

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
STRAIGHT TALK AMERICA

ADDRESS (number and street) 211 NORTH UNION STREET SUITE 200
 Check if different than previously reported. (ACC)
ALEXANDRIA VA 22314

2. **FEC IDENTIFICATION NUMBER** C00413245
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 (12G)
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 05 01 2006 through 05 31 2006

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 Keith Davis

Signature of Treasurer Electronically Filed by Keith Davis Date 06 20 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
STRAIGHT TALK AMERICA

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		1226502.62
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	1077148.07									
(c) Total Receipts (from Line 19)	488214.88	2118588.43								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1565362.95	3345091.05								
7. Total Disbursements (from Line 31)	803517.45	2583245.55								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	761845.50	761845.50								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	488.35									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	27343.45									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
STRAIGHT TALK AMERICA

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	352725.00	1532804.85
(i) Itemized (use Schedule A)	95902.31	488876.07
(ii) Unitemized	448627.31	2021680.92
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	39587.57	91587.57
(c) Other Political Committees (such as PACs)	488214.88	2113268.49
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
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	3123.52
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	2196.42
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))	488214.88	2118588.43
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	488214.88	2118588.43

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

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.....	643062.81	1857003.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	643062.81	1857003.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	80219.58	394930.47
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	1050.00	26975.00
(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))	1050.00	26975.00
29. Other Disbursements.....	79185.06	304336.89
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))..	803517.45	2583245.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	803517.45	2583245.55

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)	488214.88	2113268.49
34. Total Contribution Refunds (from Line 28(d))	1050.00	26975.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	487164.88	2086293.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	643062.81	1857003.19
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	3123.52
38. Net Operating Expenditures (subtract Line 37 from Line 36)	643062.81	1853879.67

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. John E. Acuff, Jr.

Mailing Address 114 Disston Rd

City State Zip Code
Oak Ridge TN 37830

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2006

Transaction ID: SA11A1.36096

Amount of Each Receipt this Period
50.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Phil Adams

Mailing Address 3000 Briarcrest Dr Ste 508

City State Zip Code
Bryan TX 77802

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

Name of Employer Occupation
Phil Adams Co. Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2006

Transaction ID: SA11A1.36102

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Michael Ainslie

Mailing Address PO Box 425

City State Zip Code
Saratoga Springs NY 12866

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

Name of Employer Occupation
Self Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2006

Transaction ID: SA11A1.36116

Amount of Each Receipt this Period
750.00

Contribution

SUBTOTAL of Receipts This Page (optional)	5800.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. Herbert M. Allison, Jr. Mailing Address 730 3rd Ave City State Zip Code New York NY 10017 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6 Transaction ID: SA11A1.36145 Amount of Each Receipt this Period 5000.00 Contribution
Name of Employer Occupation TIAA-CREF Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		

B. Full Name (Last, First, Middle Initial) Mrs. Simin N. Allison Mailing Address 730 3rd Ave City State Zip Code New York NY 10017 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6 Transaction ID: SA11A1.36146 Amount of Each Receipt this Period 5000.00 Contribution
Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		

C. Full Name (Last, First, Middle Initial) Mr. Clavell T. Anderson Mailing Address 869 S 1560 E City State Zip Code Spanish Fork UT 84660 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6 Transaction ID: SA11A1.36170 Amount of Each Receipt this Period 5000.00 Contribution
Name of Employer Occupation Franklin Squires Executive VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional)	15000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. Maynard C. Anderson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 205 Yoakum Pkwy Unit 721		Transaction ID: SA11A1.36178
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Arcadia Group Worldwide, Inc.	Occupation President/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Mr. R. E. Atha, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 3716 W 65th St		Transaction ID: SA11A1.36221
City State Zip Code Mission Hills KS 66208	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

C. Full Name (Last, First, Middle Initial) Dr. Holly E. Atlas		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 10151 Rocking H Rd		Transaction ID: SA11A1.36224
City State Zip Code Salado TX 76571	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Mass General Hospital	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 194
	<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Mr. Bruce A. Barnet		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 5 Crooked Mile Rd		Transaction ID: SA11A1.36301
City State Zip Code Westport CT 06880	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Self Occupation Private Investor	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Lewis Barnum, III		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 1710 Avenida Del Mundo		Transaction ID: SA11A1.36306
City State Zip Code Coronado CA 92118	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Delta Airlines Occupation Pilot	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Mike Barrett		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 41 Harbour Heights Dr		Transaction ID: SA11A1.36310
City State Zip Code Annapolis MD 21401	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Counterpoint Assessments Occupation Consultant	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 194
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. Paul A. Barthol		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 13296A Blueberry Ln Apt 201		Transaction ID: SA11A1.36318
City State Zip Code Fairfax VA 22033	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Marriott Courtyard	Occupation Night Auditor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

B. Full Name (Last, First, Middle Initial) Mr. Charlie Bass		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 5400 E Gleneagles Dr		Transaction ID: SA11A1.36337
City State Zip Code Tucson AZ 85718	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer National Recovery Systems	Occupation Systems Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Dr. Edgar H. Batcheller, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 1512 Clifton Rd		Transaction ID: SA11A1.36338
City State Zip Code Jacksonville NC 28540	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Onslow Surgical Clinic	Occupation Senior Surgeon	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional) ▶	1150.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 194
	<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Mr. Steven Becker		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 4409 Bordeaux Ave		Transaction ID: SA11A1.36371	
City State Zip Code Dallas TX 75205	Amount of Each Receipt this Period 4000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Greenway Capital	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00		

Full Name (Last, First, Middle Initial) B. Mrs. Isabelle Bell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 14 Silver Spring Rd		Transaction ID: SA11A1.36388	
City State Zip Code Wilton CT 06897	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer		Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Mr. Edward C. Bessey		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 3560 N Outpost Rd		Transaction ID: SA11A1.36417	
City State Zip Code Tucson AZ 85749	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Ms. Marjorie Blachly

Mailing Address 674 Deer Park Rd

City State Zip Code
Dix Hills NY 11746

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2006

Transaction ID: SA11A1.36449

Amount of Each Receipt this Period
200.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Marvin L. Boote

Mailing Address 24340 Yellowstone Trl

City State Zip Code
Excelsior MN 55331

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.36495

Amount of Each Receipt this Period
100.00

Contribution

C. Full Name (Last, First, Middle Initial)
Gen. John L. Borling

Mailing Address 1979 Harlem Blvd

City State Zip Code
Rockford IL 61103

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

Name of Employer Occupation
Performance Consulting Group Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2006

Transaction ID: SA11A1.36511

Amount of Each Receipt this Period
350.00

Contribution

SUBTOTAL of Receipts This Page (optional)	650.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Douglas B. Bowman

Mailing Address 1003 Main St

City State Zip Code
Windermere FL 34786

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

Name of Employer Occupation
Fairfield Resorts, Inc. Resort Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.36529

Amount of Each Receipt this Period
200.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Arthur J. Breault, Jr.

Mailing Address 487 Woodhaven Way

City State Zip Code
Athens GA 30606

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
05 / 17 / 2006

Transaction ID: SA11A1.36556

Amount of Each Receipt this Period
150.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. J. Baxter Brinkmann

Mailing Address 4215 McEwen Rd

City State Zip Code
Dallas TX 75244

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

Name of Employer Occupation
The Brinkman Corp. President/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2006

Transaction ID: SA11A1.36572

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	5350.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. Gary Brown		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 3500 Windsor Rd		Transaction ID: SA11A1.36580	
City Austin	State TX	Zip Code 78703	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Self	Occupation Real Estate Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

B. Full Name (Last, First, Middle Initial) Mr. J. Robert Brown		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 6949 Market Ave		Transaction ID: SA11A1.36584	
City El Paso	State TX	Zip Code 79915	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer The Girling Group	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

