

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2007 AUG -7 AM 11:08

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Mobile Gas Service Corporation PAC

ADDRESS (number and street) 2828 Dauphin Street
 Check if different than previously reported. (ACC) Mobile AL 36606

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 00-2433444

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

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of


- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period / / through / /

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 C. S. Liollo

Signature of Treasurer  Date / /

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							
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FEC FORM 3X
Rev. 12/2004

27039503838

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Mobile Gas Service Corporation PAC

Report Covering the Period:

From:

01 / 01 / 2007

To:

06 / 30 / 2007

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2007		22,419.29
(b) Cash on Hand at Beginning of Reporting Period.....	22,419.29	
(c) Total Receipts (from Line 19).....	10,563.39	10,563.39
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	32,982.68	32,982.68
7. Total Disbursements (from Line 31).....	5,369.00	5,369.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	27,613.68	27,613.68
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		

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

27039503839

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Mobile Gas Service Corporation PAC

Report Covering the Period: From:

MM / DD / YYYY
01 / 01 / 2007

To:

MM / DD / YYYY
06 / 30 / 2007

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees
(i) Itemized (use Schedule A).....

10,500.00

10,500.00

(ii) Unitemized
(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

10,500.00

10,500.00

(b) Political Party Committees

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

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

10,500.00

10,500.00

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

63.39

63.39

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

10,563.39

10,563.39

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

10,563.39

10,563.39

27039503840

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	19.00	19.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2,000.00	2,000.00
24. Independent Expenditures (use Schedule E).....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements	3,350.00	3,350.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5,369.00	5,369.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5,369.00	5,369.00

27039503841

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	10,500.00	10,500.00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	19.00	19.00
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19.00	19.00

27039503842

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 1 OF 1	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16
			<input checked="" type="checkbox"/> 17	

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)
Mobile Gas Service Corporation PAC

Full Name (Last, First, Middle Initial)
A. BankTrust

Mailing Address
P. O. Box 3067

City State Zip Code
Mobile AL 36652

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) **Interest**

Aggregate Year-to-Date ▼

Date of Receipt
01 / **01** / **2007**
06 / **30** / **2007**

Amount of Each Receipt this Period
63.39

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

TOTAL This Period (last page this line number only).....▶ **63.39**

27039503843

**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 1 OF 5
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14
	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mobile Gas Service Corporation PAC

Full Name (Last, First, Middle Initial)
A. Fields, Edward E.

Mailing Address
P. O. Box 2248

City **Mobile** State **AL** Zip Code **36652**

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

Name of Employer **Mobile Gas Service Corp.** Occupation **Vice President**

Receipt For:
 Primary General
 Other (specify) **Contribution**

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY
01 / 02 / 2007

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Welch, Gregory H.

Mailing Address
P. O. Box 2248

City **Mobile** State **AL** Zip Code **36652**

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

Name of Employer **Mobile Gas Service Corp.** Occupation **President**

Receipt For:
 Primary General
 Other (specify) **Contribution**

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY
01 / 02 / 2007

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Downing, Jr., George E.

Mailing Address
P. O. Box 2248

City **Mobile** State **AL** Zip Code **36652**

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

Name of Employer **Mobile Gas Service Corp.** Occupation **Sr. Vice President**

Receipt For:
 Primary General
 Other (specify) **Contribution**

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY
01 / 25 / 2007

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶ **1,500.00**

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

27039503844

**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 2 OF 5	
	<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)
Mobile Gas Service Corporation PAC

A. Ford, Daniel T.
 Full Name (Last, First, Middle Initial)
 Mailing Address
P. O. Box 2248
 City **Mobile** State **AL** Zip Code **36652**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **Mobile Gas Service Corp.** Occupation **Treasurer**
 Receipt For:
 Primary General
 Other (specify) **Contribution**
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 02 / 2007
 Amount of Each Receipt this Period
500.00

B. Liollo, Constantine S.
 Full Name (Last, First, Middle Initial)
 Mailing Address
P. O. Box 2248
 City **Mobile** State **AL** Zip Code **36652**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **EnergySouth, Inc.** Occupation **President & CEO**
 Receipt For:
 Primary General
 Other (specify) **Contribution**
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 29 / 2007
 Amount of Each Receipt this Period
1,000.00

C. Hope, III, John C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
228 St. Charles Avenue
 City **New Orleans** State **LA** Zip Code **70130**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **Whitney Bank** Occupation **President**
 Receipt For:
 Primary General
 Other (specify) **Contribution**
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2007
 Amount of Each Receipt this Period
1,000.00

SUBTOTAL of Receipts This Page (optional).....▶ **2,500.00**
 TOTAL This Period (last page this line number only).....▶

27039503845

**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 3 OF 5			
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mobile Gas Service Corporation PAC

Full Name (Last, First, Middle Initial)
A. Marston, Judy A.

