

REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 36

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

1. NAME OF COMMITTEE (in full) HUCKABEE FOR PRESIDENT, INC.		2. IDENTIFICATION NUMBER C00431809
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported C/O JPMS Cox, PLLC 11300 Cantrell Road, Suite 301		
CITY, STATE, and ZIP CODE Little Rock AR 72212		3. IS THIS REPORT FOR : <input type="checkbox"/> Primary <input type="checkbox"/> General

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

<input type="checkbox"/> April 15 Quarterly Report <input type="checkbox"/> July 15 Quarterly Report <input type="checkbox"/> October 15 Quarterly Report <input type="checkbox"/> January 31 Year End Report	Monthly Report Due On: <table style="width: 100%;"> <tr> <td><input type="checkbox"/> February 20</td> <td><input type="checkbox"/> June 20</td> <td><input type="checkbox"/> October 20</td> </tr> <tr> <td><input type="checkbox"/> March 20</td> <td><input type="checkbox"/> July 20</td> <td><input type="checkbox"/> November 20</td> </tr> <tr> <td><input type="checkbox"/> April 20</td> <td><input type="checkbox"/> August 20</td> <td><input type="checkbox"/> December 20</td> </tr> <tr> <td><input checked="" type="checkbox"/> May 20</td> <td><input type="checkbox"/> September 20</td> <td><input type="checkbox"/> January 31</td> </tr> </table>	<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20	<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20	<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20	<input checked="" type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31
<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20											
<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20											
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20											
<input checked="" type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31											

Twelfth day report preceding _____ (Type of Election)
 election on _____ in the State of _____

Thirtieth day report following the General Election on _____
 on _____

IS THIS REPORT AN AMENDMENT YES NO

5. COVERING PERIOD	FROM 04/01/2008	THROUGH 04/30/2008
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SUMMARY	DESCRIPTION	AMOUNT
	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	79762.27
	7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	40274.37
	8. SUBTOTAL (Lines 6 and 7)	120036.64
	9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	85559.43
	10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	34477.21
	11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	48131.41
	12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	74448.63
	13. EXPENDITURES SUBJECT TO LIMITATION	16040719.48
NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES	14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	16061933.97
	15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2)	16040719.48

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 Mr. Bryan Jeffrey	Date 10/27/2009
Signature of Treasurer	

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

For further information contact: Federal Election Commission
 999 E Street, N.W.
 Washington, DC 20463
 Toll Free 800-424-9530
 Local 202-694-1100

FEC FORM 3P
(01/2001)

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

(PAGE 2, FEC FORM 3P)

Name of committee (in full) HUCKABEE FOR PRESIDENT, INC.	Report Covering the Period	
	From: 04/01/2008	To: 04/30/2008
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM :		
(a) Individuals/Persons Other Than Political Committees	1760.51	16065693.71
(b) Political Party Committees	0.00	15500.00
(c) Other Political Committees	0.00	59423.43
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))	1760.51	16140617.14
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00
(b) Other Loans	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :		
(a) Operating	38483.84	211508.00
(b) Fundraising	0.00	0.00
(c) Legal and Accounting	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))	38483.84	211508.00
21. OTHER RECEIPTS (Dividend, Interest, etc.)	30.02	13662.72
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	40274.37	16365787.86
II. DISBURSEMENTS		
23. OPERATING EXPENDITURES	76514.27	16252227.48
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	0.00	0.00
27. LOAN REPAYMENTS MADE :		
(a) Repayment of Loans made or Guaranteed by Candidate	0.00	0.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO :		
(a) Individuals/Persons Other Than Political Committees	9045.16	73683.17
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	9045.16	78683.17
29. OTHER DISBURSEMENTS	0.00	400.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	85559.43	16331310.65
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)		
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00	

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE 3 / 36
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

1. NAME OF COMMITTEE (in full)

HUCKABEE FOR PRESIDENT, INC.

