

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than 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

TALLATCHEE CREEK INC

ADDRESS (number and street) 1040 Stonecreek Drive

Check if different than previously reported. (ACC)

Helena AL 35080

2. **FEC IDENTIFICATION NUMBER** C00363689

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

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 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12G)
- Runoff (12R)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(d) 30-Day **Post -Election** Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 04 01 2007 through 06 30 2007

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 William David Smith, Jr.

Signature of Treasurer Electronically Filed by William David Smith, Jr. Date 08 01 2007

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

|                 |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|
| Office Use Only |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|

**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
TALLATCHEE CREEK INC

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 4 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 6 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

|                                                                                                                                                                                                                         | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|---|---|---|---|---|---|--|----------|
| 6. (a) Cash on Hand<br>January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 0 | 7 |  | 11314.84 |
| Y                                                                                                                                                                                                                       | Y                       | Y                                 | Y |   |   |   |   |   |  |          |
| 2                                                                                                                                                                                                                       | 0                       | 0                                 | 7 |   |   |   |   |   |  |          |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....                                                                                                                                                              | 889.84                  |                                   |   |   |   |   |   |   |  |          |
| (c) Total Receipts (from Line 19) .....                                                                                                                                                                                 | 38500.00                | 48500.00                          |   |   |   |   |   |   |  |          |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....                                                                                                                    | 39389.84                | 59814.84                          |   |   |   |   |   |   |  |          |
| 7. Total Disbursements (from Line 31) .....                                                                                                                                                                             | 36326.32                | 56751.32                          |   |   |   |   |   |   |  |          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                                                                                                                               | 3063.52                 | 3063.52                           |   |   |   |   |   |   |  |          |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....                                                                                                         | 0.00                    |                                   |   |   |   |   |   |   |  |          |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....                                                                                                        | 0.00                    |                                   |   |   |   |   |   |   |  |          |

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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**

Write or Type Committee Name  
TALLATCHEE CREEK INC

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 4 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 6 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

| I. Receipts                                                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:                                                             |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees                                                | 20000.00                      | 21000.00                          |
| (i) Itemized (use Schedule A) .....                                                                    | 0.00                          | 0.00                              |
| (ii) Unitemized .....                                                                                  | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....                                                         | 20000.00                      | 21000.00                          |
| (b) Political Party Committees .....                                                                   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....                                                    | 18500.00                      | 27500.00                          |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     | 38500.00                      | 48500.00                          |
| 12. Transfers From Affiliated/Other Party Committees .....                                             | 0.00                          | 0.00                              |
| 13. All Loans Received .....                                                                           | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....                                                                     | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....                                           | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds                                                         |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....                                                       | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....                                                               | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).                                                              | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 38500.00                      | 48500.00                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 38500.00                      | 48500.00                          |

**DETAILED SUMMARY PAGE**

of Disbursements

| II. DISBURSEMENTS                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:                                                                    |                               |                                   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                     |                               |                                   |
| (i) Federal Share.....                                                                         | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....                                                                    | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures.....                                                  | 0.00                          | 0.00                              |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....                          | 0.00                          | 0.00                              |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 35500.00                      | 55500.00                          |
| 24. Independent Expenditure (use Schedule E) .....                                             | 0.00                          | 0.00                              |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....                                                                  | 0.00                          | 0.00                              |
| 27. Loans Made.....                                                                            | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:                                                               |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....                                                           | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....                                            | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                           | 0.00                          | 0.00                              |
| 29. Other Disbursements.....                                                                   | 826.32                        | 1251.32                           |
| 30. Federal Election Activity (2 U.S.C 431(20))                                                |                               |                                   |
| (a) Shared Federal Election Activity (from Schedule H6)                                        |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00                          | 0.00                              |
| (ii) "Levin" Share .....                                                                       | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....              | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..       | 36326.32                      | 56751.32                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 36326.32                      | 56751.32                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                    | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|----------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) .....        | 38500.00                      | 48500.00                          |
| 34. Total Contribution Refunds (from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....   | 38500.00                      | 48500.00                          |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 0.00                          | 0.00                              |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) .....             | 0.00                          | 0.00                              |

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

|                                                                         |                                         |                              |
|-------------------------------------------------------------------------|-----------------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 6 / 15                  |
|                                                                         | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|                                                                         | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|                                                                         | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|                                                                         | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|                                                                         | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
TALLATCHEE CREEK INC

**A.** Full Name (Last, First, Middle Initial)  
Francisco L. Collazo

Mailing Address P.O. Box 547

City State Zip Code  
Madison AL 35758

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 0 / 2 0 0 7

**Transaction ID:** SA11AI.4188

Amount of Each Receipt this Period  
4000.00

receipt

**B.** Full Name (Last, First, Middle Initial)  
Frank J. Collazo

Mailing Address 6726 Odyssey Dr.