Mailing Address
P. O. Box 81118

City **Mobile** State **AL** Zip Code **36689**

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

Name of Employer **Judy Marston & Associates** Occupation **Owner**

Receipt For:
 Primary General
 Other (specify) **Contribution**

Aggregate Year-to-Date ▼

Date of Receipt
02 / 01 / 2007

Amount of Each Receipt this Period
1,000.00

Full Name (Last, First, Middle Initial)
B. Woodward, III, J. D.

Mailing Address
25503 Peninsular Drive

City **Marble Falls** State **TX** Zip Code **78654**

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

Name of Employer **Woodward Development** Occupation **Owner**

Receipt For:
 Primary General
 Other (specify) **Contribution**

Aggregate Year-to-Date ▼

Date of Receipt
02 / 06 / 2007

Amount of Each Receipt this Period
1,000.00

Full Name (Last, First, Middle Initial)
C. Morrisette, Harris V.

Mailing Address
2 Taylor Place

City **Mobile** State **AL** Zip Code **36608**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) **Contribution**

Aggregate Year-to-Date ▼

Date of Receipt
02 / 06 / 2007

Amount of Each Receipt this Period
1,000.00

SUBTOTAL of Receipts This Page (optional)..... **3,000.00**

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

27039503846

**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 4 OF 5
	<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)
Mobile Gas Service Corporation PAC

A. Van Antwerp, Thomas B.

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

Mailing Address
P. O. Box 850429

City **Mobile** State **AL** Zip Code **36685**

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

Name of Employer **Providence Foundation** Occupation

Receipt For:
 Primary General
 Other (specify) **Contribution**

Aggregate Year-to-Date ▼

Date of Receipt
02 / 06 / 2007

Amount of Each Receipt this Period
1,000.00

B. Stringer, Susan P.

Full Name (Last, First, Middle Initial)
Stringer, Susan P.

Mailing Address
P. O. Box 2248

City **Mobile** State **AL** Zip Code **36652**

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

Name of Employer **Mobile Gas Service Corp.** Occupation **VP & Controller**

Receipt For:
 Primary General
 Other (specify) **Contribution**

Aggregate Year-to-Date ▼

Date of Receipt
02 / 06 / 2007

Amount of Each Receipt this Period
500.00

C. Rouse, Robert H.

Full Name (Last, First, Middle Initial)
Rouse, Robert H.

Mailing Address
73 Elizabeth Lane

City **Mobile** State **AL** Zip Code **36608**

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

Name of Employer **Helmsing, Leach, Herlong** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify) **Contribution**

Aggregate Year-to-Date ▼

Date of Receipt
02 / 06 / 2007

Amount of Each Receipt this Period
1,000.00

SUBTOTAL of Receipts This Page (optional).....▶ **2,500.00**

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

27039503847

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 OF 5 (check only one)					
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mobile Gas Service Corporation PAC

Full Name (Last, First, Middle Initial)
A. Bell, Walter A.

Mailing Address
654 S. Warren Street

City **Mobile** State **AL** Zip Code **36603**

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

Name of Employer **State of Alabama** Occupation **Commissioner**
Dept. of Insurance

Receipt For:
 Primary General
 Other (specify) **Contribution**

Aggregate Year-to-Date ▼

Date of Receipt
02 / 06 / 2007

Amount of Each Receipt this Period
1,000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1,000.00
TOTAL This Period (last page this line number only).....▶	10,500.00

27039503848

**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 1 OF 1

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mobile Gas Service Corporation PAC

Full Name (Last, First, Middle Initial)