ADDRESS (number and street)

C/O JPMS Cox, PLLC
11300 Cantrell Road, Suite 301

CITY, STATE, and ZIP CODE

Little Rock AR 72212

2. IDENTIFICATION NUMBER

C00431809

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	0.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	0.00

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4 / 36
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <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)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Bobai Bahk	Date of Receipt MM / DD / YYYY 04 / 04 / 2008
	Mailing Address 171 Moultrie Street MSC 96	Amount of Each Receipt this Period 50.00
	City State Zip Code Charleston SC 29409	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation The Citadel Library Specialist	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1105.32	Transaction ID: SA17A.274037

B.	Full Name (Last, First, Middle Initial) Jesse Bryant	Date of Receipt MM / DD / YYYY 04 / 05 / 2008
	Mailing Address 1775 N. Broad Street #12	Amount of Each Receipt this Period 20.00
	City State Zip Code Globe AZ 85501	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Kwik Kool Refrigeration Laborer	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 213.00	Transaction ID: SA17A.274039

C.	Full Name (Last, First, Middle Initial) Della Cooley	Date of Receipt MM / DD / YYYY 04 / 03 / 2008
	Mailing Address 29636 Avondale Street	Amount of Each Receipt this Period 50.01
	City State Zip Code Inkster MI 48141	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation BrassCraft Sales	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1040.12	Transaction ID: SA17A.274036

SUBTOTAL of Receipts This Page (optional)	▶	120.01
TOTAL This Period (last page this line number only)	▶	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5 / 36
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Lowell J. Fockler	Date of Receipt MM / DD / YYYY 04 / 21 / 2008
	Mailing Address 26325 Cannes Circle	Amount of Each Receipt this Period 501.00
	City State Zip Code Mission Viejo CA 92692	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1501.00	Transaction ID: SA17A.273991

B.	Full Name (Last, First, Middle Initial) Peter B. Hitchcock	Date of Receipt MM / DD / YYYY 04 / 04 / 2008
	Mailing Address 1047 Waverly Place #2	Amount of Each Receipt this Period 16.00
	City State Zip Code Schenectady NY 12308	
	FEC ID number of contributing federal political committee.	
	Name of Employer Requested Occupation Requested	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 356.00	Transaction ID: SA17A.273978

C.	Full Name (Last, First, Middle Initial) Peter B. Hitchcock	Date of Receipt MM / DD / YYYY 04 / 10 / 2008
	Mailing Address 1047 Waverly Place #2	Amount of Each Receipt this Period 15.00
	City State Zip Code Schenectady NY 12308	
	FEC ID number of contributing federal political committee.	
	Name of Employer Requested Occupation Requested	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 371.00	Transaction ID: SA17A.273985

SUBTOTAL of Receipts This Page (optional)	532.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 36
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Peter B. Hitchcock	Date of Receipt
	Mailing Address 1047 Waverly Place #2	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City State Zip Code Schenectady NY 12308	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<input type="text" value="15.00"/>
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="386.00"/>

Transaction ID: SA17A.274091

B.	Full Name (Last, First, Middle Initial) Peter B. Hitchcock	Date of Receipt
	Mailing Address 1047 Waverly Place #2	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City State Zip Code Schenectady NY 12308	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<input type="text" value="15.00"/>
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="401.00"/>

Transaction ID: SA17A.274092

C.	Full Name (Last, First, Middle Initial) Peter B. Hitchcock	Date of Receipt
	Mailing Address 1047 Waverly Place #2	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City State Zip Code Schenectady NY 12308	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<input type="text" value="15.00"/>
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="416.00"/>

Transaction ID: SA17A.274096

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="45.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 36
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Deborah Mulholand	Date of Receipt MM / DD / YYYY 04 / 04 / 2008
	Mailing Address 120 Waterfront Place	Amount of Each Receipt this Period 20.00
	City State Zip Code Dayton OH 45458	
	FEC ID number of contributing federal political committee.	Transaction ID: SA17A.274038
	Name of Employer Occupation Dunlevey Mahan & Furry Legal Secretary	
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Deborah Mulholand	Date of Receipt MM / DD / YYYY 04 / 07 / 2008
	Mailing Address 120 Waterfront Place	Amount of Each Receipt this Period 20.00
	City State Zip Code Dayton OH 45458	
	FEC ID number of contributing federal political committee.	Transaction ID: SA17A.274040
	Name of Employer Occupation Dunlevey Mahan & Furry Legal Secretary	
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Beth Nichols	Date of Receipt MM / DD / YYYY 04 / 16 / 2008
	Mailing Address P.O. Box 39803	Amount of Each Receipt this Period 25.00
	City State Zip Code Lakewood WA 98496	
	FEC ID number of contributing federal political committee.	Transaction ID: SA17A.273994
	Name of Employer Occupation Fisher Jones Family Dentistry Registered Dental Hygienist	
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Receipts This Page (optional)	65.00
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 36
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Beth Nichols	Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 8
	Mailing Address P.O. Box 39803	Amount of Each Receipt this Period 25.00
	City State Zip Code Lakewood WA 98496	
	FEC ID number of contributing federal political committee.	
	Name of Employer Fisher Jones Family Dentistry Occupation Registered Dental Hygienist Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 785.00
		Transaction ID: SA17A.273995