City State Zip Code  
Huntsville AL 35806

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
8000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 0 / 2 0 0 7

**Transaction ID:** SA11AI.4190

Amount of Each Receipt this Period  
8000.00

receipt -- REFUND OF \$3,0-00 TO BE ISSUED

**C.** Full Name (Last, First, Middle Initial)  
Joe Collazo

Mailing Address

City State Zip Code  
Scottsboro AL 35769

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 0 / 2 0 0 7

**Transaction ID:** SA11AI.4192

Amount of Each Receipt this Period  
4000.00

receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **16000.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 15  
(check only one)

|                                     |     |                          |     |                          |     |                          |    |                          |    |                          |    |                          |    |                          |    |                          |    |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|
| <input checked="" type="checkbox"/> | 11a | <input type="checkbox"/> | 11b | <input type="checkbox"/> | 11c | <input type="checkbox"/> | 12 | <input type="checkbox"/> | 13 | <input type="checkbox"/> | 14 | <input type="checkbox"/> | 15 | <input type="checkbox"/> | 16 | <input type="checkbox"/> | 17 |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|

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NAME OF COMMITTEE (In Full)  
TALLATCHEE CREEK INC

A.

Full Name (Last, First, Middle Initial)  
Kim Collazo

Mailing Address

City State Zip Code  
Scottboro AL 35769

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.4194

Amount of Each Receipt this Period  
4000.00

receipt

|                                                                  |   |          |
|------------------------------------------------------------------|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 4000.00  |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 20000.00 |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

|                              |                              |                                         |                             |                             |
|------------------------------|------------------------------|-----------------------------------------|-----------------------------|-----------------------------|
| FOR LINE NUMBER:             | PAGE 8 / 15                  |                                         |                             |                             |
| (check only one)             |                              |                                         |                             |                             |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |                             |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
TALLATCHEE CREEK INC

|           |                                                                                                                                                                |                                                                 |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>ALABAMA POWER CO EMPLOYEES FEDERAL POLITICAL ACTION CMTE (APC EMPLOYEES FEDERAL PAC)                                | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 5 / 0 9 / 2 0 0 7 |
|           | Mailing Address<br>600 NORTH 18TH STREET<br>PO Box 2641                                                                                                        | Transaction ID: SA11C.4196                                      |
|           | City State Zip Code<br>Birmingham AL 35291                                                                                                                     | Amount of Each Receipt this Period<br>5000.00                   |
|           | FEC ID number of contributing federal political committee.<br>C                                                                                                | receipt                                                         |
|           | Name of Employer Occupation<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00                             |

|           |                                                                                                                                                                |                                                                 |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE                                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 4 / 1 0 / 2 0 0 7 |
|           | Mailing Address<br>520 N. NORTHWEST HIGHWAY                                                                                                                    | Transaction ID: SA11C.4198                                      |
|           | City State Zip Code<br>PARK RIDGE IL 60068                                                                                                                     | Amount of Each Receipt this Period<br>5000.00                   |
|           | FEC ID number of contributing federal political committee.<br>C                                                                                                | receipt                                                         |
|           | Name of Employer Occupation<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00                             |

|           |                                                                                                                                                                |                                                                 |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)                                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 5 / 0 2 / 2 0 0 7 |
|           | Mailing Address<br>175 E. Houston Street<br>Room 7-A-50                                                                                                        | Transaction ID: SA11C.4200                                      |
|           | City State Zip Code<br>San Antonio TX 78205                                                                                                                    | Amount of Each Receipt this Period<br>2500.00                   |
|           | FEC ID number of contributing federal political committee.<br>C                                                                                                | Receipt                                                         |
|           | Name of Employer Occupation<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2500.00                             |

|                                                                  |   |          |
|------------------------------------------------------------------|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 12500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |          |



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

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

FOR LINE NUMBER: PAGE 9 / 15  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
TALLATCHEE CREEK INC