A.		Date of Disbursement	
State of Alabama		M M / D D / Y Y Y Y Y Y	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		2.00	
Office Sought:	Disbursement For:	Category/Type	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify) ▼		
<input type="checkbox"/> President			
State:	District:	20C Taxes	

B.		Date of Disbursement	
BankTrust		M M / D D / Y Y Y Y Y Y	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		17.00	
Office Sought:	Disbursement For:	Category/Type	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify) ▼		
<input type="checkbox"/> President			
State:	District:	1120 Pol Taxes	

C.		Date of Disbursement	
Mailing Address		M M / D D / Y Y Y Y Y Y	
City		State Zip Code	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name			
Office Sought:	Disbursement For:	Category/Type	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼		
<input type="checkbox"/> President			
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....▶	
TOTAL This Period (last page this line number only).....▶	19.00

27039503849

**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 1 OF 1

<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)

Mobile Gas Service Corporation PAC

Full Name (Last, First, Middle Initial)

A. Sessions Victory Campaign		Date of Disbursement
Mailing Address 41 W I-65 Service Road		<input type="checkbox"/> MM / <input type="checkbox"/> DD / <input type="checkbox"/> YYYY 03 / 29 / 2007
City	State	Amount of Each Disbursement this Period
Mobile	AL	
Purpose of Disbursement	Zip Code	<input type="checkbox"/> Amount 2,000.00
Contribution	36608-1291	
Candidate Name	Category/Type	
Jeff Sessions		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State: AL	District: U. S. Senator	

B.		Date of Disbursement
Mailing Address		<input type="checkbox"/> MM / <input type="checkbox"/> DD / <input type="checkbox"/> YYYY
City	State	Amount of Each Disbursement this Period
Purpose of Disbursement	Zip Code	<input type="checkbox"/> Amount
Candidate Name	Category/Type	
Office Sought:	Disbursement For:	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State:	District:	

C.		Date of Disbursement
Mailing Address		<input type="checkbox"/> MM / <input type="checkbox"/> DD / <input type="checkbox"/> YYYY
City	State	Amount of Each Disbursement this Period
Purpose of Disbursement	Zip Code	<input type="checkbox"/> Amount
Candidate Name	Category/Type	
Office Sought:	Disbursement For:	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="checkbox"/> Amount
TOTAL This Period (last page this line number only).....▶	2,000.00

27039503850

**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 1 OF 2

<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

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)

Mobile Gas Service Corporation PAC

Full Name (Last, First, Middle Initial)

A.

Marc Keahey Campaign

Mailing Address

756 Allen Road

City

Grove Hill

State

AL

Zip Code

35055

Purpose of Disbursement

Donation

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **AL**

District:

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2007

Amount of Each Disbursement this Period

500.00

B.

Jack Page Campaign

Mailing Address

P. O. Box 227

City

Gadsden

State

AL

Zip Code

35902

Purpose of Disbursement

Donation

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **AL**

District: **29th**

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2007

Amount of Each Disbursement this Period

500.00

C.

Terry Spicer Campaign

Mailing Address

2665 Taylor Mill Road

City

Elba

State

AL

Zip Code

36323

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2007

Amount of Each Disbursement this Period

350.00

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

1,350.00

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

27039503851

**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 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)

Mobile Gas Service Corporation Campaign

Full Name (Last, First, Middle Initial)

A.		Date of Disbursement	
Jim Folsom Campaign		MM / DD / YYYY 02 / 23 / 2007	
Mailing Address 415 2nd Avenue		Amount of Each Disbursement this Period	
City SW Cullman	State AL	Zip Code 35055	1,500.00
Purpose of Disbursement Conation		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> Lt. Gov. <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AL	District:		

B.		Date of Disbursement	
Pat Lindsey Campaign		MM / DD / YYYY 02 / 23 / 2007	
Mailing Address 126 S. Mulberry Avenue		Amount of Each Disbursement this Period	
City Butler	State AL	Zip Code 36904	500.00
Purpose of Disbursement Donation		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AL	District: 22nd		

C.		Date of Disbursement	
Mailing Address		MM / DD / YYYY	
City		State	
Zip Code		Amount of Each Disbursement this Period	
Purpose of Disbursement		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).....▶

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

3,350.00

27039503852

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)
8/1/07

USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked


PREPARER

8/7/07
DATE PREPARED

27039503853