B.	Full Name (Last, First, Middle Initial) Joanne Rush	Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 8
	Mailing Address 2818 Windcrest Oaks Court	Amount of Each Receipt this Period 100.00
	City State Zip Code Valrico FL 33594	
	FEC ID number of contributing federal political committee.	
	Name of Employer Century 21 Fred McKay Realty, Inc. Occupation Realtor Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00
		Transaction ID: SA17A.274035

C.	Full Name (Last, First, Middle Initial) Barry Thomas	Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 8
	Mailing Address 7407 96th Street	Amount of Each Receipt this Period 100.00
	City State Zip Code Lubbock TX 79424	
	FEC ID number of contributing federal political committee.	
	Name of Employer Covenant Medical Group Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00
		Transaction ID: SA17A.274032

SUBTOTAL of Receipts This Page (optional)	225.00
TOTAL This Period (last page this line number only)	

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 36
	(check only one)	
<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Carol Williams	Date of Receipt
	Mailing Address 2102 E Street	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 07 / 2008
	City State Zip Code Eureka CA 95501	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<input type="text"/> 50.00
	Name of Employer Occupation Disabled	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text"/> 517.58	Transaction ID: SA17A.274041

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 50.00
TOTAL This Period (last page this line number only)	<input type="text"/> 1037.01

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 36
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input type="checkbox"/> 17a <input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) ABC News	Date of Receipt MM / DD / YYYY 04 / 25 / 2008
	Mailing Address 917 Indian Creek Lane	Amount of Each Receipt this Period 1472.07
	City State Zip Code Crownsville MD 21032	Press Travel Reimbursement
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1472.07	Transaction ID: SA20A.274183

B.	Full Name (Last, First, Middle Initial) Arkansas Democrat Gazette	Date of Receipt MM / DD / YYYY 04 / 25 / 2008
	Mailing Address 121 E. Capitol Avenue	Amount of Each Receipt this Period 4830.00
	City State Zip Code Little Rock AR 72201	Press Travel Reimbursement
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4830.00	Transaction ID: SA20A.274142

C.	Full Name (Last, First, Middle Initial) AT&T	Date of Receipt MM / DD / YYYY 04 / 29 / 2008
	Mailing Address P.O. Box 650661	Amount of Each Receipt this Period 653.08
	City State Zip Code Dallas TX 75265	Refund
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1224.69	Transaction ID: SA20A.274152

SUBTOTAL of Receipts This Page (optional)	6955.15
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 36
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input type="checkbox"/> 17a <input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) CNN	Date of Receipt MM / DD / YYYY 04 / 04 / 2008
	Mailing Address One CNN Center	Amount of Each Receipt this Period 4830.00
	City State Zip Code Atlanta GA 30303	Press Travel Reimbursement
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4830.00	Transaction ID: SA20A.274135

B.	Full Name (Last, First, Middle Initial) CNN	Date of Receipt MM / DD / YYYY 04 / 10 / 2008
	Mailing Address One CNN Center	Amount of Each Receipt this Period 623.33
	City State Zip Code Atlanta GA 30303	Press Travel Reimbursement
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 623.33	Transaction ID: SA20A.274139

C.	Full Name (Last, First, Middle Initial) Dresner, Wickers Associates, LLC	Date of Receipt MM / DD / YYYY 04 / 11 / 2008
	Mailing Address 655 Third Street	Amount of Each Receipt this Period 5999.93
	City State Zip Code San Francisco CA 94107	Refund
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5999.93	Transaction ID: SA20A.274156

SUBTOTAL of Receipts This Page (optional)	11453.26
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 36
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Los Angeles Times	Date of Receipt MM / DD / YYYY 04 / 04 / 2008
	Mailing Address 202 W. 1st Street	Amount of Each Receipt this Period 833.82
	City State Zip Code Los Angeles CA 90012	Press Travel Reimbursement
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 833.82	Transaction ID: SA20A.274136