C. Full Name (Last, First, Middle Initial) Mrs. Sara L. Buck		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 4535 Province Line Rd		Transaction ID: SA11A1.36627	
City Princeton	State NJ	Zip Code 08540	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. Kenneth H. Bullock		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 2215 Blaine Ave		Transaction ID: SA11A1.36638	
City State Zip Code Salt Lake City UT 84108	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Occupation Utah League of Cities Director	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Mr. Joseph Burke		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 15 Beechwood Rd		Transaction ID: SA11A1.36648	
City State Zip Code Stoughton MA 02072	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Occupation United Parcel Service Driver	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Mr. Patrick M. Byrne		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 700 Bitner Rd		Transaction ID: SA11A1.36699	
City State Zip Code Park City UT 84098	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Occupation Overstock.com CEO	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	6100.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mrs. Anne P. Cabot		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address PO Box 222		Transaction ID: SA11A1.36701
City State Zip Code Cold Spring NY 10516	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Mr. Brad F. Call		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 880 W Center St		Transaction ID: SA11A1.36715
City State Zip Code North Salt Lake UT 84054	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Maverik, Inc. Executive	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Mrs. Louise M. Callahan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 7 Indiana Ave		Transaction ID: SA11A1.36718
City State Zip Code Reading MA 01867	Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Self Daycare Provider	Aggregate Year-to-Date ▼ 225.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1625.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. Philip Alan Canfield		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 2218 N Fremont St		Transaction ID: SA11A1.36739	
City State Zip Code Chicago IL 60614	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Canfield Co.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

B. Full Name (Last, First, Middle Initial) Mrs. Suzanne M. Capone		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 39 Hunting Ln		Transaction ID: SA11A1.36745	
City State Zip Code Sherborn MA 01770	Amount of Each Receipt this Period 750.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer		Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

C. Full Name (Last, First, Middle Initial) Mr. Clark H. Caras		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 27 Birch Ln		Transaction ID: SA11A1.36747	
City State Zip Code Draper UT 84020	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer State of Utah		Occupation Public Information Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	6750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Steven C. Carhart

Mailing Address 12 Bridge St

City State Zip Code
Manchester MA 01944

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

Name of Employer Trust & Fiduciary Mgmt. Services
Occupation Investment Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2006

Transaction ID: SA11A1.36750

Amount of Each Receipt this Period
300.00

Contribution

B. Full Name (Last, First, Middle Initial)
Ms. Charlotte K. Carleton

Mailing Address 401 E Linton Blvd Apt 327

City State Zip Code
Delray Beach FL 33483

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

Name of Employer
Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.36751

Amount of Each Receipt this Period
350.00

Contribution

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

Mailing Address PO Box 600035

City State Zip Code
Dallas TX 75360

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

Name of Employer State of Texas
Occupation Senator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2006

Transaction ID: SA11A1.36759

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	5650.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Dr. Paul R. Cass

Mailing Address 8 Prides Crossing

City State Zip Code
Eliot ME 03903

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

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 10 / 2006

Transaction ID: SA11A1.36774

Amount of Each Receipt this Period
150.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Nathaniel Chafee

Mailing Address 476 Princeton Way NE

City State Zip Code
Atlanta GA 30307

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 01 / 2006

Transaction ID: SA11A1.36792

Amount of Each Receipt this Period
1000.00

Contribution

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

Mailing Address PO Box 566

City State Zip Code
Manchester VT 05254

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 10 / 2006

Transaction ID: SA11A1.36797

Amount of Each Receipt this Period
100.00

Contribution

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 194
	<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Mr. Chris M. Chen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 1505 Nelson Ave		Transaction ID: SA11A1.36815
City State Zip Code Manhattan Beach CA 90266	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Segue Occupation CEO	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. James H. Click, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 6420 E 22nd St		Transaction ID: SA11A1.36850
City State Zip Code Tucson AZ 85710	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Jim Click Automotive Occupation President	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Brett Cosor		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 306 Alfandre St		Transaction ID: SA11A1.36935
City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Video Networks, Inc. Occupation Technology System Architect	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	10150.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Dr. John P. Costello

Mailing Address 3610 W Lincoln Ave

City State Zip Code
Sacramento CA 95818

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2006

Transaction ID: SA11A1.36936

Amount of Each Receipt this Period
100.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Charles E. Crary

Mailing Address 8401 E Woodland Rd

City State Zip Code
Tucson AZ 85749

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2006

Transaction ID: SA11A1.36974

Amount of Each Receipt this Period
200.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Joe Henry Cruz

Mailing Address 1504 Cedar St

City State Zip Code
Bastrop TX 78602

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2006

Transaction ID: SA11A1.36995

Amount of Each Receipt this Period
100.00

Contribution

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 194
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. James L. Curtis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 34 Lime St		Transaction ID: SA11A1.37011
City State Zip Code Boston MA 02108	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Staghorn	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

B. Full Name (Last, First, Middle Initial) Mr. Mike A. Davis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address PO Box 308		Transaction ID: SA11A1.37065
City State Zip Code Magnolia AR 71754	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Self	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Mr. James H. De Kleinhans		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address PO Box 716		Transaction ID: SA11A1.37077
City State Zip Code Hagerman ID 83332	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	2350.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. John R. Denman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address Mail Station 9030 PO Box 53999		Transaction ID: SA11A1.40888
City Phoenix State AZ Zip Code 85072	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Arizona Public Service Company	Occupation Executive Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Mr. Paul F. Denning		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 2165 California St		Transaction ID: SA11A1.37106
City San Francisco State CA Zip Code 94115	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Self	Occupation Investment Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

C. Full Name (Last, First, Middle Initial) Mr. W. Scott Ditch		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 4661 Devon Path		Transaction ID: SA11A1.37149
City Royal Oak State MD Zip Code 21662	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	1600.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Kevin G. Ditto

Mailing Address 1063 Dell Ave

City State Zip Code
Campbell CA 95008

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

Name of Employer Occupation
West Valley Pet Lodge Kennel Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y
05 / 25 / 2006

Transaction ID: SA11A1.37151

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Ms. Erna Donahue

Mailing Address PO Box 610

City State Zip Code
South Easton MA 02375

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

Name of Employer Occupation
Self Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y
05 / 23 / 2006

Transaction ID: SA11A1.37163

Amount of Each Receipt this Period
250.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Don Barton Doyle

Mailing Address 155 N Baldwin Ave

City State Zip Code
Sierra Madre CA 91024

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

Name of Employer Occupation
Self Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y
05 / 16 / 2006

Transaction ID: SA11A1.37191

Amount of Each Receipt this Period
100.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **600.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 194
	<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Mrs. Marilyn Fedak		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 655 Park Ave		Transaction ID: SA11A1.37364	
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Alliance Capital	Occupation Investment Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Dr. Michael J. Fedak		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 655 Park Ave		Transaction ID: SA11A1.37365	
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Self	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Mr. Arnold Fisher		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 299 Park Ave Fl 42		Transaction ID: SA11A1.37401	
City State Zip Code New York NY 10171	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Fisher Brothers	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mrs. Marjorie Fisher

Mailing Address 8545 Carmel Valley Rd

City State Zip Code
Carmel CA 93923

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.37406

Amount of Each Receipt this Period
100.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Robert J. Flynn

Mailing Address 21 Hamilton Ln

City State Zip Code
Darien CT 06820

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

Name of Employer Occupation
MJLF Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2006

Transaction ID: SA11A1.37427

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Richard H. Francis

Mailing Address 40 Grosvenor Rd

City State Zip Code
Short Hills NJ 07078

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2006

Transaction ID: SA11A1.37463

Amount of Each Receipt this Period
150.00

Contribution

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Robert H. Frick

Mailing Address 921 Westerfield Dr

City State Zip Code
Wilmette IL 60091

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.37487

Amount of Each Receipt this Period
150.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Joseph G. Gamble

Mailing Address 3333 Spring Valley Ct

City State Zip Code
Birmingham AL 35223

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
MM / DD / YYYY
05 / 16 / 2006

Transaction ID: SA11A1.37526

Amount of Each Receipt this Period
250.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Gerald G. Garbacz

Mailing Address 339 Derbyshire Ln

City State Zip Code
Riva MD 21140

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

Name of Employer Occupation
G3, LLC Consultant/Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.37533

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	1400.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. Clifford E. Gebhart		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 707 E Central Ave		Transaction ID: SA11A1.37556
City State Zip Code Miamisburg OH 45342	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 275.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Mr. Richard L. Geismar		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 18 Hidden Brook Rd		Transaction ID: SA11A1.37563
City State Zip Code Riverside CT 06878	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Mrs. Bettie Girling		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 2501 El Greco Cv		Transaction ID: SA11A1.37604
City State Zip Code Austin TX 78703	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 194
	<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)
STRAIGHT TALK AMERICA

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

Mailing Address 4401 Overton Crest St

City State Zip Code
Fort Worth TX 76109

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 30 / 2006

Transaction ID: SA11A1.37622

Amount of Each Receipt this Period
2000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. R. Kinnan Golemon

Mailing Address 111 Congress Ste 1400

City State Zip Code
Austin TX 78701

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

Name of Employer Occupation
Brown McCarroll, LLP Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2006

