEC ID number of contributing federal political committee. **C**

Name of Employer: Faulkner Commercial Group, Inc
Occupation: Real Estate Broker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2008

Transaction ID: 80626.C5948

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Robert Fauls

Mailing Address 308 Watermark Dr

City Peachtree Cty State GA Zip Code 30269-6649

FEC ID number of contributing federal political committee. **C**

Name of Employer: Southern Freight
Occupation: Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2008

Transaction ID: 80626.C5955

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Larry Galbraith

Mailing Address 6337 Brookstone Blvd

City Columbus State GA Zip Code 31904-2993

FEC ID number of contributing federal political committee. **C**

Name of Employer: Denim North America
Occupation: Textiles

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2008

Transaction ID: 80626.C5935

Amount of Each Receipt this Period
700.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1950.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
Larry Galbraith

Mailing Address 6337 Brookstone Blvd

City State Zip Code
Columbus GA 31904-2993

FEC ID number of contributing federal political committee. C

Name of Employer Denim North America Occupation Textiles

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt

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

Transaction ID: 80626.C5934

Amount of Each Receipt this Period
1300.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mildred Godard

Mailing Address 100 E Club Dr

City State Zip Code
Carrollton GA 30117-4107

FEC ID number of contributing federal political committee. C

Name of Employer None Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	0	8

Transaction ID: 80626.C5911

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mark Griswell

Mailing Address PO Box 328

City State Zip Code
Jonesboro GA 30237-0328

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Real Estate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt

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

Transaction ID: 80626.C5894

Amount of Each Receipt this Period
1500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	3800.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
Russell Grizzle

Mailing Address 307 Lakeshore Dr

City Lagrange State GA Zip Code 30240-1024

FEC ID number of contributing federal political committee. **C**

Name of Employer Milliken & Company Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 05 / 28 / 2008
Transaction ID: 80626.C5920
 Amount of Each Receipt this Period: 250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Thomas Guzzo

Mailing Address PO Box 2942

City Peachtree City State GA Zip Code 30269-0942

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 04 / 14 / 2008
Transaction ID: 80416.C5875
 Amount of Each Receipt this Period: 500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
William Headley

Mailing Address PO Box 719

City Newnan State GA Zip Code 30264-0719

FEC ID number of contributing federal political committee. **C**

Name of Employer Headley Construction Co. Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 05 / 28 / 2008
Transaction ID: 80626.C5926
 Amount of Each Receipt this Period: 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 23 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
Jacob Heaton

Mailing Address 114 Lees Lake Rd

City Fayetteville State GA Zip Code 30214-3163

FEC ID number of contributing federal political committee. **C**

Name of Employer Heaton Erecting, Inc. Occupation Contractor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 05 / 02 / 2008
Transaction ID: 80626.C5893
 Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Neil Hightower

Mailing Address 555 Peachbelt Rd

City Thomaston State GA Zip Code 30286-5459

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 04 / 14 / 2008
Transaction ID: 80416.C5878
 Amount of Each Receipt this Period 250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Owen Hodges

Mailing Address 702 Mobley Rd

City Columbus State GA Zip Code 31904-2419

FEC ID number of contributing federal political committee. **C**

Name of Employer Swift Spinning, Inc. Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 05 / 28 / 2008
Transaction ID: 80626.C5919
 Amount of Each Receipt this Period 250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 79
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
Doug Hollberg

Mailing Address 812 Maple Dr

City State Zip Code
Griffin GA 30224-4919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hollberg Properties Property Management

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: 80626.C5992

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
George Jeter

Mailing Address 1222 Broadway Ste 101

City State Zip Code
Columbus GA 31901-4244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
05 / 28 / 2008

Transaction ID: 80626.C5929

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Lamar Johnson

Mailing Address 1222 Broadway Ste 104

City State Zip Code
Columbus GA 31901-2492

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Investigator

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
05 / 28 / 2008

Transaction ID: 80626.C5945

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
Samuel Kellett

Mailing Address 1935 Garraux Rd NW

City Atlanta State GA Zip Code 30327-2505

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 06 / 12 / 2008
Transaction ID: 80626.C5976
 Amount of Each Receipt this Period: 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Robert Koon

Mailing Address 514 Spring Harbor Dr

City Columbus State GA Zip Code 31904-9502

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3300.00

Date of Receipt: 05 / 28 / 2008
Transaction ID: 80626.C5930
 Amount of Each Receipt this Period: 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Roger Leithead

Mailing Address 524 Gramercy Dr NE

City Marietta State GA Zip Code 30068-4870

FEC ID number of contributing federal political committee. **C**

Name of Employer Cousins Properties Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 05 / 30 / 2008
Transaction ID: 80626.C5956
 Amount of Each Receipt this Period: 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 26 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
Lisa Long
 Mailing Address 83 Vaughn Rd
 City Newnan State GA Zip Code 30265-1452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Homemaker
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2800.00
 Date of Receipt 05 / 30 / 2008
Transaction ID: 80626.C5952
 Amount of Each Receipt this Period 500.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Bernard Marcus
 Mailing Address 1266 W Paces Ferry Rd NW # 615
 City Atlanta State GA Zip Code 30327-2306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Philanthropist
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
 Date of Receipt 05 / 28 / 2008
Transaction ID: 80626.C5939
 Amount of Each Receipt this Period 1000.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Aaron McWhorter
 Mailing Address 1487 Black Dirt Rd
 City Whitesburg State GA Zip Code 30185-2723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer North Georgia Turf Occupation Owner
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00
 Date of Receipt 06 / 12 / 2008
Transaction ID: 80626.C5975
 Amount of Each Receipt this Period 1000.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial)
Matthew Metcalf

Mailing Address 745 Danbridge Way

City State Zip Code
Roswell GA 30076-3957

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GA Pharmacy Association Government Affairs

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
05 / 30 / 2008

Transaction ID: 80626.C5950

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Raymond Moody

Mailing Address 303 Victoria Pointe

City State Zip Code
Lagrange GA 30240-6309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Batson Cook Company Construction

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
04 / 15 / 2008

Transaction ID: 80416.C5882

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John Pezold

Mailing Address PO Box 4252

City State Zip Code
Columbus GA 31914-0252

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pezold Management Co. President and CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
05 / 28 / 2008

Transaction ID: 80626.C5927

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Noel Poirier

Mailing Address 35 Cove Pt

City State Zip Code
Newnan GA 30263-5933

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Airtran Airways, Inc. Pilot

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
04 / 14 / 2008

Transaction ID: 80416.C5876

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
A Redd

Mailing Address 4200 Northside Pkwy NW Ste 10

City State Zip Code
Atlanta GA 30327-3054

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Redd Realty Services Chairman

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
05 / 28 / 2008

Transaction ID: 80626.C5938

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Narender Reddy

Mailing Address 2265 Sugarloaf Club Dr

City State Zip Code
Duluth GA 30097-7403

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self Employed Real Estate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
05 / 30 / 2008