**A.** Full Name (Last, First, Middle Initial)  
INTERGRAPH CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 170 GRAPHICS DRIVE  
ISG MAILSTOP W 1501

City State Zip Code  
MADISON AL 35758

FEC ID number of contributing federal political committee. **C** C00201491

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2007

**Transaction ID:** SA11C.4201

Amount of Each Receipt this Period  
1000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
SCHERING-PLOUGH CORPORATION BETTER GOVERNMENT FUND

Mailing Address 2000 Galloping Hill Rd

City State Zip Code  
Kenilworth NJ 07033

FEC ID number of contributing federal political committee. **C** C00108290

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2007

**Transaction ID:** SA11C.4203

Amount of Each Receipt this Period  
5000.00

contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6000.00

**TOTAL** This Period (last page this line number only) ..... ► 18500.00

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

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

FOR LINE NUMBER: (check only one)

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
TALLATCHEE CREEK INC

|    |                                                                                                                                           |                                                                                                       |
|----|-------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| A. | Full Name (Last, First, Middle Initial)<br>Alexander ALEXANDER FOR SENATE 2008 INC                                                        | Transaction ID: SB23.4205<br>Date of Disbursement                                                     |
|    | Mailing Address 228 S WASHINGTON STREET SUITE 115                                                                                         | <input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2007"/> |
|    | City ALEXANDRIA State VA Zip Code 22314                                                                                                   | Amount of Each Disbursement this Period                                                               |
|    | Purpose of Disbursement Contribution                                                                                                      | <input type="text" value="5000.00"/>                                                                  |
|    | Candidate Name Alexander ALEXANDER FOR SENATE 2008 INC                                                                                    | Category/Type                                                                                         |
|    | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President               |                                                                                                       |
|    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |                                                                                                       |
|    | State: District: 00                                                                                                                       |                                                                                                       |

|    |                                                                                                                                           |                                                                                                       |
|----|-------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| B. | Full Name (Last, First, Middle Initial)<br>Chambliss CHAMBLISS FOR SENATE                                                                 | Transaction ID: SB23.4207<br>Date of Disbursement                                                     |
|    | Mailing Address POST OFFICE BOX 12469                                                                                                     | <input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2007"/> |
|    | City ATLANTA State GA Zip Code 30355                                                                                                      | Amount of Each Disbursement this Period                                                               |
|    | Purpose of Disbursement Contribution                                                                                                      | <input type="text" value="5000.00"/>                                                                  |
|    | Candidate Name Chambliss CHAMBLISS FOR SENATE                                                                                             | Category/Type                                                                                         |
|    | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President               |                                                                                                       |
|    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |                                                                                                       |
|    | State: GA District: 00                                                                                                                    |                                                                                                       |

|    |                                                                                                                                           |                                                                                                       |
|----|-------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| C. | Full Name (Last, First, Middle Initial)<br>Coleman COLEMAN FOR SENATE 08                                                                  | Transaction ID: SB23.4209<br>Date of Disbursement                                                     |
|    | Mailing Address 7300 HUDSON BLVD SUITE 270A                                                                                               | <input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2007"/> |
|    | City ST PAUL State MN Zip Code 55128                                                                                                      | Amount of Each Disbursement this Period                                                               |
|    | Purpose of Disbursement Contribution                                                                                                      | <input type="text" value="5000.00"/>                                                                  |
|    | Candidate Name Coleman COLEMAN FOR SENATE 08                                                                                              | Category/Type                                                                                         |
|    | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President               |                                                                                                       |
|    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |                                                                                                       |
|    | State: MN District: 00                                                                                                                    |                                                                                                       |

|                                                                  |                                       |
|------------------------------------------------------------------|---------------------------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <input type="text" value="15000.00"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/>                  |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
TALLATCHEE CREEK INC