Transaction ID: SA11A1.37628

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Robert B. Goodrich

Mailing Address 115 W Inlet Rd

City State Zip Code
Ocean City NJ 08226

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

Name of Employer Occupation
Self Programmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2006

Transaction ID: SA11A1.37633

Amount of Each Receipt this Period
100.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	3100.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mrs. Dinah L. Greeff

Mailing Address **5902 S Atlanta PI**

City **Tulsa** State **OK** Zip Code **74105**

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

Name of Employer _____ Occupation **Homemaker**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	9	/	2	0	0	6

Transaction ID: SA11A1.37658

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Michael P. Green

Mailing Address **6544 N 36th St**

City **Phoenix** State **AZ** Zip Code **85018**

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

Name of Employer **Fennemore Craig** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

Transaction ID: SA11A1.37660

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Ms. Dorothy C. Grey

Mailing Address **PO Box 522829**

City **Marathon Shores** State **FL** Zip Code **33052**

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

Name of Employer _____ Occupation **Retired**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	7	/	2	0	0	6

Transaction ID: SA11A1.37678

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 / 194
<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Dr. Robert A. Grubb		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 612 Picnic Ln		Transaction ID: SA11A1.37697	
City State Zip Code Selinsgrove PA 17870	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Self Occupation Physician	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 500.00			

B. Full Name (Last, First, Middle Initial) COL Harold H. Hall, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 18 Powder Creek Dr		Transaction ID: SA11A1.37734	
City State Zip Code Belleville IL 62223	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Strano & Associates Occupation Real Estate Salesperson	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 250.00			

C. Full Name (Last, First, Middle Initial) Mrs. Aubrea Hance		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 8140 N Mopac Expy Ste 4-270		Transaction ID: SA11A1.37768	
City State Zip Code Austin TX 78759	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Occupation Homemaker	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 1000.00			

SUBTOTAL of Receipts This Page (optional) ▶	1650.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 194
	<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Mr. Kent Hance		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 111 Congress Ave Ste 500		Transaction ID: SA11A1.37772	
City Austin State TX Zip Code 78701	Amount of Each Receipt this Period 3000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Hance, Scarborough, and Wright Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 3000.00		

Full Name (Last, First, Middle Initial) B. Mr. Kent Ronald Hance, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 8140 N Mopac Expy Ste 4-270		Transaction ID: SA11A1.37770	
City Austin State TX Zip Code 78759	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Hance Financial Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Mrs. Susan Hance		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 111 Congress Ave Ste 500		Transaction ID: SA11A1.37774	
City Austin State TX Zip Code 78701	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 5000.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Ernest R. Harker

Mailing Address 12193 Joseph View Ln

City State Zip Code
Draper UT 84020

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

Name of Employer Occupation
8 Fish Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2006

Transaction ID: SA11A1.37805

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Dr. Oliver J. Harper

Mailing Address 7251 N Central Ave

City State Zip Code
Phoenix AZ 85020

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

Name of Employer Occupation
AZ Medical Clinic Limited Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2006

Transaction ID: SA11A1.40890

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mrs. Sharon J. Harper

Mailing Address 7251 N Central Ave

City State Zip Code
Phoenix AZ 85020

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

Name of Employer Occupation
The Plaza Companies President/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2006

Transaction ID: SA11A1.40891

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	15000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mrs. Margaret S. Hart

Mailing Address 1272 N Green Bay Rd

City State Zip Code
Lake Forest IL 60045

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y
05 / 17 / 2006

Transaction ID: SA11A1.37822

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Gerald E. Haughey

Mailing Address 40 Bay Ave

City State Zip Code
Ocean City NJ 08226

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

Name of Employer Occupation
Czura Stilwell Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2006

Transaction ID: SA11A1.37840

Amount of Each Receipt this Period
25.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Michael S. Hazzard

Mailing Address 1 Bishop Gadsden Way
Apt 335

City State Zip Code
Charleston SC 29412

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2006

Transaction ID: SA11A1.37854

Amount of Each Receipt this Period
75.00

Contribution

SUBTOTAL of Receipts This Page (optional)	350.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 194						
	(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

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Robert B. Hedges, Jr.

Mailing Address 11 Colonial Way

City State Zip Code
Weston MA 02493

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

Name of Employer Self Occupation
Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 10 / 2006

Transaction ID: SA11A1.37858

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mrs. Carol T. Henderson

Mailing Address 505 Tremont St
Unit 405

City State Zip Code
Boston MA 02116

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 31 / 2006

Transaction ID: SA11A1.37870

Amount of Each Receipt this Period
2000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Dr. James K. Hepler

Mailing Address 811 La Sierra Dr

City State Zip Code
Sacramento CA 95864

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 10 / 2006

Transaction ID: SA11A1.37882

Amount of Each Receipt this Period
250.00

Contribution

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
LCDR Robert M. Herron

Mailing Address 1215 Anchors Way Dr
No. 241

City State Zip Code
Ventura CA 93001

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.37893

Amount of Each Receipt this Period
100.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. John Heyburn

Mailing Address 4605 Post Oak Place Dr
Ste 228

City State Zip Code
Houston TX 77027

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.37912

Amount of Each Receipt this Period
2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Raymond E. Heytens

Mailing Address 2612 E Larkwood St

City State Zip Code
West Covina CA 91791

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

Name of Employer Occupation
Self Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.37913

Amount of Each Receipt this Period
150.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	2750.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. R. Steven Hicks		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 600 Congress Ave Ste 1400		Transaction ID: SA11A1.37918
City Austin State TX Zip Code 78701	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Capstar Broadcasting	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Mr. William C. S. Hicks		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 5 Wildwood Rd		Transaction ID: SA11A1.37922
City Wayland State MA Zip Code 01778	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Mr. Robert L. Hill		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 1832 Viking Way		Transaction ID: SA11A1.37932
City La Jolla State CA Zip Code 92037	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	2200.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. William O. Hiner, Jr.

Mailing Address **923 W Maple Dr**

City **Southampton** State **PA** Zip Code **18966**

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

Name of Employer **Lower Bucks Hospital** Occupation **Pharmacist**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt

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

Transaction ID: SA11A1.37939

Amount of Each Receipt this Period
100.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Julian R. Hoffman

Mailing Address **1620 Indian School Rd NE
Apt 308**

City **Albuquerque** State **NM** Zip Code **87102**

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

Name of Employer **Self** Occupation **Investor**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

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

Transaction ID: SA11A1.37964

Amount of Each Receipt this Period
150.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. W. Burns Hoffman

Mailing Address **1908 Boundary Dr**

City **Santa Barbara** State **CA** Zip Code **93108**

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

Name of Employer Occupation **Retired**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt

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

Transaction ID: SA11A1.37966

Amount of Each Receipt this Period
250.00

Contribution

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 194
	<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Mr. Doug Holmes		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 321 Oak Ln		Transaction ID: SA11A1.37984	
City Farmington State UT Zip Code 84025	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Self Occupation Investor	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. James E. Hudgins		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 6758 E Lynchburg Salem Tpke		Transaction ID: SA11A1.38038	
City Lowry State VA Zip Code 24570	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. Griffith L. Humphrey		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 280 Gellert Dr		Transaction ID: SA11A1.38053	
City San Francisco State CA Zip Code 94132	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. John C. Hunnewell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 102 Cohen Rd		Transaction ID: SA11A1.38062
City State Zip Code S Londonderry VT 05155	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Mr. David Hunter		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 5132 N 300 W		Transaction ID: SA11A1.38075
City State Zip Code Provo UT 84604	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Stone Five Studios CEO	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Adm. Bobby R. Inman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 3200 Riva Ridge Rd		Transaction ID: SA11A1.38106
City State Zip Code Austin TX 78746	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Occupation Self Investor	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	6300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 194
	<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Mr. Scott B. Jacobs		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 6038 Saint Charles Ave Apt D		Transaction ID: SA11A1.38127
City New Orleans	State LA	Zip Code 70118
Amount of Each Receipt this Period 500.00		Contribution
FEC ID number of contributing federal political committee. C		
Name of Employer Strategic Comp, LLC	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mr. Charles J. Jahant		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 2600 Eldridge Ln		Transaction ID: SA11A1.38133
City Waco	State TX	Zip Code 76710
Amount of Each Receipt this Period 300.00		Contribution
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Mr. Scott James		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 470 Spring Ridge Dr PO Box 768060		Transaction ID: SA11A1.38136
City Roswell	State GA	Zip Code 30076
Amount of Each Receipt this Period 200.00		Contribution
FEC ID number of contributing federal political committee. C		
Name of Employer Precision Aviation Group	Occupation Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 194
	<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Mrs. Martha L. Jordano		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 3750 Foothill Rd		Transaction ID: SA11A1.38226
City State Zip Code Santa Barbara CA 93105	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mrs. Adrienne Joseph		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address PO Box 1878		Transaction ID: SA11A1.38228
City State Zip Code Gloucester VA 23061	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Occupation Great Atlantic Agency CEO	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Gabriel Joseph		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 85 E Bay Blvd		Transaction ID: SA11A1.38230
City State Zip Code Provo UT 84606	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Occupation Franklin Squires Co. Business Owner	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. Thomas Joyce		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 142 Goodwives River Rd		Transaction ID: SA11A1.38237
City State Zip Code Darien CT 06820	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Knight Capital Group	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B. Full Name (Last, First, Middle Initial) Mr. Mike Kallay		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 309 E Morehead St Apt 513		Transaction ID: SA11A1.38246
City State Zip Code Charlotte NC 28202	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer American City Business Journal	Occupation Publisher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Mr. Gerald P. Kaminsky		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 605 3rd Ave		Transaction ID: SA11A1.38250
City State Zip Code New York NY 10158	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Neuberger Berman, LLC	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	6500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. Marshall P. Kath		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 5910 N Central Expy Ste 400		Transaction ID: SA11A1.38258
City State Zip Code Dallas TX 75206	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Colemont Insurance Brokers	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Mr. Craig Keeland		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 801 Klein Rd Ste 300		Transaction ID: SA11A1.38269
City State Zip Code Plano TX 75074	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer ViaViente Worldwide Co.	Occupation Chairman/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C. Full Name (Last, First, Middle Initial) Mr. Nicholas Kelne		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 933 Waverly Ct		Transaction ID: SA11A1.38297
City State Zip Code Aurora IL 60502	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Self	Occupation Trader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	5800.00
TOTAL This Period (last page this line number only) ▶	(Empty field)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. David Kitching

Mailing Address 1285 Georgetown Rd

City State Zip Code
Boulder CO 80305

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2006

Transaction ID: SA11A1.38352

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Joe R. Klutts

Mailing Address PO Box 81218

City State Zip Code
Lafayette LA 70598

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

Name of Employer Occupation
Self Geologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.38365

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mrs. Sarah Knapp Sprole

Mailing Address 394 Mansfield Ave

City State Zip Code
Darien CT 06820

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2006

Transaction ID: SA11A1.38371

Amount of Each Receipt this Period
2000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	3250.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 194
	<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Mr. C. Rick Koerber		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 722 S 1950 E		Transaction ID: SA11A1.38395
City Springville	State UT	Zip Code 84663
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Franklin Squires Co.	Occupation Chairman	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Mr. Donald R. Kramer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3673 Old Lewis River Rd		Transaction ID: SA11A1.38415
City Woodland	State WA	Zip Code 98674
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Kramer Gehchen	Occupation Structural Engineer	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Mr. Mark Kreher		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 155 Ocean Park Blvd		Transaction ID: SA11A1.38421
City Santa Monica	State CA	Zip Code 90405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	5350.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Bernard J. Lacroute

Mailing Address 19143 NE Laughlin Rd

City State Zip Code
Yamhill OR 97148

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

Name of Employer Self Occupation Winery Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.38456

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Donna M. Lasher

Mailing Address 266 Farmington Ave

City State Zip Code
Kensington CT 06037

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

Name of Employer Okay Industries, Inc. Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 1 / 2 0 0 6

Transaction ID: SA11A1.38506

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mrs. Karen A. Latchford

Mailing Address 171 Heather Ln

City State Zip Code
Palo Alto CA 94303

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

Name of Employer Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.38511

Amount of Each Receipt this Period
250.00

Contribution

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Ryan Laws

Mailing Address 882 Lloyd Rd

City State Zip Code
Fruit Heights UT 84037

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

Name of Employer Prolmage Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2006

Transaction ID: SA11A1.38529

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mrs. Priscilla H. Llewellyn

Mailing Address 6470 Post Rd
Apt 208

City State Zip Code
Dublin OH 43016

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2006

Transaction ID: SA11A1.38617

Amount of Each Receipt this Period
50.00

Contribution

C. Full Name (Last, First, Middle Initial)
Ms. Amelia Lopez-Phelps

Mailing Address 611 S Congress Ave
Ste 340

City State Zip Code
Austin TX 78704

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

Name of Employer Lopez-Phelps and Assoc. Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2006

Transaction ID: SA11A1.38637

Amount of Each Receipt this Period
2000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	3050.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 194
	<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Mr. Stephen Charles Lubard		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 4812 Don Juan Pl		Transaction ID: SA11A1.38641	
City Woodland Hills	State CA	Zip Code 91364	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer SL Tech	Occupation Technical Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Mr. Harry Lucas, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 2303 Rio Grande St		Transaction ID: SA11A1.38643	
City Austin	State TX	Zip Code 78705	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Lucas Petroleum Group, Inc.	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Mr. D. Thomas Lyon		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 8 Seagate Rd		Transaction ID: SA11A1.38661	
City Darien	State CT	Zip Code 06820	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Och-Ziff Capital Management	Occupation Bond Trader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00		

SUBTOTAL of Receipts This Page (optional) ▶	3250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mrs. Ann L. Lyons Nugent		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address PO Box 366		Transaction ID: SA11A1.38665
City State Zip Code Moraga CA 94556	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Receipt For:	Occupation Homemaker	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

B. Full Name (Last, First, Middle Initial) Mr. Gordon Mabey		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 503 W 2600 S		Transaction ID: SA11A1.38668
City State Zip Code Bountiful UT 84010	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Receipt For:	Occupation Executive	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

C. Full Name (Last, First, Middle Initial) Mr. Walter S. Mack, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 225 Central Park W Apt 1401		Transaction ID: SA11A1.38683
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Receipt For:	Occupation Attorney	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

SUBTOTAL of Receipts This Page (optional) ▶	2900.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 / 194
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. John Maher		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 718 Lacy Ln		Transaction ID: SA11A1.38699	
City State Zip Code Las Vegas NV 89107	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer General Growth	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Mr. Peter Malone		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 55 Cambridge Pkwy		Transaction ID: SA11A1.38705	
City State Zip Code Cambridge MA 02142	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer CSP Associates, Inc.	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

C. Full Name (Last, First, Middle Initial) Mr. Anthony A. Manheim		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 204 Columbia Hts		Transaction ID: SA11A1.38712	
City State Zip Code Brooklyn NY 11201	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Self	Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	10300.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. John Manley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 1555 N Astor St Apt 47E		Transaction ID: SA11A1.38714
City State Zip Code Chicago IL 60610	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Chicago City Capital Group	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Mr. Drew Marrocco		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address 1045 31st St NW		Transaction ID: SA11A1.38731
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Sonnenschein	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Mrs. Lu Leta Maslak		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 961 High Rd		Transaction ID: SA11A1.38754
City State Zip Code Woodside CA 94062	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. John A. Mayer

Mailing Address 7 Upland Dr

City State Zip Code
Greenwich CT 06831

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

Name of Employer Occupation
JP Morgan Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 04 / 2006

Transaction ID: SA11A1.38786

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Ms. Leslie E. McClelland

Mailing Address PO Box 310

City State Zip Code
Lancaster OH 43130

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

Name of Employer Occupation
Cyril Scott Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2006

Transaction ID: SA11A1.38807

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. David J. McIntyre, Jr.