Transaction ID: 80626.C5951

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

<p>A. Full Name (Last, First, Middle Initial) Jamie Reynolds</p> <p>Mailing Address 2561 Lake Oconee Pkwy</p> <p>City Greensboro State GA Zip Code 30642-3305</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self-Employed Occupation Real Estate</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 05 / 28 / 2008</p> <p>Transaction ID: 80626.C5936</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) David Richardson</p> <p>Mailing Address 300 Bledsoe St Apt B4</p> <p>City Carrollton State GA Zip Code 30117-4058</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer None Occupation Retired</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 760.00</p>	<p>Date of Receipt 05 / 28 / 2008</p> <p>Transaction ID: 80626.C5923</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) Frederick Riley</p> <p>Mailing Address 25 Pine Lake Dr</p> <p>City Newnan State GA Zip Code 30263-3314</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer None Occupation Retired</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 04 / 30 / 2008</p> <p>Transaction ID: 80626.C5914</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Joe Rogers

Mailing Address PO Box 8050

City Norcross State GA Zip Code 30091-8050

FEC ID number of contributing federal political committee. C

Name of Employer Waffle House, Inc. Occupation CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 05 / 28 / 2008

Transaction ID: 80626.C5931

Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
John W. Rooker

Mailing Address 4920 N Royal Atlanta Dr

City Tucker State GA Zip Code 30084-3031

FEC ID number of contributing federal political committee. C

Name of Employer John W. Rooker & Associates Occupation Chairman and CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 05 / 28 / 2008

Transaction ID: 80626.C5940

Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Tracy Sayers

Mailing Address 871 Graystone Dr

City Columbus State GA Zip Code 31904-4304

FEC ID number of contributing federal political committee. C

Name of Employer Pezold Management Co. Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt 05 / 28 / 2008

Transaction ID: 80626.C5928

Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 79
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	
							<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Ray Smith

Mailing Address 850 Edgewater Trail NW

City State Zip Code
Atlanta GA 30328-2825

FEC ID number of contributing federal political committee. **C**

Name of Employer
Marshall and Lueder, LLC

Occupation
Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: 80626.C5986

Amount of Each Receipt this Period

250.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
James Stephenson

Mailing Address PO Box 43326

City State Zip Code
Atlanta GA 30336-0326

FEC ID number of contributing federal political committee. **C**

Name of Employer
Yancey Bros. Co

Occupation
President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: 80626.C5932

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Carlton Stewart

Mailing Address PO Box 331

City State Zip Code
Atlanta GA 30301-0331

FEC ID number of contributing federal political committee. **C**

Name of Employer
The Stewart Group, Inc.

Occupation
Principal

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 80626.C5949

Amount of Each Receipt this Period

250.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 79
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	
							<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Strickland Brockington Lewis LLP

Mailing Address 1170 Peachtree St NE Ste 2000

City Atlanta State GA Zip Code 30309-7691

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008.00

Date of Receipt 06 / 12 / 2008

Transaction ID: 80626.C5972

Amount of Each Receipt this Period 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Anne Lewis

Mailing Address 1170 Peachtree St NE Ste 2000

City Atlanta State GA Zip Code 30309-7691

FEC ID number of contributing federal political committee. **C**

Name of Employer Strickland Brockington Lewis Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 12 / 2008

Transaction ID: 80626.C5979

Amount of Each Receipt this Period 1000.00

Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Partnership->Strickland Brockington Lewis LLP

C.

Full Name (Last, First, Middle Initial)
Frank Strickland

Mailing Address 30 Chatsworth Place NW

City Atlanta State GA Zip Code 30327-1349

FEC ID number of contributing federal political committee. **C**

Name of Employer Strickland Brockington Lewis Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 12 / 2008

Transaction ID: 80626.C5980

Amount of Each Receipt this Period 500.00

Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Partnership->Strickland Brockington Lewis LLP

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Peggy Brockington

Mailing Address 1170 Peachtree St NE Ste 2000

City Atlanta State GA Zip Code 30309-7691

FEC ID number of contributing federal political committee. C

Name of Employer Strickland Brockington Lewis Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 12 / 2008

Transaction ID: 80626.C5981

Amount of Each Receipt this Period 500.00

Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Partnership->Strickland Brockington Lewis LLP

B.

Full Name (Last, First, Middle Initial)
Joe Tanner

Mailing Address 50 Hurt Plz SE Ste 930

City Atlanta State GA Zip Code 30303-2943

FEC ID number of contributing federal political committee. C

Name of Employer Joe Tanner and Associates Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 05 / 30 / 2008

Transaction ID: 80626.C5960

Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
J.A. Walters

Mailing Address 2401 Island Dr

City Gainesville State GA Zip Code 30501-1252

FEC ID number of contributing federal political committee. C

Name of Employer Walters Management Company Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 05 / 30 / 2008

Transaction ID: 80626.C5953

Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Larry Warnock

Mailing Address 303 Smoke Rise Dr

City State Zip Code
Warner Robins GA 31088-6566

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
BRY-MEL Homes, Inc. Builder

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
05 / 30 / 2008

Transaction ID: 80626.C5954

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

1500.00

B.

Full Name (Last, First, Middle Initial)
Tom Watters

Mailing Address 22 Bellemont Dr SW

City State Zip Code
Rome GA 30165-6623

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Syntec Industries Executive

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
05 / 28 / 2008

Transaction ID: 80626.C5922

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

250.00

C.

Full Name (Last, First, Middle Initial)
Raymon White

Mailing Address PO Box 52696

City State Zip Code
Atlanta GA 30355-0696

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Georgia Public Strategies President

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
05 / 30 / 2008

Transaction ID: 80626.C5958

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

2000.00

SUBTOTAL of Receipts This Page (optional) 2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

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

Mailing Address 1072 Farmhouse Rd

City State Zip Code
Gainesville GA 30506-1724

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

500.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: 80626.C5989

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
John Williams

Mailing Address 3625 Cumberland Blvd SE Ste 400

City State Zip Code
Atlanta GA 30339-3374

FEC ID number of contributing federal political committee. C

Name of Employer Corporate Holdings, LLC Occupation President and CEO

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

1000.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2008

Transaction ID: 80626.C5912

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Tim Williams

Mailing Address 3571 Todd Dr

City State Zip Code
Douglasville GA 30135-2548

FEC ID number of contributing federal political committee. C

Name of Employer Greystone Power Corp. Occupation V.P. Corportate Administration

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

2000.00

Date of Receipt
MM / DD / YYYY
05 / 20 / 2008

Transaction ID: 80626.C5915

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 36 / 79	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial) James Zachry		Date of Receipt	
Mailing Address P.O. Box 1048		M M / D D / Y Y Y Y 06 / 20 / 2008	
City Lagrange	State GA	Zip Code 30241-0019	Transaction ID: 80626.C5987
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer LaGrange Grocery Company	Occupation Owner	Receipt	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	46000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) ADP Easypay Atlanta</p> <p>Mailing Address 5680 New Northside Dr NW</p> <p>City Atlanta State GA Zip Code 30328-4668</p> <p>Purpose of Disbursement Payroll Expenses</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2758</p> <p>Date of Disbursement 04 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 87.69</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>PAYROLL EXPENSES</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) ADP Easypay Atlanta</p> <p>Mailing Address 5680 New Northside Dr NW</p> <p>City Atlanta State GA Zip Code 30328-4668</p> <p>Purpose of Disbursement Payroll Taxes</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2759</p> <p>Date of Disbursement 04 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 80.65</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>PAYROLL TAXES</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) ADP Easypay Atlanta</p> <p>Mailing Address 5680 New Northside Dr NW</p> <p>City Atlanta State GA Zip Code 30328-4668</p> <p>Purpose of Disbursement Payroll Expenses</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80627.E2835</p> <p>Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 94.60</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>PAYROLL EXPENSES</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>262.94</p>
<p>TOTAL This Period (last page this line number only)</p>	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