B.	Full Name (Last, First, Middle Initial) NBC News & National Journal Group	Date of Receipt MM / DD / YYYY 04 / 10 / 2008
	Mailing Address 30 Rockefeller Center	Amount of Each Receipt this Period 5663.82
	City State Zip Code New York NY 10112	Press Travel Reimbursement
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5663.82	Transaction ID: SA20A.274140

C.	Full Name (Last, First, Middle Initial) Newsweek	Date of Receipt MM / DD / YYYY 04 / 21 / 2008
	Mailing Address 251 W. 57th Street	Amount of Each Receipt this Period 4830.00
	City State Zip Code New York NY 10019	Press Travel Reimbursement
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4830.00	Transaction ID: SA20A.274141

SUBTOTAL of Receipts This Page (optional)	11327.64
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 36
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input type="checkbox"/> 17a <input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Oklahoma Secretary of State	Date of Receipt MM / DD / YYYY 04 / 21 / 2008
	Mailing Address 2300 N. Lincoln Boulevard, Ste 101 Elections Board	Amount of Each Receipt this Period 2500.00
	City State Zip Code Oklahoma City OK 73105	Refund
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00	Transaction ID: SA20A.274154

B.	Full Name (Last, First, Middle Initial) Pinnacle Air, LLC	Date of Receipt MM / DD / YYYY 04 / 11 / 2008
	Mailing Address 333 Pinnacle Hills Parkway Suite 400	Amount of Each Receipt this Period 553.68
	City State Zip Code Rogers AR 72758	Refund
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 553.68	Transaction ID: SA20A.274158

C.	Full Name (Last, First, Middle Initial) Qwest	Date of Receipt MM / DD / YYYY 04 / 25 / 2008
	Mailing Address 70 W. Fourth Street, Floor 10	Amount of Each Receipt this Period 4990.80
	City State Zip Code St. Paul MN 55102	Refund
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4990.80	Transaction ID: SA20A.274149

SUBTOTAL of Receipts This Page (optional)	8044.48
TOTAL This Period (last page this line number only)	

Schedule A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 36

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) Barbara Webb <hr/> Mailing Address 787 Marengo Drive <hr/> City State Zip Code Troy MI 48085 <hr/> FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 8 <hr/> Amount of Each Receipt this Period 100.00 <hr/> Blackberry Purchase <hr/> Transaction ID: SA20A.274178
Name of Employer Occupation Retired <hr/> Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/> Election Cycle-to-Date ▼ 300.00		
B. Full Name (Last, First, Middle Initial) Gay White <hr/> Mailing Address One Andover Drive Apt. 7 <hr/> City State Zip Code Little Rock AR 72227 <hr/> FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 8 <hr/> Amount of Each Receipt this Period 300.00 <hr/> Computer Purchase <hr/> Transaction ID: SA20A.274179
Name of Employer Occupation Huckabee for President Exploratory Com Administrative Assistant <hr/> Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/> Election Cycle-to-Date ▼ 1125.00		

SUBTOTAL of Receipts This Page (optional)	400.00
TOTAL This Period (last page this line number only)	38180.53

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 36
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input 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)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Delta Trust & Bank	Date of Receipt
	Mailing Address 11700 Cantrell Road	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 30 / 2008
	City State Zip Code Little Rock AR 72222	Amount of Each Receipt this Period 30.02
	FEC ID number of contributing federal political committee.	Interest Income
	Name of Employer Occupation	
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 13662.72
		Transaction ID: SA21.274144

SUBTOTAL of Receipts This Page (optional)	30.02
TOTAL This Period (last page this line number only)	30.02

**Schedule B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Alltel	Transaction ID: SB23.274048 Date of Disbursement 04 / 21 / 2008
	Mailing Address P.O. Box 9001905	Amount of Each Disbursement this Period 187.89
	City Louisville State KY Zip Code 40290	
	Purpose of Disbursement Telephone Service 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) AT&T	Transaction ID: SB23.274051 Date of Disbursement 04 / 21 / 2008
	Mailing Address P.O. Box 650661	Amount of Each Disbursement this Period 1497.27
	City Dallas State TX Zip Code 75265	
	Purpose of Disbursement Telephone Service 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) AT&T	Transaction ID: SB23.274055 Date of Disbursement 04 / 21 / 2008
	Mailing Address P.O. Box 650661	Amount of Each Disbursement this Period 1695.80
	City Dallas State TX Zip Code 75265	
	Purpose of Disbursement Telephone Service 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)	3380.96
TOTAL This Period (last page this line number only)	