Mailing Address 15451 N 28th Ave

City State Zip Code
Phoenix AZ 85053

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

Name of Employer Occupation
Triwest Healthcare Alliance Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2006

Transaction ID: SA11A1.40876

Amount of Each Receipt this Period
-5000.00

NSF

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. M. Talmage McMinn

Mailing Address 1662 Providence Church Rd

City Pleasant Gdn State NC Zip Code 27313

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.38875

Amount of Each Receipt this Period
50.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mrs. Adrienne P. McWilliam

Mailing Address 176 Alpine Trail Dr

City Draper State UT Zip Code 84020

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2006

Transaction ID: SA11A1.38885

Amount of Each Receipt this Period
100.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. John G. Meier

Mailing Address 166 E Buffalo Rd

City Negaunee State MI Zip Code 49866

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 25 / 2006

Transaction ID: SA11A1.38899

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	650.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 194
	<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Mr. Robert G. Merrill		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 17 Cherrywood Rd		Transaction ID: SA11A1.38913
City Locust Valley	State NY	Zip Code 11560
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Mr. Michael L. Merritt		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 9440 S Harbour Pointe Dr		Transaction ID: SA11A1.38919
City Bloomington	State IN	Zip Code 47401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Ms. Vivian Gillespie Milner		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 1590 Dibble Rd SW		Transaction ID: SA11A1.38978
City Aiken	State SC	Zip Code 29801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	3600.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 194
	<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

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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Mr. Bay W. Miltenberger		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 6444 Waggoner Dr		Transaction ID: SA11A1.38981	
City Dallas	State TX	Zip Code 75230	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Fairfield Residential	Occupation Executive	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. James E. Minnick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 3421 Saint Davids Rd		Transaction ID: SA11A1.38985	
City Newtown Square	State PA	Zip Code 19073	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Lovell Minnick Partners	Occupation President	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mrs. Nancy J. Minnick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 3421 Saint Davids Rd		Transaction ID: SA11A1.38987	
City Newtown Square	State PA	Zip Code 19073	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer	Occupation Homemaker	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 194
	<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Mr. David M. Mixer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 4805 Saint James Ave		Transaction ID: SA11A1.38992	
City Vero Beach	State FL	Zip Code 32967	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Receipt For:	Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Charles B. Moncrief		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 950 Commerce St		Transaction ID: SA11A1.39008	
City Fort Worth	State TX	Zip Code 76102	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Receipt For:	Occupation President	Aggregate Year-to-Date ▼ 2000.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Fern F. Moore		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 3040 Achilles Dr		Transaction ID: SA11A1.39021	
City Reno	State NV	Zip Code 89512	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Receipt For:	Occupation Retired	Aggregate Year-to-Date ▼ 400.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	2250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Henry S. Morgan

Mailing Address 6 Louden Ln

City State Zip Code
Annapolis MD 21401

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.39045

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. James Mossman

Mailing Address 21 Hurlingham Dr

City State Zip Code
Greenwich CT 06831

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

Name of Employer Occupation
The Blackstone Group Investment Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt
MM / DD / YYYY
05 / 01 / 2006

Transaction ID: SA11A1.39071

Amount of Each Receipt this Period
2000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Kyle G. Moyer

Mailing Address 7525 E Camelback Rd Ste 104

City State Zip Code
Scottsdale AZ 85251

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

Name of Employer Occupation
Kyle Moyer and Co. Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
MM / DD / YYYY
05 / 15 / 2006

Transaction ID: SA11A1.39075

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	3250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mrs. Jean B. Murphy

Mailing Address **7273 N Central Ave**

City **Phoenix** State **AZ** Zip Code **85020**

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

Name of Employer _____ Occupation **Homemaker**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

Transaction ID: SA11A1.39091

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Peter M. Nicholas, Jr.

Mailing Address **1 Joy St**

City **Boston** State **MA** Zip Code **02108**

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

Name of Employer **Northpoint Domain** Occupation **Chairman/CEO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

Transaction ID: SA11A1.39146

Amount of Each Receipt this Period
2000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Ms. Kate S. Niehaus

Mailing Address **300 Park Ave**

City **New York** State **NY** Zip Code **10022**

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

Name of Employer **Self** Occupation **Investor**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt

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

Transaction ID: SA11A1.39158

Amount of Each Receipt this Period
2000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Robert H. Niehaus

Mailing Address 300 Park Ave

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Greenhill Capital Partners Investment Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2006

Transaction ID: SA11A1.39159

Amount of Each Receipt this Period
3000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mrs. Susan P. Nola

Mailing Address 4393 Riverboat Rd Ste 300

City State Zip Code
Salt Lake City UT 84123

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2006

Transaction ID: SA11A1.39178

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Robert A. Nova

Mailing Address 13702 179th Ave SE

City State Zip Code
Monroe WA 98272

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 25 / 2006

Transaction ID: SA11A1.39190

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional)	8250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 61 / 194
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. Kevin Nulton Mailing Address 73 Charles River Dr City State Zip Code Franklin MA 02038 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6 Transaction ID: SA11A1.39194 Amount of Each Receipt this Period 250.00 Contribution
Name of Employer Occupation Brown, Rudnick, et al. Attorney Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

B. Full Name (Last, First, Middle Initial) Mr. Jay G. Ochroch Mailing Address 50 Belmont Ave Sutton Terrace Unit 1104 City State Zip Code Bala Cynwyd PA 19004 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6 Transaction ID: SA11A1.39207 Amount of Each Receipt this Period 250.00 Contribution
Name of Employer Occupation Fox, Rothschild, et al. Attorney Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Mr. Emil E. Ogden Mailing Address PO Box 10134 City State Zip Code College Station TX 77842 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6 Transaction ID: SA11A1.39218 Amount of Each Receipt this Period 2500.00 Contribution
Name of Employer Occupation Self Investor Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2500.00		

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Hon. Stephen E. Ogden

Mailing Address **PO Box 12068
Capital Station**

City **Austin** State **TX** Zip Code **78711**

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

Name of Employer **State of Texas** Occupation **Senator**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4000.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

Transaction ID: SA11A1.39220

Amount of Each Receipt this Period
4000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Nelson M. Olf

Mailing Address **2736 Magnolia Way**

City **Forest Grove** State **OR** Zip Code **97116**

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

Name of Employer Occupation **Retired**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	3	/	2	0	0	6

Transaction ID: SA11A1.39226

Amount of Each Receipt this Period
250.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Dave E. Pagan

Mailing Address **1432 Aspen Ave**

City **Mays Landing** State **NJ** Zip Code **08330**

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

Name of Employer **In Route Computer Solutions** Occupation **Systems Analyst**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

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

Transaction ID: SA11A1.39262

Amount of Each Receipt this Period
100.00

Contribution

SUBTOTAL of Receipts This Page (optional)	4350.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. James J. Pallotta		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 61 Bristol Rd		Transaction ID: SA11A1.39272	
City State Zip Code Wellesley MA 02481	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Tudor Investment Corp.	Occupation Vice Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

B. Full Name (Last, First, Middle Initial) Mrs. Kimberly Pallotta		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 61 Bristol Rd		Transaction ID: SA11A1.39274	
City State Zip Code Wellesley MA 02481	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

C. Full Name (Last, First, Middle Initial) Mrs. Stephanie Pantelidis		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 116 E 73rd St		Transaction ID: SA11A1.39282	
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) ▶	12000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 194
	<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Mr. Anastasios Parafestas		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 1 Joy St		Transaction ID: SA11A1.39286	
City State Zip Code Boston MA 02108	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer The Bollard Group, LLC	Occupation Managing Member		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Mr. Robert B. Payne		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 4316 Arcady Ave		Transaction ID: SA11A1.39317	
City State Zip Code Dallas TX 75205	Amount of Each Receipt this Period 4000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Winstead, Sechrest, and Minick	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00		

Full Name (Last, First, Middle Initial) C. Mrs. John Pearce		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 1813 Tahiti Dr		Transaction ID: SA11A1.39325	
City State Zip Code Costa Mesa CA 92626	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	5350.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. A. William Pegg		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 48751 San Isidro St		Transaction ID: SA11A1.39335	
City State Zip Code La Quinta CA 92253		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Self Occupation Investor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Mrs. Kathryn T. Penney		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 310 Fernando St Newport Bay Towers Apt. 402		Transaction ID: SA11A1.39342	
City State Zip Code Newport Beach CA 92661		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

C. Full Name (Last, First, Middle Initial) Ms. Elisa Clements Peterson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 8 E Broadway Ste 730		Transaction ID: SA11A1.39376	
City State Zip Code Salt Lake City UT 84111		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Parents For Choice In Educ. Occupation Executive Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1650.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Hon. Thomas R. Phillips

Mailing Address 1403 Main St

City State Zip Code
Bastrop TX 78602

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

Name of Employer Occupation
Baker Botts Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2006

Transaction ID: SA11A1.39411

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Pitts and Associates, LLC

Mailing Address 10171 East Happy Hollow Drive

City State Zip Code
Scottsdale AZ 85262

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2006

Transaction ID: SA11A1.40892

Amount of Each Receipt this Period
2000.00

Partnership Contribution - Memo Attached

C. Full Name (Last, First, Middle Initial)
Mr. J. Douglas Pitts

Mailing Address 10171 E Happy Hollow Dr

City State Zip Code
Scottsdale AZ 85262

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

Name of Employer Occupation
Pitts and Associates, LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2006