<p>A. Full Name (Last, First, Middle Initial) ADP Easypay Atlanta</p> <p>Mailing Address 5680 New Northside Dr NW</p> <p>City Atlanta State GA Zip Code 30328-4668</p> <p>Purpose of Disbursement Payroll Taxes</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80627.E2836 Date of Disbursement 05 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 161.55</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>PAYROLL TAXES</p>
<p>B. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Transaction Fees</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2757 Date of Disbursement 04 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 59.64</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>TRANSACTION FEES</p>
<p>C. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Transaction Fees</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80627.E2831 Date of Disbursement 05 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 4.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>TRANSACTION FEES</p>

SUBTOTAL of Disbursements This Page (optional)	225.69
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

<p>A. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Transaction Fees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80627.E2832 Date of Disbursement 05 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 14.75</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>TRANSACTION FEES</p>
<p>B. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Transaction Fees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80627.E2833 Date of Disbursement 05 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 5.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>TRANSACTION FEES</p>
<p>C. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Transaction Fees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80627.E2834 Date of Disbursement 05 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 7.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>TRANSACTION FEES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

27.70

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Aristotle

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Transaction Fee
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80626.E2755
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	0	8

Amount of Each Disbursement this Period

8.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

TRANSACTION FEE

B.

Full Name (Last, First, Middle Initial)
Aristotle

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Software
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80626.E2746
Date of Disbursement

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

Amount of Each Disbursement this Period

2247.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SOFTWARE

C.

Full Name (Last, First, Middle Initial)
Aristotle

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Transaction Fees
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80627.E2828
Date of Disbursement

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

Amount of Each Disbursement this Period

71.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

TRANSACTION FEES

SUBTOTAL of Disbursements This Page (optional)

2326.00

TOTAL This Period (last page this line number only)

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) Aristotle	Transaction ID: 80627.E2829
	Mailing Address 205 Pennsylvania Ave SE	Date of Disbursement 05 / 29 / 2008
	City Washington State DC Zip Code 20003-1164	Amount of Each Disbursement this Period 71.00
	Purpose of Disbursement Transaction Fees Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	TRANSACTION FEES

B.	Full Name (Last, First, Middle Initial) Aristotle	Transaction ID: 80626.E2814
	Mailing Address 205 Pennsylvania Ave SE	Date of Disbursement 06 / 23 / 2008
	City Washington State DC Zip Code 20003-1164	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Software Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SOFTWARE

C.	Full Name (Last, First, Middle Initial) Arthur Murphy Florist	Transaction ID: 80626.E2766
	Mailing Address 6 Lagrange St	Date of Disbursement 05 / 23 / 2008
	City Newnan State GA Zip Code 30263-2604	Amount of Each Disbursement this Period 75.50
	Purpose of Disbursement Flowers Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FLOWERS

SUBTOTAL of Disbursements This Page (optional)	5146.50
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
AT&T

Transaction ID: 80406.E2613
Date of Disbursement

Mailing Address 5565 Glenridge Connector NE

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	0	8

City Atlanta State GA Zip Code 30342-4756

Amount of Each Disbursement this Period

120.40

Purpose of Disbursement

Cell Phone

Candidate Name

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

CELL PHONE

State: District:

B.

Full Name (Last, First, Middle Initial)
AT&T

Transaction ID: 80626.E2750
Date of Disbursement

Mailing Address 5565 Glenridge Connector NE

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

City Atlanta State GA Zip Code 30342-4756

Amount of Each Disbursement this Period

111.46

Purpose of Disbursement

Cell Phone

Candidate Name

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

CELL PHONE

State: District:

C.

Full Name (Last, First, Middle Initial)
AT&T

Transaction ID: 80626.E2764
Date of Disbursement

Mailing Address 5565 Glenridge Connector NE

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	8

City Atlanta State GA Zip Code 30342-4756

Amount of Each Disbursement this Period

2336.10

Purpose of Disbursement

Event Tickets

Candidate Name

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

EVENT TICKETS

State: District:

SUBTOTAL of Disbursements This Page (optional)

2567.96

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
AT&T

Mailing Address 5565 Glenridge Connector NE

City Atlanta State GA Zip Code 30342-4756

Purpose of Disbursement

Cell Phone

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80626.E2807

Date of Disbursement

06 / 09 / 2008

Amount of Each Disbursement this Period

116.24

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

CELL PHONE

B.

Full Name (Last, First, Middle Initial)
Bank of Coweta

Mailing Address PO Box 1218

City Newnan State GA Zip Code 30264-1218

Purpose of Disbursement

See Below

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80626.E2678

Date of Disbursement

04 / 28 / 2008

Amount of Each Disbursement this Period

1791.48

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SEE BELOW

C.

Full Name (Last, First, Middle Initial)
Amoco

Mailing Address 3079 Highway 34 E

City Newnan State GA Zip Code 30265-2192

Purpose of Disbursement

Auto Fuel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80626.E2738

Date of Disbursement

04 / 28 / 2008

Amount of Each Disbursement this Period

68.57

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: AUTO FUEL

SUBTOTAL of Disbursements This Page (optional) ▶

1907.72

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
CrystalTech Web Hosting

Transaction ID: 80626.E2740
Date of Disbursement

Mailing Address 1125 W Pinnacle Peak Rd Ste 103
Suite 103

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	8

City Phoenix State AZ Zip Code 85027-1368

Amount of Each Disbursement this Period

26.95

Purpose of Disbursement
Web Hosting

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

[MEMO ITEM]
MEMO: WEB HOSTING

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

State: District:

B.

Full Name (Last, First, Middle Initial)
Delta Airlines

Transaction ID: 80626.E2690
Date of Disbursement

Mailing Address Hartsfield Intl Airport

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	8

City Atlanta State GA Zip Code 30309-

Amount of Each Disbursement this Period

481.50

Purpose of Disbursement
Airfare

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

[MEMO ITEM]
MEMO: AIRFARE

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

State: District:

C.