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

<p>A. Full Name (Last, First, Middle Initial) AT&T Mobility</p> <p>Mailing Address P.O. Box 6463</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Telephone Service</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: SB23.274058</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4044.20"/></p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Matt Chandler</p> <p>Mailing Address P.O. Box 616</p> <p>City Sumas State WA Zip Code 98295</p> <p>Purpose of Disbursement Media Production</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: SB23.274057</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Comcast Cablevision</p> <p>Mailing Address P.O. Box 105184</p> <p>City Atlanta State GA Zip Code 30348</p> <p>Purpose of Disbursement Office Expense - Cable Service</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: SB23.274009</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="102.26"/></p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6146.46"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Judith Crouch	Transaction ID: SB23.274020 Date of Disbursement
	Mailing Address 59 Belmont Drive	<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City Little Rock State AR Zip Code 72204	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="2125.00"/>
	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) Delta Trust & Bank	Transaction ID: SB23.274132 Date of Disbursement
	Mailing Address 11700 Cantrell Road	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Little Rock State AR Zip Code 72222	Amount of Each Disbursement this Period
	Purpose of Disbursement Service Charge	<input type="text" value="9.76"/>
	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) Jennifer Hatten	Transaction ID: SB23.274013 Date of Disbursement
	Mailing Address 4505 Harding Pike #157	<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2008"/>
	City Nashville State TN Zip Code 37205	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Reimbursement	<input type="text" value="1001.61"/>
	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)	<input type="text" value="3136.37"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Jennifer Hatten	Transaction ID: SB23.274016 Date of Disbursement 04 / 11 / 2008
	Mailing Address 4505 Harding Pike #157	Amount of Each Disbursement this Period 1047.15
	City Nashville State TN Zip Code 37205	
	Purpose of Disbursement Travel Reimbursement	
	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:	

B.	Full Name (Last, First, Middle Initial) Mike Huckabee	Transaction ID: SB23.274012 Date of Disbursement 04 / 10 / 2008
	Mailing Address 1134 Silverwood Trail	Amount of Each Disbursement this Period 827.00
	City North Little Rock State AR Zip Code 72116	
	Purpose of Disbursement Travel Reimbursement	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District: 00	

C.	Full Name (Last, First, Middle Initial) Sarah Huckabee	Transaction ID: SB23.274021 Date of Disbursement 04 / 01 / 2008
	Mailing Address 703 Cedar Ridge Drive	Amount of Each Disbursement this Period 2125.00
	City Little Rock State AR Zip Code 72211	
	Purpose of Disbursement Payroll	
	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:	

SUBTOTAL of Disbursements This Page (optional)	3999.15
TOTAL This Period (last page this line number only)	

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Huckaby, Davis, Lisker <hr/> Mailing Address 228 South Washington Street Suite 115 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Consulting - Compliance 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: SB23.274006 Date of Disbursement 04 / 03 / 2008 <hr/> Amount of Each Disbursement this Period 754.42
B.	Full Name (Last, First, Middle Initial) Hughes-Trigg Student Center <hr/> Mailing Address P.O. Box 750211 3140 Dyer <hr/> City Dallas State TX Zip Code 75275 <hr/> Purpose of Disbursement Event Venue Rental 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: SB23.274049 Date of Disbursement 04 / 21 / 2008 <hr/> Amount of Each Disbursement this Period 1422.04
C.	Full Name (Last, First, Middle Initial) Thomas Drake Jarman <hr/> Mailing Address 2200 Riverfront Drive Apt. 7305 <hr/> City Little Rock State AR Zip Code 72201 <hr/> Purpose of Disbursement Payroll 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: SB23.274022 Date of Disbursement 04 / 01 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	3176.46
TOTAL This Period (last page this line number only) ▶	(Empty box)