Transaction ID: SA11A1.40892.0

Amount of Each Receipt this Period
2000.00

Contribution

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Brad G. Plowman

Mailing Address 703 E 17005
100

City State Zip Code
Salt Lake City UT 84105

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

Name of Employer Occupation
Fuel Mktg. Advertising

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.39446

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Roger L. Pock

Mailing Address 201 N Meridian Ave

City State Zip Code
Oklahoma City OK 73107

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

Name of Employer Occupation
Cimarro Steak House Restaurant Owner

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 1 / 2 0 0 6

Transaction ID: SA11A1.39449

Amount of Each Receipt this Period
250.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Roger L. Pock

Mailing Address 201 N Meridian Ave

City State Zip Code
Oklahoma City OK 73107

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

Name of Employer Occupation
Cimarro Steak House Restaurant Owner

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.39450

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional)	5500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Ms. Wendy Poole

Mailing Address 40428 Spectacular Bid Pl

City State Zip Code
Leesburg VA 20176

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

Name of Employer Self Occupation Assistant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2006

Transaction ID: SA11A1.39463

Amount of Each Receipt this Period
50.00

Contribution

B. Full Name (Last, First, Middle Initial)
Dr. Lawrence E. Posner

Mailing Address 633 Round Hill Rd

City State Zip Code
Greenwich CT 06831

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

Name of Employer Bayer Corp. Occupation Physician/Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.39477

Amount of Each Receipt this Period
100.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Jeffrey D. Pribor

Mailing Address 55 Green Village Rd

City State Zip Code
Madison NJ 07940

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

Name of Employer General Maritime Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2006

Transaction ID: SA11A1.39504

Amount of Each Receipt this Period
2000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	2150.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. Richard L. Primeau		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 1011 W Wheatgrass Pl		Transaction ID: SA11A1.39508	
City State Zip Code Tucson AZ 85737	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer VHA	Occupation Audiologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

B. Full Name (Last, First, Middle Initial) Mr. William G. Prince		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 2312 Walter Dr		Transaction ID: SA11A1.39512	
City State Zip Code Ann Arbor MI 48103	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Mr. Albert J. Provenzano		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 1815 Stratford Ln		Transaction ID: SA11A1.39520	
City State Zip Code Rockford IL 61107	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Lawrence P. Puckett, Jr.

Mailing Address 19955 NE 38th Ct
Apt 1004

City State Zip Code
Aventura FL 33180

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 25 / 2006

Transaction ID: SA11A1.39526

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. William J. Rafferty

Mailing Address 5123 Holly Terrace Dr

City State Zip Code
Houston TX 77056

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2006

Transaction ID: SA11A1.39548

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. William E. Reitz

Mailing Address 425 McCall Ave

City State Zip Code
West Islip NY 11795

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

Name of Employer Occupation
T-Mobile Switch Technician II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 23 / 2006

Transaction ID: SA11A1.39604

Amount of Each Receipt this Period
100.00

Contribution

SUBTOTAL of Receipts This Page (optional)	1100.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. John D. Remick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 3232 Fox Hollow Ct SW		Transaction ID: SA11A1.39608
City State Zip Code Rochester MN 55902	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Rochester Athletic Club	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Mr. Keith Renken		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 225 Sharon Rd		Transaction ID: SA11A1.39613
City State Zip Code Arcadia CA 91007	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer The Renken Co.	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Mr. G. Herbert Repass		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1810 Cutlass Cove Dr		Transaction ID: SA11A1.39616
City State Zip Code Vero Beach FL 32963	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional) ▶	1700.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Charles K. Ribakoff

Mailing Address **PO Box 912**

City **Worcester** State **MA** Zip Code **01613**

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

Name of Employer **Automotive Mgmt.** Occupation **Executive**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

Transaction ID: SA11A1.39628

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Rod Rivers

Mailing Address **497 N 800 E**

City **Lindon** State **UT** Zip Code **84042**

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

Name of Employer **Jefferies and Jeffers** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

Transaction ID: SA11A1.39645

Amount of Each Receipt this Period
2000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Forrest Roan

Mailing Address **PO Box 896**

City **Austin** State **TX** Zip Code **78767**

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

Name of Employer **Winstead, Sechrest & Minick, PC** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

Transaction ID: SA11A1.39647

Amount of Each Receipt this Period
1000.00

Contribution

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. Michael J. Robbins		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 801 15th St S Apt 912		Transaction ID: SA11A1.39651	
City Arlington	State VA	Zip Code 22202	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Bingham McCutchen, LLP	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) Mr. William H. Roberts		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 29347 Briar Ln		Transaction ID: SA11A1.39658	
City Westlake	State OH	Zip Code 44145	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) Dr. Ausey H. Robnett		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 2411 E Deerwood Ct		Transaction ID: SA11A1.39667	
City Spokane	State WA	Zip Code 99223	Amount of Each Receipt this Period 120.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Self		Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

SUBTOTAL of Receipts This Page (optional) ▶	870.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Dr. Ausey H. Robnett

Mailing Address 2411 E Deerwood Ct

City State Zip Code
Spokane WA 99223

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

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
MM / DD / YYYY
05 / 04 / 2006

Transaction ID: SA11A1.39668

Amount of Each Receipt this Period
150.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Richard C. Rochon

Mailing Address 450 E Coconut Palm Rd

City State Zip Code
Boca Raton FL 33432

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

Name of Employer Royal Palm Capital Partners Occupation Investment Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2006

Transaction ID: SA11A1.39670

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. E. King Rogers

Mailing Address 2801 Mikes Rd

City State Zip Code
Orr MN 55771

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

Name of Employer Dayton Hudson Corporation Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.39685

Amount of Each Receipt this Period
200.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	5350.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 194
	<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Mr. Edwin G. Roos		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 380 Madison Ave		Transaction ID: SA11A1.39700
City State Zip Code New York NY 10017	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer GVA Williams Real Estate	Occupation Real Estate Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Mr. Ian Kurt Rosen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 440 Mid Oak Dr		Transaction ID: SA11A1.39704
City State Zip Code North Muskegon MI 49445	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer American Grease Stick Co.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Kacy Rozelle		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 737 Chapala Dr		Transaction ID: SA11A1.39727
City State Zip Code Pacific Palisades CA 90272	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer St. Cloud Capital, LLC	Occupation Private Equity	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Michael C. Ruetters

Mailing Address 453 Bedford Rd

City State Zip Code
Carlisle MA 01741

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.39734

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Ms. Barbara T. Sanford

Mailing Address 1275 Denmark Rd

City State Zip Code
Plainfield NJ 07062

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

Name of Employer Occupation
Self Civic Volunteer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2006

Transaction ID: SA11A1.39793

Amount of Each Receipt this Period
200.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. A. I. Schepps

Mailing Address 4608 Valerie St

City State Zip Code
Bellaire TX 77401

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.39827

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional)	1450.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 77 / 194
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
COL James J. Schnitzer, Ret.

Mailing Address 5410 E Hawthorne St

City State Zip Code
Tucson AZ 85711

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2006

Transaction ID: SA11A1.39841

Amount of Each Receipt this Period
50.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. John C. Schweitzer

Mailing Address 100 Congress Ave Ste 1600

City State Zip Code
Austin TX 78701

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

Name of Employer Occupation
Self Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2006

Transaction ID: SA11A1.39884

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Dr. Edward L. Seljeskog

Mailing Address 2151 Skyline Ranch Rd

City State Zip Code
Rapid City SD 57701

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

Name of Employer Occupation
Self Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2006

Transaction ID: SA11A1.39904

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	1550.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 78 / 194
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. Julian M. Setian		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 174 Washington St PHD		Transaction ID: SA11A1.39910
City State Zip Code Jersey City NJ 07302	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Sosi International	Occupation COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B. Full Name (Last, First, Middle Initial) Mr. Theodore W. Seweloh		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 38 Essex Rd		Transaction ID: SA11A1.39912
City State Zip Code Winnetka IL 60093	Amount of Each Receipt this Period 115.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

C. Full Name (Last, First, Middle Initial) Mr. Donald M. Shaw		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 1525 Beach Walker Rd		Transaction ID: SA11A1.39920
City State Zip Code Fernandina FL 32034	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	5615.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Ms. Gabrielle Sheshunoff

Mailing Address 2801 Via Fortuna Ste 600

City Austin State TX Zip Code 78746

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

Name of Employer SMS, LP Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2006

Transaction ID: SA11A1.39941

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Rabneet Singh

Mailing Address 616 C St NW Apt 721

City Washington State DC Zip Code 20004

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

Name of Employer Electionwall Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2006