Full Name (Last, First, Middle Initial)
Locos Deli and Pub

Transaction ID: 80626.E2739
Date of Disbursement

Mailing Address 80 Newnan Station Dr Ste K

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	8

City Newnan State GA Zip Code 30265-3194

Amount of Each Disbursement this Period

28.86

Purpose of Disbursement
Meeting Expense

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

[MEMO ITEM]
MEMO: MEETING EXPENSE

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

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial) Shell Oil <hr/> Mailing Address PO Box 2463 <hr/> City Houston State TX Zip Code 77252-2463 <hr/> Purpose of Disbursement Auto Fuel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80626.E2741 Date of Disbursement <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>4</td><td>/</td><td>2</td><td>8</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	4	/	2	8	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y											
	0	4	/	2	8	/	2	0	0	8											
	Amount of Each Disbursement this Period <table border="1"> <tr> <td>71.61</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: AUTO FUEL	71.61																			
71.61																					
Category/ Type																					
B. Full Name (Last, First, Middle Initial) Ticketmaster <hr/> Mailing Address 370 Bullsboro Dr <hr/> City Raymond State GA Zip Code 30263-1069 <hr/> Purpose of Disbursement Event Ticket Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80626.E2692 Date of Disbursement <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>4</td><td>/</td><td>2</td><td>8</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	4	/	2	8	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y											
	0	4	/	2	8	/	2	0	0	8											
	Amount of Each Disbursement this Period <table border="1"> <tr> <td>518.05</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: EVENT TICKET	518.05																			
518.05																					
Category/ Type																					
C. Full Name (Last, First, Middle Initial) U.S. Postal Service <hr/> Mailing Address 6545 Highway 54 <hr/> City Sharpsburg State GA Zip Code 30277-6909 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80626.E2691 Date of Disbursement <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>4</td><td>/</td><td>2</td><td>8</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	4	/	2	8	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y											
	0	4	/	2	8	/	2	0	0	8											
	Amount of Each Disbursement this Period <table border="1"> <tr> <td>204.57</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: POSTAGE	204.57																			
204.57																					
Category/ Type																					

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

<p>A. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 660108</p> <p>City Dallas State TX Zip Code 75266-0108</p> <p>Purpose of Disbursement Cell Phone</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2742</p> <p>Date of Disbursement 04 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 178.15</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: CELL PHONE</p>
<p>B. Full Name (Last, First, Middle Initial) Bank of Coweta</p> <p>Mailing Address PO Box 1218</p> <p>City Newnan State GA Zip Code 30264-1218</p> <p>Purpose of Disbursement See Below</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2763</p> <p>Date of Disbursement 05 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 4135.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>SEE BELOW</p>
<p>C. Full Name (Last, First, Middle Initial) Amoco</p> <p>Mailing Address 3079 Highway 34 E</p> <p>City Newnan State GA Zip Code 30265-2192</p> <p>Purpose of Disbursement Auto Fuel</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2777</p> <p>Date of Disbursement 05 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 47.35</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: AUTO FUEL</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4135.99

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Aramark

Mailing Address 1101 Market St

City Philadelphia State PA Zip Code 19107-2934

Purpose of Disbursement
Event Catering
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80626.E2825
Date of Disbursement

05 / 23 / 2008

Amount of Each Disbursement this Period

649.11

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT CATERING

B.

Full Name (Last, First, Middle Initial)
Arthur Murphy Florist

Mailing Address 6 Lagrange St

City Newnan State GA Zip Code 30263-2604

Purpose of Disbursement
Flowers
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80626.E2779
Date of Disbursement

05 / 23 / 2008

Amount of Each Disbursement this Period

75.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: FLOWERS

C.

Full Name (Last, First, Middle Initial)
BJs Wholesale Club

Mailing Address 331 Bullsboro Dr

City Newnan State GA Zip Code 30263-5841

Purpose of Disbursement
Office Supplies
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80626.E2780
Date of Disbursement

05 / 23 / 2008

Amount of Each Disbursement this Period

57.31

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial) Bank of Coweta Mailing Address PO Box 1218 City Newnan State GA Zip Code 30264-1218 Purpose of Disbursement Annual Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 80626.E2782 Date of Disbursement 05 / 23 / 2008
	Amount of Each Disbursement this Period 20.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: ANNUAL FEE

B. Full Name (Last, First, Middle Initial) CrystalTech Web Hosting Mailing Address 1125 W Pinnacle Peak Rd Ste 103 Suite 103 City Phoenix State AZ Zip Code 85027-1368 Purpose of Disbursement Web Hosting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 80626.E2826 Date of Disbursement 05 / 23 / 2008
	Amount of Each Disbursement this Period 26.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: WEB HOSTING

C. Full Name (Last, First, Middle Initial) CrystalTech Web Hosting Mailing Address 1125 W Pinnacle Peak Rd Ste 103 Suite 103 City Phoenix State AZ Zip Code 85027-1368 Purpose of Disbursement Web Hosting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 80626.E2776 Date of Disbursement 05 / 23 / 2008
	Amount of Each Disbursement this Period 26.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: WEB HOSTING

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) Delta Airlines	Transaction ID: 80626.E2773
	Mailing Address: Hartsfield Intl Airport	Date of Disbursement: 05 / 23 / 2008
	City: Atlanta State: GA Zip Code: 30309-	Amount of Each Disbursement this Period: 176.50
	Purpose of Disbursement: Airfare	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name: _____	Category/Type: _____
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: _____ District: _____	[MEMO ITEM] MEMO: AIRFARE

B.	Full Name (Last, First, Middle Initial) Hyatt Hotels	Transaction ID: 80626.E2823
	Mailing Address: 2799 Jefferson David Hwy	Date of Disbursement: 05 / 23 / 2008
	City: Arlington State: VA Zip Code: 22202-	Amount of Each Disbursement this Period: 255.38
	Purpose of Disbursement: Travel Expenses	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name: _____	Category/Type: _____
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: _____ District: _____	[MEMO ITEM] MEMO: TRAVEL EXPENSES

C.	Full Name (Last, First, Middle Initial) Marriott Hotels	Transaction ID: 80626.E2827
	Mailing Address: 265 Peachtree Center Ave NE	Date of Disbursement: 05 / 23 / 2008
	City: Atlanta State: GA Zip Code: 30303-1208	Amount of Each Disbursement this Period: 148.20
	Purpose of Disbursement: Lodging	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name: _____	Category/Type: _____
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: _____ District: _____	[MEMO ITEM] MEMO: LODGING

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) Marriott Hotels	Transaction ID: 80626.E2772 Date of Disbursement 05 / 23 / 2008
	Mailing Address 265 Peachtree Center Ave NE	Amount of Each Disbursement this Period 433.18
	City Atlanta State GA Zip Code 30303-1208	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: LODGING
	Purpose of Disbursement Lodging 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.	Full Name (Last, First, Middle Initial) Mortons Restaurant	Transaction ID: 80626.E2770 Date of Disbursement 05 / 23 / 2008
	Mailing Address 1631 Crystal Square Arc	Amount of Each Disbursement this Period 875.00
	City Arlington State VA Zip Code 22202-3301	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: MEETING EXPENSE
	Purpose of Disbursement Meeting Expense 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) ▼

C.	Full Name (Last, First, Middle Initial) Richard Petty Driving Experience	Transaction ID: 80626.E2771 Date of Disbursement 05 / 23 / 2008
	Mailing Address 6022 Victory Ln	Amount of Each Disbursement this Period 147.66
	City Concord State NC Zip Code 28027-2616	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: FUNDRAISER SITE EXP-ENSE
	Purpose of Disbursement Fundraiser Site Expense 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) ▼

