

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

ADDRESS (number and street) 1 ENERGY PLACE
 Check if different than previously reported. (ACC)
PENSACOLA FL 32520

2. **FEC IDENTIFICATION NUMBER** C00120519
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 04 01 2007 through 04 30 2007

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

Type or Print Name of Treasurer WILLIAM GOLAN BUCK

Signature of Treasurer Electronically Filed by WILLIAM GOLAN BUCK Date 12 06 2010

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		21719.98
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	27513.08									
(c) Total Receipts (from Line 19)	4725.55	18706.69								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	32238.63	40426.67								
7. Total Disbursements (from Line 31)	3000.00	11188.04								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	29238.63	29238.63								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

Report Covering the Period: From: To:

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)	2005.77	5226.78
(ii) Unitemized	2685.09	13348.86
(iii) TOTAL (add Lines 11(a)(i) and (ii)	4690.86	18575.64
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	4690.86	18575.64
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	34.69	131.05
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	4725.55	18706.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4725.55	18706.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	4000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	7188.04
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	3000.00	11188.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3000.00	11188.04

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	4690.86	18575.64
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4690.86	18575.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 12
(check only one)

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

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)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.

Full Name (Last, First, Middle Initial)
ERNEST C CONNOR, JR

Mailing Address 201 POINCIANA DR

City State Zip Code
GULF BREEZE FL 32561-4347

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

Name of Employer Occupation
GULF POWER TEAM LEADER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

Transaction ID: SA11AI.13415

Amount of Each Receipt this Period
100.00

monthly payroll deduction

B.

Full Name (Last, First, Middle Initial)
KEITH J CUEVAS

Mailing Address 2865 GREYSTONE DR

City State Zip Code
PACE FL 32571

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

Name of Employer Occupation
GULF POWER COMPANY PLANT MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 317.12

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

Transaction ID: SA11AI.13418

Amount of Each Receipt this Period
80.78

monthly payroll deduction

C.

Full Name (Last, First, Middle Initial)
FRANCIS M FISHER, JR

Mailing Address 2320 OXFORD DR

City State Zip Code
PENSACOLA FL 32503-5042

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

Name of Employer Occupation
GULF POWER VICE PRES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 801.98

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

Transaction ID: SA11AI.13428

Amount of Each Receipt this Period
202.97

monthly payroll contribut-
ion

SUBTOTAL of Receipts This Page (optional) ► **383.75**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) BRIAN E HEINFELD		Date of Receipt
	Mailing Address 701 RADCLIFF AVE		<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	LYNN HAVEN	FL	32444
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GULF POWER COMPANY		Occupation PLANT MANAGER	Transaction ID: SA11AI.13442
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="210.50"/>	Amount of Each Receipt this Period <input type="text" value="53.97"/>
			monthly payroll contribution

B.	Full Name (Last, First, Middle Initial) PAUL B JACOB		Date of Receipt
	Mailing Address 1322 Quiet Cove Ct		<input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Gulf Breeze	FL	32563
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GULF POWER		Occupation VP	Transaction ID: SA11AI.13568
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="682.84"/>	Amount of Each Receipt this Period <input type="text" value="180.94"/>
			monthly payroll deduction

C.	Full Name (Last, First, Middle Initial) J THOMAS KILGORE, JR		Date of Receipt
	Mailing Address 1820 EAST LA RUA ST		<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	PENSACOLA	FL	32501
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GULF POWER		Occupation MANAGER	Transaction ID: SA11AI.13454
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="279.50"/>	Amount of Each Receipt this Period <input type="text" value="71.31"/>
			monthly payroll contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="306.22"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 8 / 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) RONNIE R LABRATO		Date of Receipt
	Mailing Address 549 MILESTONE BLVD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	CANTONMENT	FL	32533-6552
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.13457
Name of Employer GULF POWER		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 194.68
		<input type="text"/> 758.42	monthly payroll contribution

B.	Full Name (Last, First, Middle Initial) ROBERT G LIVINGSTON		Date of Receipt
	Mailing Address 2470 PALE TIGER CT		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	TALLAHASSEE	FL	32308-7015
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.13462
Name of Employer GULF POWER		Occupation MANGER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 60.00
		<input type="text"/> 240.00	monthly payroll contribution