Transaction ID: SA11A1.39979

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Britton Smith

Mailing Address 300 W Arrington St Ste 250

City Farmington State NM Zip Code 87401

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

Name of Employer Smith, Oldfield & Associates Occupation CPA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.40006

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	6250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Ms. Elizabeth P. Smith

Mailing Address 37 Holly Ln

City State Zip Code
Darien CT 06820

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 30 / 2006

Transaction ID: SA11A1.40014

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Ms. Luann Smith

Mailing Address 1055 Washington Blvd

City State Zip Code
Stamford CT 06901

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

Name of Employer Occupation
Statoil North America President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 30 / 2006

Transaction ID: SA11A1.40027

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Richard S. Smudin

Mailing Address 12 Sundance Way

City State Zip Code
Natick MA 01760

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

Name of Employer Occupation
Sun Microsystems Sales Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 11 / 2006

Transaction ID: SA11A1.40053

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Gerald R. Sobeck

Mailing Address 1055 Ridgemont Dr

City State Zip Code
Milpitas CA 95035

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

Name of Employer Self Occupation Technician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2006

Transaction ID: SA11A1.40065

Amount of Each Receipt this Period
100.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Rogelio Sosa

Mailing Address 30 Margranita Cres

City State Zip Code
Austin TX 78703

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

Name of Employer Netspend Corp. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2006

Transaction ID: SA11A1.40076

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Ms. Corinne Spence

Mailing Address 2921 Laurel Dr

City State Zip Code
Sacramento CA 95864

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

Name of Employer Spence Enterprises Occupation Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2006

Transaction ID: SA11A1.40092

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	6100.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 194
	<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Mr. Roger T. Staubach		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 15601 Dallas Pkwy Ste 400		Transaction ID: SA11A1.40125	
City State Zip Code Dallas TX 75240	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer The Staubach Co.	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) B. Mr. Eduard Still		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 6 Hilarita Cir		Transaction ID: SA11A1.40156	
City State Zip Code Belvedere Tiburon CA 94920	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Mr. B. J. Stone, III		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 10207 E Hunter Valley Rd		Transaction ID: SA11A1.40159	
City State Zip Code Vienna VA 22181	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Stonefish, Inc.		Occupation Restaurateur	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	7150.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Ms. Donna A. Stone

Mailing Address 23 Bigelow Rd

City State Zip Code
N Brookfield MA 01535

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

Name of Employer Occupation
Cambridge Health Alliance Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2006

Transaction ID: SA11A1.40163

Amount of Each Receipt this Period
300.00

Contribution

B. Full Name (Last, First, Middle Initial)
Ms. Lisa Stout

Mailing Address 4215 McEwen Rd

City State Zip Code
Dallas TX 75244

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

Name of Employer Occupation
Self Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2006

Transaction ID: SA11A1.40170

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Renard C. Strautman

Mailing Address 70 E 10th St Apt 10J

City State Zip Code
New York NY 10003

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

Name of Employer Occupation
Bank of America Securities Investment Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 22 / 2006

Transaction ID: SA11A1.40178

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	5800.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Richard H. Suddath

Mailing Address 815 S Main St

City State Zip Code
Jacksonville FL 32207

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2006

Transaction ID: SA11A1.40207

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Patrick H. Sullivan, III

Mailing Address 250 Meadow Rd

City State Zip Code
Santa Cruz CA 95060

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

Name of Employer Occupation
Self Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2006

Transaction ID: SA11A1.40215

Amount of Each Receipt this Period
250.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Richard Tanner

Mailing Address 2875 Newmans Ln

City State Zip Code
Holladay UT 84121

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

Name of Employer Occupation
Extra Space Senior VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2006

Transaction ID: SA11A1.40248

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Hayward Thomas

Mailing Address 1320 Granvia Altamira

City Palos Verdes Estat State CA Zip Code 90274

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.40287

Amount of Each Receipt this Period
100.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Lewis H. Thompson

Mailing Address 14652 Mustang Path

City Glenwood State MD Zip Code 21738

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

Name of Employer Beth Analytics Occupation Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2006

Transaction ID: SA11A1.40878

Amount of Each Receipt this Period
100.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. John H. Timoney

Mailing Address 117 Leabrook Ln

City Princeton State NJ Zip Code 08540

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2006

Transaction ID: SA11A1.40320

Amount of Each Receipt this Period
100.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Myron Tribus

Mailing Address 4318 Whiteleaf Ct

City State Zip Code
Pensacola FL 32504

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 3 / 2 0 0 6

Transaction ID: SA11A1.40357

Amount of Each Receipt this Period
75.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Mark Turnbough

Mailing Address 5815 87th St

City State Zip Code
Lubbock TX 79424

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

Name of Employer Occupation
Self Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.40367

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Evan Twede

Mailing Address 10942 Lostwood Dr

City State Zip Code
Sandy UT 84092

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

Name of Employer Occupation
Twede Advertising CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.40373

Amount of Each Receipt this Period
2000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	3075.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 / 194
	<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)
STRAIGHT TALK AMERICA

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

Mailing Address 4412 Lakeside Dr

City State Zip Code
Dallas TX 75205

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

Name of Employer First Broadcasting Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2006

Transaction ID: SA11A1.40385

Amount of Each Receipt this Period
2000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Terdema Ussery

Mailing Address 2909 Taylor St

City State Zip Code
Dallas TX 75226

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

Name of Employer The Dallas Mavericks Occupation President/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2006

Transaction ID: SA11A1.40397

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mrs. Jean A. Van Landingham

Mailing Address 4236 Westfield Dr

City State Zip Code
Rockford IL 61101

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

Name of Employer Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.40414

Amount of Each Receipt this Period
200.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	3200.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. Charles A. Van Zoeren		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 3600 Alvan Rd		Transaction ID: SA11A1.40422	
City Kalamazoo	State MI	Zip Code 49001	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Alvan Motor Freight, Inc.	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

B. Full Name (Last, First, Middle Initial) Ms. Phyllis W. Ventresca		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 5 Mayacoo Lakes Ct		Transaction ID: SA11A1.40447	
City Skillman	State NJ	Zip Code 08558	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer City Country Interiors	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Mr. Anthoni Visconsi, II		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 3755 Som Center Rd		Transaction ID: SA11A1.40461	
City Moreland Hills	State OH	Zip Code 44022	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Visconsi Cos., Ltd.	Occupation Real Estate Developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	5750.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. William K. Vogel

Mailing Address **300 Paseo Tesoro**

City **Walnut** State **CA** Zip Code **91789**

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

Name of Employer _____ Occupation **Retired**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	4	/	2	0	0	6

Transaction ID: SA11A1.40466

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Steven J. Wark

Mailing Address **7493 W Lake Mead Blvd # 100**

City **Las Vegas** State **NV** Zip Code **89128**

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

Name of Employer **Image and Design** Occupation **Business Executive**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

Transaction ID: SA11A1.40536

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Charles Warren, Jr.

Mailing Address **634 Duck Creek Cir**

City **Salt Lake City** State **UT** Zip Code **84107**

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

Name of Employer **Capitol Strategies** Occupation **CEO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	6

Transaction ID: SA11A1.40543

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	6250.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mrs. Kimberly Warren

Mailing Address 634 Duck Creek Cir

City State Zip Code
Salt Lake City UT 84107

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

Name of Employer Bonneville Occupation Public Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.40549

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Ralph Wayne

Mailing Address 3902 Pebble Path

City State Zip Code
Austin TX 78731

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

Name of Employer Texas Civil Justice League Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.40557

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Dr. Steven C. Webb

Mailing Address 1900 8th St

City State Zip Code
Vero Beach FL 32962

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.40563

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **6250.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Harold N. Wellman

Mailing Address 382 Padgetts Hill Rd

City State Zip Code
Natural Brg VA 24578

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.40593

Amount of Each Receipt this Period
300.00

Contribution

B. Full Name (Last, First, Middle Initial)
Ms. Helen H. West

Mailing Address 114 Yankee Point Dr

City State Zip Code
Carmel CA 93923

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

Name of Employer Occupation
Self Rancher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1090.00

Date of Receipt
MM / DD / YYYY
05 / 03 / 2006

Transaction ID: SA11A1.40605

Amount of Each Receipt this Period
90.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Steven M. Wheeler

Mailing Address 400 North 5th Street
MS 9040

City State Zip Code
Phoenix AZ 85004

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

Name of Employer Occupation
Arizona Public Service Company Executive VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2006

Transaction ID: SA11A1.40886

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	1390.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Matthew D. Wiggins