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

<p>A. Full Name (Last, First, Middle Initial) Sprayberrys BBQ</p> <p>Mailing Address 229 Jackson St</p> <p>City Newnan State GA Zip Code 30263-1156</p> <p>Purpose of Disbursement Meeting Expense</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2775</p> <p>Date of Disbursement 05 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 29.70</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: MEETING EXPENSE</p>
<p>B. Full Name (Last, First, Middle Initial) Sprayberrys BBQ</p> <p>Mailing Address 229 Jackson St</p> <p>City Newnan State GA Zip Code 30263-1156</p> <p>Purpose of Disbursement Meeting Expense</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2824</p> <p>Date of Disbursement 05 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 309.11</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: MEETING EXPENSE</p>
<p>C. Full Name (Last, First, Middle Initial) Ticketmaster</p> <p>Mailing Address 370 Bullsboro Dr</p> <p>City Raymond State GA Zip Code 30263-1069</p> <p>Purpose of Disbursement Event Ticket</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2822</p> <p>Date of Disbursement 05 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 42.55</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: EVENT TICKET</p>

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) U.S. Postal Service	Transaction ID: 80626.E2774 Date of Disbursement 05 / 23 / 2008
	Mailing Address 6545 Highway 54	Amount of Each Disbursement this Period 22.57
	City Sharpsburg State GA Zip Code 30277-6909	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: POSTAGE
	Purpose of Disbursement Postage Candidate Name Category/Type	
	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.	Full Name (Last, First, Middle Initial) Bank of Coweta	Transaction ID: 80626.E2812 Date of Disbursement 06 / 16 / 2008
	Mailing Address PO Box 1218	Amount of Each Disbursement this Period 2275.20
	City Newnan State GA Zip Code 30264-1218	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SEE BELOW
	Purpose of Disbursement See Below Candidate Name Category/Type	
	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) ▼	

C.	Full Name (Last, First, Middle Initial) Crowne Plaza	Transaction ID: 80626.E2817 Date of Disbursement 06 / 16 / 2008
	Mailing Address 1160 Thorn Run Rd	Amount of Each Disbursement this Period 468.71
	City Coraopolis State PA Zip Code 15108-3152	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: TRAVEL EXPENSES
	Purpose of Disbursement Travel Expenses Candidate Name Category/Type	
	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) ▼	

SUBTOTAL of Disbursements This Page (optional)	2275.20
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Delta Airlines

Mailing Address Hartsfield Intl Airport

City Atlanta State GA Zip Code 30309-

Purpose of Disbursement

Airfare

Candidate Name

Category/Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80626.E2816

Date of Disbursement

06 / 16 / 2008

Amount of Each Disbursement this Period

1560.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

B.

Full Name (Last, First, Middle Initial)
Flash Foods

Mailing Address Bullsboro Road

City Newnan State GA Zip Code 30265-

Purpose of Disbursement

Travel Expenses

Candidate Name

Category/Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80626.E2820

Date of Disbursement

06 / 16 / 2008

Amount of Each Disbursement this Period

41.34

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TRAVEL EXPENSES

C.

Full Name (Last, First, Middle Initial)
Shell Oil

Mailing Address PO Box 2463

City Houston State TX Zip Code 77252-2463

Purpose of Disbursement

Auto Fuel

Candidate Name

Category/Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80626.E2819

Date of Disbursement

06 / 16 / 2008

Amount of Each Disbursement this Period

81.31

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AUTO FUEL

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial) U.S. Postal Service <hr/> Mailing Address 6545 Highway 54 <hr/> City State Zip Code Sharpsburg GA 30277-6909 Purpose of Disbursement Postage Candidate Name <hr/> 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) ▼	Transaction ID: 80626.E2818 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 8
	Amount of Each Disbursement this Period 93.75
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	[MEMO ITEM] MEMO: POSTAGE

B. Full Name (Last, First, Middle Initial) Merchant Bankcard <hr/> Mailing Address 5701 Lindero Canyon Rd # 3 <hr/> City State Zip Code Westlake Village CA 91362-4060 Purpose of Disbursement Transaction Fees Candidate Name <hr/> 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) ▼	Transaction ID: 80626.E2756 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 8
	Amount of Each Disbursement this Period 30.85
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	TRANSACTION FEES

C. Full Name (Last, First, Middle Initial) Merchant Bankcard <hr/> Mailing Address 5701 Lindero Canyon Rd # 3 <hr/> City State Zip Code Westlake Village CA 91362-4060 Purpose of Disbursement Transaction Fees Candidate Name <hr/> 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) ▼	Transaction ID: 80627.E2830 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 8
	Amount of Each Disbursement this Period 30.85
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	TRANSACTION FEES

SUBTOTAL of Disbursements This Page (optional) ▶	61.70
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group	Transaction ID: 80406.E2611 Date of Disbursement 04 / 01 / 2008
	Mailing Address 1775 I St NW Ste 700	Amount of Each Disbursement this Period 1155.32
	City Washington State DC Zip Code 20006-2416	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Consulting Candidate Name	Category/Type
	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) ▼
		FUNDRAISING CONSULTING

B.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group	Transaction ID: 80626.E2745 Date of Disbursement 05 / 05 / 2008
	Mailing Address 1775 I St NW Ste 700	Amount of Each Disbursement this Period 2675.87
	City Washington State DC Zip Code 20006-2416	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Consulting Candidate Name	Category/Type
	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) ▼
		FUNDRAISING CONSULTING

C.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group	Transaction ID: 80626.E2765 Date of Disbursement 05 / 23 / 2008
	Mailing Address 1775 I St NW Ste 700	Amount of Each Disbursement this Period 78.89
	City Washington State DC Zip Code 20006-2416	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Consulting Candidate Name	Category/Type
	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) ▼
		FUNDRAISING CONSULTING

SUBTOTAL of Disbursements This Page (optional)	3910.08
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group	Transaction ID: 80626.E2786 Date of Disbursement 05 / 28 / 2008
	Mailing Address 1775 I St NW Ste 700	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20006-2416	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Consulting Candidate Name	Category/Type
	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) ▼
		FUNDRAISING CONSULTING

B.	Full Name (Last, First, Middle Initial) Brad Bohannon	Transaction ID: 80626.E2760 Date of Disbursement 04 / 29 / 2008
	Mailing Address 70 Southfield Dr	Amount of Each Disbursement this Period 461.75
	City Newnan State GA Zip Code 30265-1911	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	Category/Type
	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) ▼
		SALARY

C.	Full Name (Last, First, Middle Initial) Brad Bohannon	Transaction ID: 80627.E2837 Date of Disbursement 05 / 31 / 2008
	Mailing Address 70 Southfield Dr	Amount of Each Disbursement this Period 461.75
	City Newnan State GA Zip Code 30265-1911	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	Category/Type
	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) ▼
		SALARY

SUBTOTAL of Disbursements This Page (optional)	▶	1923.50
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) Cafe Recess	Transaction ID: 80626.E2762
	Mailing Address 209 Pennsylvania Ave SE	Date of Disbursement 05 / 23 / 2008
	City Washington State DC Zip Code 20003-1107	Amount of Each Disbursement this Period 440.00
	Purpose of Disbursement Event Catering	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/ Type
	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) ▼
		EVENT CATERING

B.	Full Name (Last, First, Middle Initial) Capitol Hill Club	Transaction ID: 80626.E2769
	Mailing Address 300 1st St SE	Date of Disbursement 05 / 27 / 2008
	City Washington State DC Zip Code 20003-1801	Amount of Each Disbursement this Period 906.22
	Purpose of Disbursement Meeting Expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/ Type
	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) ▼
		MEETING EXPENSE