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) David John Mailing Address 15 Thankful Bradley Road City West Redding State CT Zip Code 06896 Purpose of Disbursement Payroll 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: SB23.274023 Date of Disbursement 04 / 01 / 2008 Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) JPMS Cox, PLLC Mailing Address 11300 Cantrell Road Suite 301 City Little Rock State AR Zip Code 72212 Purpose of Disbursement Accounting & Compliance 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: SB23.274145 Date of Disbursement 04 / 21 / 2008 Amount of Each Disbursement this Period 36163.35
C.	Full Name (Last, First, Middle Initial) Optus, Inc. Mailing Address P.O. Box 2503 City Jonesboro State AR Zip Code 72402 Purpose of Disbursement Telephone Equipment Removal 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: SB23.274017 Date of Disbursement 04 / 14 / 2008 Amount of Each Disbursement this Period 305.00

SUBTOTAL of Disbursements This Page (optional) ▶	37468.35
TOTAL This Period (last page this line number only) ▶	[Empty Box]

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Taxes 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: SB23.274026 Date of Disbursement 04 / 01 / 2008	Amount of Each Disbursement this Period 973.87
B.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Taxes 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: SB23.274128 Date of Disbursement 04 / 30 / 2008	Amount of Each Disbursement this Period 489.23
C.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Taxes 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: SB23.274134 Date of Disbursement 04 / 30 / 2008	Amount of Each Disbursement this Period 183.45

SUBTOTAL of Disbursements This Page (optional) ▶	1646.55
TOTAL This Period (last page this line number only) ▶	[Empty Box]

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB23.274027
	Mailing Address 4100 Solutions Center #774100	Date of Disbursement 04 / 03 / 2008
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period 104.42
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	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) Paypal, Inc.	Transaction ID: SB23.274028
	Mailing Address 4100 Solutions Center #774100	Date of Disbursement 04 / 10 / 2008
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period 134.51
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	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) David Polyansky	Transaction ID: SB23.274024
	Mailing Address 3932 Marquette Street	Date of Disbursement 04 / 01 / 2008
	City Houston State TX Zip Code 77005	Amount of Each Disbursement this Period 579.68
	Purpose of Disbursement Payroll	Category/ Type
	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)	818.61
TOTAL This Period (last page this line number only)	

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Jordan Powell	Transaction ID: SB23.274025 Date of Disbursement 04 / 01 / 2008
	Mailing Address 4529 Stonewall PMB 156	Amount of Each Disbursement this Period 1000.00
	City Greenville State TX Zip Code 75401	
	Purpose of Disbursement Payroll	
	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) Andrew Robertson	Transaction ID: SB23.274061 Date of Disbursement 04 / 15 / 2008
	Mailing Address 515 S. Illinois Street	Amount of Each Disbursement this Period 4000.00
	City Monticello State IN Zip Code 47960	
	Purpose of Disbursement Payroll	
	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) Shred-it Arkansas	Transaction ID: SB23.274004 Date of Disbursement 04 / 03 / 2008
	Mailing Address 7705 Northshore Place	Amount of Each Disbursement this Period 135.00
	City North Little Rock State AR Zip Code 72118	
	Purpose of Disbursement Office Expense	
	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)	5135.00
TOTAL This Period (last page this line number only)	

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Silent Wings Museum Mailing Address 6202 N I-27 City Lubbock State TX Zip Code 79403 Purpose of Disbursement Event Venue Rental 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: SB23.274007 Date of Disbursement 04 / 03 / 2008 Amount of Each Disbursement this Period 500.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Jo Smith Mailing Address 19 Deerwood Drive City Conway State AR Zip Code 72034 Purpose of Disbursement Payroll 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: SB23.274029 Date of Disbursement 04 / 15 / 2008 Amount of Each Disbursement this Period 60.00 Category/Type
C.	Full Name (Last, First, Middle Initial) Brad Tashenberg Mailing Address 210 M Street SW City Washington State DC Zip Code 20024 Purpose of Disbursement Travel Reimbursement 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: SB23.274053 Date of Disbursement 04 / 21 / 2008 Amount of Each Disbursement this Period 1659.28 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	2219.28
TOTAL This Period (last page this line number only) ▶	

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Texas A&M University	Transaction ID: SB23.274002
	Mailing Address P.O. Box M-1	Date of Disbursement MM / DD / YYYY 04 / 03 / 2008
	City College Station State TX Zip Code 77844	Amount of Each Disbursement this Period 2459.57
	Purpose of Disbursement Event Venue Rental	Category/Type
	Candidate Name	
	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:	