C.	Full Name (Last, First, Middle Initial) RICHARD MANDES, Jr.		Date of Receipt
	Mailing Address 4432 SOUNDSIDE DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	GULF BREEZE	FL	32563
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.13464
Name of Employer GULF POWER		Occupation MGR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 135.26
		<input type="text"/> 527.68	monthly payroll contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 389.94
TOTAL This Period (last page this line number only)	<input type="text"/>

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 9 / 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) ALAN G MCDANIEL	Date of Receipt MM / DD / YYYY 04 / 27 / 2007
	Mailing Address 2391 INVERNESS DR	Transaction ID: SA11AI.13476
	City State Zip Code PENSACOLA FL 32503-5049	Amount of Each Receipt this Period 51.69
	FEC ID number of contributing federal political committee. C	monthly payroll contribution
	Name of Employer Occupation GULF POWER MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.76	

B.	Full Name (Last, First, Middle Initial) WALTER D MULLINS, JR	Date of Receipt MM / DD / YYYY 04 / 27 / 2007
	Mailing Address 11557 SORENTO RD	Transaction ID: SA11AI.13491
	City State Zip Code PENSACOLA FL 32507-8617	Amount of Each Receipt this Period 118.66
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 469.54	

C.	Full Name (Last, First, Middle Initial) MARGARET D NEYMAN	Date of Receipt MM / DD / YYYY 04 / 27 / 2007
	Mailing Address 102 HIGHPOINT DR	Transaction ID: SA11AI.13493
	City State Zip Code GULF BREEZE FL 32561-4016	Amount of Each Receipt this Period 96.39
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 376.02	

SUBTOTAL of Receipts This Page (optional)	266.74
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) WILLIAM F POPE	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7
	Mailing Address 3030 E KINGSFIELD RD	Transaction ID: SA11AI.13502
	City State Zip Code PENSACOLA FL 32514-9737	Amount of Each Receipt this Period 70.58
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER PLANNING COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.42	

B.	Full Name (Last, First, Middle Initial) CARL A PUNYKO	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7
	Mailing Address 4154 N CAMBRIDGE WAY	Transaction ID: SA11AI.13504
	City State Zip Code PACE FL 32571	Amount of Each Receipt this Period 101.58
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 394.82	

C.	Full Name (Last, First, Middle Initial) JOHN T SCARBROUGH, JR	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7
	Mailing Address 1680 COLLEGE PKWY	Transaction ID: SA11AI.13520
	City State Zip Code GULF BREEZE FL 32563	Amount of Each Receipt this Period 98.46
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.60	

SUBTOTAL of Receipts This Page (optional)	270.62
TOTAL This Period (last page this line number only)	

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

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

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

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A. Full Name (Last, First, Middle Initial)
SANDRA F SIMS

Mailing Address 4018 BOND CIR

City State Zip Code
NICEVILLE FL 32578

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

Name of Employer Occupation
GULF POWER ASSISTANT TO VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.26

Date of Receipt
MM / DD / YYYY
04 / 27 / 2007

Transaction ID: SA11AI.13526

Amount of Each Receipt this Period
88.50

monthly payroll deduction

B. Full Name (Last, First, Middle Initial)
SUSAN NOLEN STORY

Mailing Address 714 PEAKE'S POINT DR

City State Zip Code
GULF BREEZE FL 32561

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

Name of Employer Occupation
GULF POWER PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2007

Transaction ID: SA11AI.13532

Amount of Each Receipt this Period
300.00

monthly payroll deduction

SUBTOTAL of Receipts This Page (optional) ► **388.50**

TOTAL This Period (last page this line number only) ► **2005.77**

**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 12 / 12

<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)

RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.

Full Name (Last, First, Middle Initial)

ALLEN BOYD

Mailing Address P O BOX 15703

City
TALLAHASSEE

State
FL

Zip Code
32317

Purpose of Disbursement
US HOUSE DIST 2

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: FL District: 02

Transaction ID: SB23.13571

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)