C.	Full Name (Last, First, Middle Initial) Capitol Hill Club	Transaction ID: 80626.E2813
	Mailing Address 300 1st St SE	Date of Disbursement 06 / 16 / 2008
	City Washington State DC Zip Code 20003-1801	Amount of Each Disbursement this Period 856.70
	Purpose of Disbursement Meeting Expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/ Type
	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) ▼
		MEETING EXPENSE

SUBTOTAL of Disbursements This Page (optional)	▶	2202.92
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 58 / 79

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) Georgia Republican Party Mailing Address 5600 Roswell Rd NE Ste E200 City Atlanta State GA Zip Code 30342-1141 Purpose of Disbursement Convention Fees 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) ▼	Transaction ID: 80414.E2651 Date of Disbursement 04 / 04 / 2008 Amount of Each Disbursement this Period 230.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CONVENTION FEES
B.	Full Name (Last, First, Middle Initial) Georgia Republican Party Mailing Address 5600 Roswell Rd NE Ste E200 City Atlanta State GA Zip Code 30342-1141 Purpose of Disbursement Qualifying Fee 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) ▼	Transaction ID: 80630.E2839 Date of Disbursement 04 / 22 / 2008 Amount of Each Disbursement this Period 4956.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 QUALIFYING FEE
C.	Full Name (Last, First, Middle Initial) Globe Telecommunications Mailing Address 30 S Court Sq City Newnan State GA Zip Code 30263-2049 Purpose of Disbursement Telephone 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) ▼	Transaction ID: 80626.E2672 Date of Disbursement 04 / 14 / 2008 Amount of Each Disbursement this Period 120.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TELEPHONE

SUBTOTAL of Disbursements This Page (optional) ▶

5306.50

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Globe Telecommunications

Transaction ID: 80626.E2749

Mailing Address 30 S Court Sq

Date of Disbursement

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

City Newnan State GA Zip Code 30263-2049

Amount of Each Disbursement this Period

125.46

Purpose of Disbursement Telephone

Category/Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

TELEPHONE

State: District:

B.

Full Name (Last, First, Middle Initial)
Globe Telecommunications

Transaction ID: 80626.E2809

Mailing Address 30 S Court Sq

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	0	8

City Newnan State GA Zip Code 30263-2049

Amount of Each Disbursement this Period

117.14

Purpose of Disbursement Telephone

Category/Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

TELEPHONE

State: District:

C.

Full Name (Last, First, Middle Initial)
Chip Lake

Transaction ID: 80626.E2686

Mailing Address 769 Nob Ridge Dr

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	8

City Marietta State GA Zip Code 30064-5736

Amount of Each Disbursement this Period

506.14

Purpose of Disbursement Salary

Category/Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

SALARY

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

748.74

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Chip Lake</p> <p>Mailing Address 769 Nob Ridge Dr</p> <p>City Marietta State GA Zip Code 30064-5736</p> <p>Purpose of Disbursement Reimbursement for Mileage</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2787</p> <p>Date of Disbursement 05 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 743.75</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>REIMBURSEMENT FOR MILEAGE</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Chip Lake</p> <p>Mailing Address 769 Nob Ridge Dr</p> <p>City Marietta State GA Zip Code 30064-5736</p> <p>Purpose of Disbursement Salary</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80627.E2838</p> <p>Date of Disbursement 05 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 461.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>SALARY</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) McKenna Long Aldridge PAC</p> <p>Mailing Address 303 Peachtree St. Suite 5300</p> <p>City Atlanta State GA Zip Code 30308-</p> <p>Purpose of Disbursement Event Reception Expense</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80627.C59971K</p> <p>Date of Disbursement 05 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 1071.84</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>IN KIND: EVENT RECEPTION EXPENSE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2277.09

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) McKenna, Long & Aldridge <hr/> Mailing Address 303 Peachtree St <hr/> City Atlanta State GA Zip Code 30308-3201 <hr/> Purpose of Disbursement Legal Fees Candidate Name <hr/> 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) ▼	Transaction ID: 80406.E2610 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 270.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 LEGAL FEES
B.	Full Name (Last, First, Middle Initial) National Mail <hr/> Mailing Address 2299 White St <hr/> City Houston State TX Zip Code 77007-2814 <hr/> Purpose of Disbursement Direct Mail Candidate Name <hr/> 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) ▼	Transaction ID: 80626.E2791 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 708.48 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 DIRECT MAIL
C.	Full Name (Last, First, Middle Initial) Phoenix Printers <hr/> Mailing Address 4115 Wisconsin Ave NW Ste 110 <hr/> City Washington State DC Zip Code 20016-2849 <hr/> Purpose of Disbursement Printing Candidate Name <hr/> 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) ▼	Transaction ID: 80626.E2664 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 387.34 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PRINTING

SUBTOTAL of Disbursements This Page (optional) ▶	1365.82
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) Phoenix Printers	Transaction ID: 80626.E2810 Date of Disbursement 06 / 16 / 2008
	Mailing Address 4115 Wisconsin Ave NW Ste 110	Amount of Each Disbursement this Period 826.04
	City Washington State DC Zip Code 20016-2849	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing Candidate Name	Category/Type
	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) ▼
		PRINTING

B.	Full Name (Last, First, Middle Initial) Premier Mail Company	Transaction ID: 80626.E2679 Date of Disbursement 04 / 28 / 2008
	Mailing Address PO Box 27048	Amount of Each Disbursement this Period 1000.00
	City Raleigh State NC Zip Code 27611-7048	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Direct Mail Candidate Name	Category/Type
	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) ▼
		DIRECT MAIL

C.	Full Name (Last, First, Middle Initial) Premier Mail Company	Transaction ID: 80626.E2748 Date of Disbursement 05 / 05 / 2008
	Mailing Address PO Box 27048	Amount of Each Disbursement this Period 1000.00
	City Raleigh State NC Zip Code 27611-7048	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Direct Mail Candidate Name	Category/Type
	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) ▼
		DIRECT MAIL

SUBTOTAL of Disbursements This Page (optional)	▶	2826.04
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) Premier Mail Company Mailing Address PO Box 27048 City Raleigh State NC Zip Code 27611-7048 Purpose of Disbursement Direct Mail 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) ▼	Transaction ID: 80626.E2768 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 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 DIRECT MAIL
B.	Full Name (Last, First, Middle Initial) Premier Mail Company Mailing Address PO Box 27048 City Raleigh State NC Zip Code 27611-7048 Purpose of Disbursement Direct Mail 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) ▼	Transaction ID: 80626.E2792 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 8	Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 DIRECT MAIL
C.	Full Name (Last, First, Middle Initial) Professional Data Services Mailing Address 264 N Lumpkin St # 202 City Athens State GA Zip Code 30601-2742 Purpose of Disbursement Compliance Consulting 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) ▼	Transaction ID: 80406.E2614 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 8	Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 COMPLIANCE CONSULTING