B.	Full Name (Last, First, Middle Initial) The Park at Riverdale	Transaction ID: SB23.274001
	Mailing Address 2200 Riverfront Drive	Date of Disbursement MM / DD / YYYY 04 / 02 / 2008
	City Little Rock State AR Zip Code 72202	Amount of Each Disbursement this Period 188.67
	Purpose of Disbursement Rent	Category/Type
	Candidate Name	
	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:	

C.	Full Name (Last, First, Middle Initial) Time Warner Cable	Transaction ID: SB23.274018
	Mailing Address 3347 Platt Springs Road	Date of Disbursement MM / DD / YYYY 04 / 14 / 2008
	City West Columbia State SC Zip Code 29170	Amount of Each Disbursement this Period 240.88
	Purpose of Disbursement Telephone Service	Category/Type
	Candidate Name	
	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:	

SUBTOTAL of Disbursements This Page (optional)	▶	2889.12
TOTAL This Period (last page this line number only)	▶	

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: SB23.274010 Date of Disbursement
	Mailing Address P.O. Box 8999	<input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City San Francisco State CA Zip Code 94128	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Pmt. - No Itemization Req.	<input type="text" value="8.95"/>
	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) Visa	Transaction ID: SB23.274011 Date of Disbursement
	Mailing Address P.O. Box 8999	<input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City San Francisco State CA Zip Code 94128	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment - See Memos	<input type="text" value="6240.41"/>
	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) Bearcom Rentals	Transaction ID: SB23.274011.0 Date of Disbursement
	Mailing Address P.O. Box 200600	<input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Dallas State TX Zip Code 75320	Amount of Each Disbursement this Period
	Purpose of Disbursement Event Equipment Rental	<input type="text" value="2559.49"/>
	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) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6249.36"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)
Enterprise Rent-A-Car

Mailing Address 11301 West Markham

City Little Rock State AR Zip Code 72211

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB23.274011.1
Date of Disbursement: 04 / 03 / 2008

Amount of Each Disbursement this Period: 3571.04

Category/Type

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Apple Online Store

Mailing Address 1 Infinite Loop

City Cupertino State CA Zip Code 95014

Purpose of Disbursement Refund

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB23.274011.5
Date of Disbursement: 04 / 03 / 2008

Amount of Each Disbursement this Period: -84.89

Category/Type

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	76265.67

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Andrew Lannen <hr/> Mailing Address 10001 Ashbury Circle <hr/> City Fishers State IN Zip Code 46037 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A.274116 Date of Disbursement 04 / 01 / 2008	Amount of Each Disbursement this Period 20.08
B.	Full Name (Last, First, Middle Initial) Jill Metzger <hr/> Mailing Address P.O Box 8266 <hr/> City Bossier City State LA Zip Code 71113 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A.274117 Date of Disbursement 04 / 02 / 2008	Amount of Each Disbursement this Period 50.00
C.	Full Name (Last, First, Middle Initial) Teresa Nelson <hr/> Mailing Address 1423 Wilson <hr/> City Arkadelphia State AR Zip Code 71923 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A.274126 Date of Disbursement 04 / 25 / 2008	Amount of Each Disbursement this Period 20.08

SUBTOTAL of Disbursements This Page (optional) ▶	90.16
TOTAL This Period (last page this line number only) ▶	

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) George C. Perreault <hr/> Mailing Address 7336 Captain Kidd Avenue <hr/> City Sarasota State FL Zip Code 34231 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A.274124 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 8
	Amount of Each Disbursement this Period 1700.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Lori Smith <hr/> Mailing Address 3720 W. Ellery <hr/> City Fresno State CA Zip Code 93711 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A.274127 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 8
	Amount of Each Disbursement this Period 2300.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Lyndsey Ward <hr/> Mailing Address 8932 Crest Wood Drive <hr/> City Fort Worth State TX Zip Code 76179 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A.274121 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 8
	Amount of Each Disbursement this Period 5.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	4005.00
TOTAL This Period (last page this line number only) ▶	[]

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	11
<input type="checkbox"/>	12

NAME OF COMMITTEE (In Full)
 HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ABC News	Nature of Debt (Purpose): Press Travel Reimbursement
Mailing Address 917 Indian Creek Lane	
City State ZIP Code Crownsville MD 21032	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD11.274166	
Amount Incurred This Period 2305.89	Payment This Period 1472.07	Outstanding Balance at Close of This Period 833.82