|           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                    |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Collins COLLINS FOR SENATOR<br><br>Mailing Address PO BOX 1096<br><br>City BANGOR State ME Zip Code 04402<br><br>Purpose of Disbursement Contribution<br>Candidate Name Collins COLLINS FOR SENATOR<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: ME District: 00<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼           | Transaction ID: SB23.4211<br>Date of Disbursement<br>06 / 29 / 2007<br><br>Amount of Each Disbursement this Period<br>5000.00<br><br>Category/Type |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>JOHN CORNYN<br><br>Mailing Address 6850 AUSTIN CENTER BLVD STE 180<br><br>City AUSTIN State TX Zip Code 78731<br><br>Purpose of Disbursement Contribution<br>Candidate Name JOHN CORNYN<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: TX District: 00<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼                       | Transaction ID: SB23.4213<br>Date of Disbursement<br>06 / 29 / 2007<br><br>Amount of Each Disbursement this Period<br>5000.00<br><br>Category/Type |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Inhofe FRIENDS OF JIM INHOFE<br><br>Mailing Address PO BOX 13300<br><br>City OKLAHOMA CITY State OK Zip Code 73113<br><br>Purpose of Disbursement Contribution<br>Candidate Name Inhofe FRIENDS OF JIM INHOFE<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: OK District: 00<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB23.4215<br>Date of Disbursement<br>06 / 29 / 2007<br><br>Amount of Each Disbursement this Period<br>5000.00<br><br>Category/Type |

|                                                                    |          |
|--------------------------------------------------------------------|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 15000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [ ]      |

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

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

FOR LINE NUMBER: (check only one)

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
TALLATCHEE CREEK INC

**A.** Full Name (Last, First, Middle Initial)  
Inhofe FRIENDS OF JIM INHOFE

Mailing Address PO BOX 13300

City OKLAHOMA CITY State OK Zip Code 73113

Purpose of Disbursement Contribution

Candidate Name Inhofe FRIENDS OF JIM INHOFE

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB23.4216  
**Date of Disbursement:** 06 / 29 / 2007

Amount of Each Disbursement this Period: 5000.00

Category/Type

**B.** Full Name (Last, First, Middle Initial)  
Jefferson County Republican Committee

Mailing Address 1900 20th Avenue South

City Homewood State AL Zip Code 35209

Purpose of Disbursement contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB23.4218  
**Date of Disbursement:** 05 / 03 / 2007

Amount of Each Disbursement this Period: 500.00

Category/Type

**C.** Full Name (Last, First, Middle Initial)  
Domenici PEOPLE FOR PETE DOMENICI

Mailing Address POST OFFICE BOX 93656

City ALBUQUERQUE State NM Zip Code 87199

Purpose of Disbursement Contribution

Candidate Name Domenici PEOPLE FOR PETE DOMENICI

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB23.4220  
**Date of Disbursement:** 06 / 29 / 2007

Amount of Each Disbursement this Period: 5000.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 10500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 15

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
TALLATCHEE CREEK INC

A.

Full Name (Last, First, Middle Initial)  
Tom TOM KEAN FOR US SENATE INC

Transaction ID: SB23.4222

Date of Disbursement

Mailing Address PO BOX 225

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 2 |   | 2 | 0 | 0 | 7 |

City COLONIA State NJ Zip Code 07067

Amount of Each Disbursement this Period

|          |
|----------|
| -5000.00 |
|----------|

Purpose of Disbursement  
voided check

|  |
|--|
|  |
|--|

Candidate Name  
Tom TOM KEAN FOR US SENATE INC

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

|          |
|----------|
| -5000.00 |
|----------|

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

|          |
|----------|
| 35500.00 |
|----------|

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 15

|                              |                              |                              |                              |                                        |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|----------------------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
TALLATCHEE CREEK INC

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>Eagle Forum of Alabama<br>Mailing Address 4200 Stone River Circle<br>City Birmingham State AL Zip Code 35213<br>Purpose of Disbursement<br>Contribution-- Leadership Conference<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼       | Transaction ID: SB29.4224<br>Date of Disbursement<br>06 / 18 / 2007 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Amount of Each Disbursement this Period<br>450.00                   |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>FedEx Kinko's Office and Print Center<br>Mailing Address 3260 Galleria Cir.<br>City Hoover State AL Zip Code 35244<br>Purpose of Disbursement<br>Disbursement--Administrative/Postage<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.4226<br>Date of Disbursement<br>06 / 29 / 2007 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Amount of Each Disbursement this Period<br>259.44                   |

|                                                                  |               |
|------------------------------------------------------------------|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>709.44</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <b>709.44</b> |

Image# 28991004768

Form/Schedule: **F3XA**  
Transaction ID:

This is an amended filing. I have previously sent documentation out contributions which exceeded the limit, demonstrating a refund.

\*\*\*\*\*