SUBTOTAL of Disbursements This Page (optional)	3500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) Professional Data Services	Transaction ID: 80626.E2681 Date of Disbursement
	Mailing Address 264 N Lumpkin St # 202	<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City Athens State GA Zip Code 30601-2742	Amount of Each Disbursement this Period
	Purpose of Disbursement Compliance Consulting	<input type="text" value="1500.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	COMPLIANCE CONSULTING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Professional Data Services	Transaction ID: 80626.E2789 Date of Disbursement
	Mailing Address 264 N Lumpkin St # 202	<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Athens State GA Zip Code 30601-2742	Amount of Each Disbursement this Period
	Purpose of Disbursement Compliance Consulting	<input type="text" value="1500.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	COMPLIANCE CONSULTING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Public Opinion Strategies	Transaction ID: 80626.E2785 Date of Disbursement
	Mailing Address 227 S Washington St Ste 320	<input type="text" value="05"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City Alexandria State VA Zip Code 22314-3625	Amount of Each Disbursement this Period
	Purpose of Disbursement Polling	<input type="text" value="17500.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	POLLING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="20500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
RC Development

Transaction ID: 80414.E2652
Date of Disbursement

Mailing Address 2753 Highway 34 E Ste 2

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	8

City Newnan State GA Zip Code 30265-2145

Amount of Each Disbursement this Period

1800.00

Purpose of Disbursement
Rent

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

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

RENT

State: District:

B.

Full Name (Last, First, Middle Initial)
RC Development

Transaction ID: 80626.E2794
Date of Disbursement

Mailing Address 2753 Highway 34 E Ste 2

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	0	8

City Newnan State GA Zip Code 30265-2145

Amount of Each Disbursement this Period

900.00

Purpose of Disbursement
Rent

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

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

RENT

State: District:

C.

Full Name (Last, First, Middle Initial)
Richard Petty Driving Experience

Transaction ID: 80626.E2663
Date of Disbursement

Mailing Address 6022 Victory Ln

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	0	8

City Concord State NC Zip Code 28027-2616

Amount of Each Disbursement this Period

1279.65

Purpose of Disbursement
Fundraiser Site Fees

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

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

FUNDRAISER SITE FEES

State: District:

SUBTOTAL of Disbursements This Page (optional)

3979.65

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Elaine Stacy

Mailing Address 1925 Sage Ct

City Columbus State GA Zip Code 31909-2606

Purpose of Disbursement
Yard Signs

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80626.E2793
Date of Disbursement

MM / DD / YYYY
06 / 01 / 2008

Amount of Each Disbursement this Period

4695.13

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

YARD SIGNS

B.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address P.O. Box 660108

City Dallas State TX Zip Code 75266-0108

Purpose of Disbursement
Cell Phone

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80626.E2665
Date of Disbursement

MM / DD / YYYY
04 / 14 / 2008

Amount of Each Disbursement this Period

154.98

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

CELL PHONE

C.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address P.O. Box 660108

City Dallas State TX Zip Code 75266-0108

Purpose of Disbursement
Cell Phone

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80626.E2747
Date of Disbursement

MM / DD / YYYY
05 / 05 / 2008

Amount of Each Disbursement this Period

64.91

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

CELL PHONE

SUBTOTAL of Disbursements This Page (optional) ▶

4915.02

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

<p>A. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 660108</p> <p>City Dallas State TX Zip Code 75266-0108</p> <p>Purpose of Disbursement Cell Phone</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2767</p> <p>Date of Disbursement 05 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 91.52</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CELL PHONE</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 660108</p> <p>City Dallas State TX Zip Code 75266-0108</p> <p>Purpose of Disbursement Cell Phone</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2790</p> <p>Date of Disbursement 06 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 77.68</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CELL PHONE</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 660108</p> <p>City Dallas State TX Zip Code 75266-0108</p> <p>Purpose of Disbursement Cell Phone</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2811</p> <p>Date of Disbursement 06 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 120.87</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CELL PHONE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

290.07

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Lynn Westmoreland

Mailing Address 25 Bretts Bnd

City State Zip Code
Sharpsburg GA 30277-2358

Purpose of Disbursement
Reimbursement for Mileage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80626.E2673
Date of Disbursement

04 / 15 / 2008

Amount of Each Disbursement this Period

168.34

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

REIMBURSEMENT FOR MILEAGE

B.

Full Name (Last, First, Middle Initial)
Willis Consulting

Mailing Address 3126 Bransford Rd

City State Zip Code
Augusta GA 30909-3008

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80406.E2612
Date of Disbursement

04 / 01 / 2008

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

FUNDRAISING CONSULTING

C.

Full Name (Last, First, Middle Initial)
Willis Consulting

Mailing Address 3126 Bransford Rd

City State Zip Code
Augusta GA 30909-3008

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80626.E2680
Date of Disbursement

04 / 28 / 2008

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

FUNDRAISING CONSULTING

SUBTOTAL of Disbursements This Page (optional) ▶

4168.34

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 69 / 79

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A. Full Name (Last, First, Middle Initial) Willis Consulting Mailing Address 3126 Bransford Rd City Augusta State GA Zip Code 30909-3008 Purpose of Disbursement Fundraising Consulting 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) ▼	Transaction ID: 80626.E2744 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 141.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING CONSULTING
B. Full Name (Last, First, Middle Initial) Willis Consulting Mailing Address 3126 Bransford Rd City Augusta State GA Zip Code 30909-3008 Purpose of Disbursement Fundraising Consulting 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) ▼	Transaction ID: 80626.E2783 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 8 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING CONSULTING

SUBTOTAL of Disbursements This Page (optional) ▶

2141.00

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

78992.17

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 70 / 79

<input type="checkbox"/> 17	<input checked="" type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
National Republican Congressional Comm.

Transaction ID: 80626.E2808

Date of Disbursement

Mailing Address 320 1st St SE

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

City Washington State DC Zip Code 20003-1838

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Transfer of Excess Campaign Funds

--

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) Dean Andal for Congress	Transaction ID: 80626.E2795 Date of Disbursement 06 / 06 / 2008
	Mailing Address 7540 Shoreline Dr	Amount of Each Disbursement this Period 500.00
	City Stockton State CA Zip Code 95219-5434	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name DEAN F ANDAL Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

B.	Full Name (Last, First, Middle Initial) Michelle Bachmann for Congress	Transaction ID: 80626.E2674 Date of Disbursement 04 / 28 / 2008
	Mailing Address PO Box 49756	Amount of Each Disbursement this Period 500.00
	City Minneapolis State MN Zip Code 55449-0756	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name MICHELE M BACHMANN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

C.	Full Name (Last, First, Middle Initial) Tim Bee for Congress	Transaction ID: 80626.E2796 Date of Disbursement 06 / 06 / 2008
	Mailing Address PO Box 31985	Amount of Each Disbursement this Period 1000.00
	City Tucson State AZ Zip Code 85751-1985	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Candidate Name TIMOTHY BEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Ronnie Chance for Senate

Transaction ID: 80626.E2753
Date of Disbursement

Mailing Address 1137 Senoia Rd Ste A

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

City Tyrone State GA Zip Code 30290-1625

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
CONTRIBUTION

Category/ Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

State: District:

B.

Full Name (Last, First, Middle Initial)
Coweta County GOP

Transaction ID: 80626.E2788
Date of Disbursement

Mailing Address PO Box 72567

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	8

City Newnan State GA Zip Code 30271-2567

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
CONTRIBUTION

Category/ Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

State: District:

C.