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Arkansas Democrat Gazette	Nature of Debt (Purpose): Press Travel Reimbursement
Mailing Address 121 E. Capitol Avenue	
City State ZIP Code Little Rock AR 72201	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD11.274169	
Amount Incurred This Period 4893.33	Payment This Period 0.00	Outstanding Balance at Close of This Period 4893.33

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Associated Press	Nature of Debt (Purpose): Press Travel Reimbursement
Mailing Address 450 W. 33rd Street	
City State ZIP Code New York NY 10001	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD11.274165	
Amount Incurred This Period 1205.24	Payment This Period 0.00	Outstanding Balance at Close of This Period 1205.24

1) SUBTOTALS This Period This Page (optional).....	6932.39
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 34 / 36	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 11 <input type="checkbox"/> 12

NAME OF COMMITTEE (In Full)
 HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CBS News	Nature of Debt (Purpose): Press Travel Reimbursement
Mailing Address 524 W. 57th Street	
City State ZIP Code New York NY 10019	

Outstanding Balance Beginning This Period 12377.24	Transaction ID: SD11.273967	
Amount Incurred This Period 16191.65	Payment This Period 0.00	Outstanding Balance at Close of This Period 28568.89

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CNN	Nature of Debt (Purpose): Press Travel Reimbursement
Mailing Address One CNN Center	
City State ZIP Code Atlanta GA 30303	

Outstanding Balance Beginning This Period 5453.33	Transaction ID: SD11.208560	
Amount Incurred This Period 6293.65	Payment This Period 5453.33	Outstanding Balance at Close of This Period 6293.65

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fox News	Nature of Debt (Purpose): Press Travel Reimbursement
Mailing Address 400 N. Capitol Street NE	
City State ZIP Code Washington DC 20001	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD11.274167	
Amount Incurred This Period 4830.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4830.00

1) SUBTOTALS This Period This Page (optional).....	▶	39692.54
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 35 / 36	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 11 <input type="checkbox"/> 12

NAME OF COMMITTEE (In Full)
 HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NBC News & National Journal Group	Nature of Debt (Purpose): Press Travel Reimbursement
Mailing Address 30 Rockefeller Center	
City State ZIP Code New York NY 10112	

Outstanding Balance Beginning This Period 5663.82	Transaction ID: SD11.273966	
Amount Incurred This Period 672.66	Payment This Period 5663.82	Outstanding Balance at Close of This Period 672.66

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Reuters	Nature of Debt (Purpose): Press Travel Reimbursement
Mailing Address 1333 H Street NW	
City State ZIP Code Washington DC 20005	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD11.274172	
Amount Incurred This Period 833.82	Payment This Period 0.00	Outstanding Balance at Close of This Period 833.82

1) SUBTOTALS This Period This Page (optional).....	▶	1506.48
2) TOTALS This Period (last page this line number only).....	▶	48131.41
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	48131.41

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 36 / 36	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12

NAME OF COMMITTEE (In Full)
 HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Holtzman Vogel, PLLC	Nature of Debt (Purpose): Consultants - Legal
Mailing Address 98 Alexandria Pike Suite 53	
City State ZIP Code Warrenton VA 20186	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD12.274159	
Amount Incurred This Period 7912.23	Payment This Period 0.00	Outstanding Balance at Close of This Period 7912.23

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Imagineaire	Nature of Debt (Purpose): Travel
Mailing Address 4553 Glenn Curtiss Drive	
City State ZIP Code Addison TX 75001	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD12.274160	
Amount Incurred This Period 30373.05	Payment This Period 0.00	Outstanding Balance at Close of This Period 30373.05

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor JPMS Cox, PLLC	Nature of Debt (Purpose): Accounting & Compliance Fees
Mailing Address 11300 Cantrell Road Suite 301	
City State ZIP Code Little Rock AR 72212	

Outstanding Balance Beginning This Period 72326.70	Transaction ID: SD12.266187	
Amount Incurred This Period 0.00	Payment This Period 36163.35	Outstanding Balance at Close of This Period 36163.35

1) SUBTOTALS This Period This Page (optional).....	▶	74448.63
2) TOTALS This Period (last page this line number only).....	▶	74448.63
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	74448.63