Full Name (Last, First, Middle Initial)
Committee to Re-Elect Vito Fossella

Transaction ID: 80626.E2682
Date of Disbursement

Mailing Address 34 Dumont Ave

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	8

City Staten Island State NY Zip Code 10305-1450

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
CONTRIBUTION

Category/ Type

Candidate Name
VITO FOSSELLA

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

State: NY District: 13

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Graves for Congress

Mailing Address 2345 Grand Blvd Ste 2400

City State Zip Code
Kansas City MO 64108-2642

Purpose of Disbursement
CONTRIBUTION

Candidate Name
SAMUEL B GRAVES

Office Sought: House
 Senate
 President

State: MO District: 06

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 80626.E2687

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	8

Amount of Each Disbursement this Period

500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Greenberg for Congress

Mailing Address PO Box 894

City State Zip Code
Mundelein IL 60060-0894

Purpose of Disbursement
CONTRIBUTION

Candidate Name
STEVEN MATHEW GREENBERG

Office Sought: House
 Senate
 President

State: IL District: 08

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 80626.E2797

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	0	8

Amount of Each Disbursement this Period

500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Guthrie for Congress

Mailing Address PO Box 9639

City State Zip Code
Bowling Green KY 42102-9639

Purpose of Disbursement

Candidate Name
STEVEN BRETT GUTHRIE

Office Sought: House
 Senate
 President

State: KY District: 02

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 80626.E2752

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Chris Hackett for Congress

Transaction ID: 80626.E2798
Date of Disbursement

Mailing Address 23 Dallas Village Shopping Ctr

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	0	8

City Dallas State PA Zip Code 18612-1231

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
CONTRIBUTION

Category/ Type

Candidate Name
CHRISTOPHER LAWRENCE HACKETT

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: PA District: 10

B.

Full Name (Last, First, Middle Initial)
Keller for Congress

Transaction ID: 80626.E2689
Date of Disbursement

Mailing Address PO Box 1453

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	8

City Orlando State FL Zip Code 32802-1453

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
CONTRIBUTION

Category/ Type

Candidate Name
RICHARD A KELLER

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: FL District: 08

C.

Full Name (Last, First, Middle Initial)
Lyle Larson for Congress

Transaction ID: 80626.E2799
Date of Disbursement

Mailing Address PO Box 171148

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	0	8

City San Antonio State TX Zip Code 78217-8148

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
CONTRIBUTION

Category/ Type

Candidate Name
LYLE LARSON

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TX District: 23

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.

Full Name (Last, First, Middle Initial)
Manion for Congress

Transaction ID: 80626.E2800
Date of Disbursement

Mailing Address PO Box 28

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	0	8

City Doylestown State PA Zip Code 18901-0028

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
CONTRIBUTION

Category/
Type

Candidate Name
TOM MANION

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
State: PA District: 08

Disbursement For: 2008
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
Northup for Congress

Transaction ID: 80626.E2677
Date of Disbursement

Mailing Address PO Box 7313

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	8

City Louisville State KY Zip Code 40257-0313

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
CONTRIBUTION

Category/
Type

Candidate Name
ANNE M NORTHUP

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
State: KY District: 03

Disbursement For: 2008
 Primary General
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)
Pete Olson for Congress

Transaction ID: 80626.E2801
Date of Disbursement

Mailing Address PO Box 16381

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	0	8

City Sugar Land State TX Zip Code 77496-6381

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
CONTRIBUTION

Category/
Type

Candidate Name
PETER G OLSON

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
State: TX District: 22

Disbursement For: 2008
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

<p>A. Full Name (Last, First, Middle Initial) Friends of Erik Paulsen</p> <p>Mailing Address PO Box 44369</p> <p>City Eden Prairie State MN Zip Code 55344-1369</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name ERIK PAULSEN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2802</p> <p>Date of Disbursement 06 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Erik Paulsen</p> <p>Mailing Address PO Box 44369</p> <p>City Eden Prairie State MN Zip Code 55344-1369</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name ERIK PAULSEN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2675</p> <p>Date of Disbursement 04 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Sali for Congress</p> <p>Mailing Address PO Box 71</p> <p>City Kuna State ID Zip Code 83634-0071</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name WILLIAM T. SALI</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2683</p> <p>Date of Disbursement 04 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

<p>A. Full Name (Last, First, Middle Initial) Schmidt for Congress</p> <p>Mailing Address 771 Wards Corner Rd</p> <p>City Loveland State OH Zip Code 45140-9049</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name JEANNETTE H SCHMIDT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 02</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2688</p> <p>Date of Disbursement 04 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Schock for Congress</p> <p>Mailing Address PO Box 10555</p> <p>City Peoria State IL Zip Code 61612-0555</p> <p>Purpose of Disbursement</p> <p>Candidate Name AARON SCHOCK</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 18</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2803</p> <p>Date of Disbursement 06 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Kirk Schuring for Congress</p> <p>Mailing Address 400 Market Ave N Ste 400</p> <p>City Canton State OH Zip Code 44702-1553</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name KIRK SCHURING</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E2804</p> <p>Date of Disbursement 06 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

**SCHEDULE B (FEC Form 3)
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"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) Stivers for Congress	Transaction ID: 80626.E2805 Date of Disbursement 06 / 06 / 2008
	Mailing Address 81 S 5th St	Amount of Each Disbursement this Period 1000.00
	City Columbus State OH Zip Code 43215-4323	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name STEVE STIVERS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

B.	Full Name (Last, First, Middle Initial) William James Studdard Memorial Trust	Transaction ID: 80626.E2751 Date of Disbursement 05 / 12 / 2008
	Mailing Address 430 Merrydale Dr	Amount of Each Disbursement this Period 500.00
	City Fayetteville State GA Zip Code 30215-5487	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement DONATION 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) ▼	Category/Type

C.	Full Name (Last, First, Middle Initial) Walberg for Congress	Transaction ID: 80626.E2684 Date of Disbursement 04 / 28 / 2008
	Mailing Address 6769 Teachout Rd	Amount of Each Disbursement this Period 500.00
	City Tipton State MI Zip Code 49287-9807	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name TIMOTHY WALBERG Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 79 / 79

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland for Congress

A.	Full Name (Last, First, Middle Initial) Darren White for Congress	Transaction ID: 80626.E2806 Date of Disbursement 06 / 06 / 2008
	Mailing Address PO Box 16601	Amount of Each Disbursement this Period 500.00
	City Albuquerque State NM Zip Code 87191-6601	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name DARREN, P WHITE Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Darren White for Congress	Transaction ID: 80626.E2685 Date of Disbursement 04 / 28 / 2008
	Mailing Address PO Box 16601	Amount of Each Disbursement this Period 500.00
	City Albuquerque State NM Zip Code 87191-6601	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name DARREN, P WHITE Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Committee to Elect George Wingo	Transaction ID: 80626.E2815 Date of Disbursement 06 / 23 / 2008
	Mailing Address 115 Duchess Ct	Amount of Each Disbursement this Period 250.00
	City Fayetteville State GA Zip Code 30215-2656	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION 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) ▼	

SUBTOTAL of Disbursements This Page (optional)	1250.00
TOTAL This Period (last page this line number only)	17750.00