Mailing Address PO Box 139

City State Zip Code
Kemah TX 77565

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

Name of Employer Self Occupation Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2006

Transaction ID: SA11A1.40660

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mrs. Lucetta R. Williamson

Mailing Address PO Box 1753

City State Zip Code
North Eastham MA 02651

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2006

Transaction ID: SA11A1.40699

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Monroe J. Wingate

Mailing Address 18360 Carriger Rd

City State Zip Code
Sonoma CA 95476

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2006

Transaction ID: SA11A1.40719

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mrs. Margaret H. Wise

Mailing Address PO Box 239

City State Zip Code
Orlean VA 20128

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2006

Transaction ID: SA11A1.40730

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Michael T. Woelfel

Mailing Address 360 Valley Ave
Apt 72

City State Zip Code
Hammonton NJ 08037

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

Name of Employer Occupation
United Water Sales Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2006

Transaction ID: SA11A1.40740

Amount of Each Receipt this Period
150.00

Contribution

C. Full Name (Last, First, Middle Initial)
Ms. Mary Anne Wolfson

Mailing Address 12626 Andalusia Dr

City State Zip Code
Santa Rosa Valley CA 93012

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

Name of Employer Occupation
Student

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2006

Transaction ID: SA11A1.40759

Amount of Each Receipt this Period
300.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	1450.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 / 194
	<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Capt. Leland E. Wood, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	
Mailing Address 2333 S Rolfe St		Transaction ID: SA11A1.40764	
City Arlington	State VA	Zip Code 22202	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Receipt For:	Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Albert A. Woodward		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 3100 Wilds Ridge Ct NW		Transaction ID: SA11A1.40772	
City Prior Lake	State MN	Zip Code 55372	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Receipt For:	Occupation Attorney	Aggregate Year-to-Date ▼ 250.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. Edward J. Wren, Sr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	
Mailing Address 3030 W 3rd St		Transaction ID: SA11A1.40778	
City Phoenix	State AZ	Zip Code 85012	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Receipt For:	Occupation Consultant	Aggregate Year-to-Date ▼ 250.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 / 194
	<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Jeffrey Wright

Mailing Address 159 W Broadway
Ste 200

City State Zip Code
Salt Lake City UT 84101

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

Name of Employer Occupation
Wright Ventures Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2006

Transaction ID: SA11A1.40783

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Craig R. Wylie

Mailing Address 13720 Lincoln St NE

City State Zip Code
Ham Lake MN 55304

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

Name of Employer Occupation
Wolf Creek Elk Ranch, Inc. Rancher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2006

Transaction ID: SA11A1.40798

Amount of Each Receipt this Period
750.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. George U. Wyper

Mailing Address 350 Park Ave

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Wyper Capital Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2006

Transaction ID: SA11A1.40800

Amount of Each Receipt this Period
2000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	3250.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 96 / 194
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mr. Spyro Zarifopoulos		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 2150 Ironwood Rd		Transaction ID: SA11A1.40826
City State Zip Code Syosset NY 11791	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Universal Services Group	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

B. Full Name (Last, First, Middle Initial) Mr. Jay H. Zises		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 965 5th Ave		Transaction ID: SA11A1.40851
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer A Cap, Inc.	Occupation Financial Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	352725.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 / 194
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. ACE CASH EXPRESS INC PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1231 Greenway Dr Ste 600		Transaction ID: SA11C.40853	
City Irving State TX Zip Code 75038	Amount of Each Receipt this Period 3000.00		
FEC ID number of contributing federal political committee. C C00392290		Contribution	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 3000.00		

Full Name (Last, First, Middle Initial) B. CITIZEN BEZTAK		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 31731 NORTHWESTERN HWY SUITE 250W		Transaction ID: SA11C.40855	
City FARMINGTON HILLS State MI Zip Code 48334	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00349761		Contribution	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Contran Corporation PAC (Conpac)		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 5430 Lbj Freeway 3 Lincoln Ctr Ste 1700		Transaction ID: SA11C.40857	
City Dallas State TX Zip Code 75240	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00148783		Contribution	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 / 194
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Dallas Entrepreneurial PAC (Dalenpac)

Mailing Address 1701 N Hampton Rd

City State Zip Code
Desoto TX 75115

FEC ID number of contributing federal political committee. **C** C00283523

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 30 / 2006

Transaction ID: SA11C.40859

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Federation of American Hospitals PAC (Fedpac); (FKA American Health Systems PAC)

Mailing Address 801 Pennsylvania Ave NW
Ste 245

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00002261

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 30 / 2006

Transaction ID: SA11C.40861

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Friends of Jason Allen

Mailing Address PO Box 205

City State Zip Code
Traverse City MI 49685

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2006

Transaction ID: SA11C.40882

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	11000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 99 / 194
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Friends of Susan Combs Mailing Address PO Box 160956 City Austin State TX Zip Code 78716 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6 Transaction ID: SA11C.40863 Amount of Each Receipt this Period 1000.00 Contribution
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Lifepoint Hospitals Inc. Good Government Fund Mailing Address 103 Powell Ct Ste 200 City Brentwood State TN Zip Code 37027 FEC ID number of contributing federal political committee. C C00347955		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6 Transaction ID: SA11C.40865 Amount of Each Receipt this Period 5000.00 Contribution
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00	

C. Full Name (Last, First, Middle Initial) Locke, Liddell & Sapp, LLP PAC Mailing Address 100 Congress Ave Ste 300 City Austin State TX Zip Code 78701 FEC ID number of contributing federal political committee. C C00117861		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6 Transaction ID: SA11C.40867 Amount of Each Receipt this Period 1000.00 Contribution
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	7000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 / 194
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. PRO-LIFE CAMPAIGN COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2006	
Mailing Address PO Box 650248		Transaction ID: SA11C.40900	
City State Zip Code Sterling VA 20165	Amount of Each Receipt this Period 4432.13		
FEC ID number of contributing federal political committee. C C00355958	In-kind - Use of list of voter names		
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4432.13		

Full Name (Last, First, Middle Initial) B. REPUBLICAN ISSUES COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2006	
Mailing Address PO Box 650700		Transaction ID: SA11C.40897	
City State Zip Code Sterling VA 20165	Amount of Each Receipt this Period 2155.44		
FEC ID number of contributing federal political committee. C C00382671	In-kind - Use of list of voter names		
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2155.44		

Full Name (Last, First, Middle Initial) C. Southwest Airlines Co. Freedom Fund		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2006	
Mailing Address PO Box 36611 HDQ		Transaction ID: SA11C.40869	
City State Zip Code Dallas TX 75235	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00341602	Contribution		
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	11587.57
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 101 / 194
	(check only one)	
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Steve Ogden Campaign

Mailing Address PO Box 3126

City State Zip Code
Bryan TX 77805

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11C.40871

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	39587.57

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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B.40999 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 53428.43
City Newark State NJ Zip Code 07101-1270	Purpose of Disbursement See Attached Memos 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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) B. Hyatt Cincinnati		Transaction ID: SB21B.40999.0 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 151 West 5th Street		Amount of Each Disbursement this Period 336.51
City Cincinnati State OH Zip Code 45202	Purpose of Disbursement Travel-Lodging Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 002 [MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Amazon.com		Transaction ID: SB21B.40999.1 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address PO Box 81226		Amount of Each Disbursement this Period 4343.88
City Seattle State WA Zip Code 98108	Purpose of Disbursement Book Purchase 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) ▼	Category/Type 001 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	53428.43
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. America West Airlines		Transaction ID: SB21B.40999.2	
Mailing Address PO Box 20050		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City Phoenix	State AZ	Zip Code 86036	Amount of Each Disbursement this Period 2539.50
Purpose of Disbursement Travel-Airfare	Candidate Name		[MEMO ITEM]
	002 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:			

Full Name (Last, First, Middle Initial) B. American Airlines		Transaction ID: SB21B.40999.3	
Mailing Address PO Box 619133		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City Dallas	State TX	Zip Code 75261	Amount of Each Disbursement this Period 2951.50
Purpose of Disbursement Travel-Airfare	Candidate Name		[MEMO ITEM]
	002 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:			

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B.40999.4	
Mailing Address PO Box 1270		Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
City Newark	State NJ	Zip Code 07101-1270	Amount of Each Disbursement this Period 70.00
Purpose of Disbursement Merchant Fee	Candidate Name		[MEMO ITEM]
	001 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)	0.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Broadmoor Hotel		Transaction ID: SB21B.40999.6 Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
Mailing Address 1 Lake Avenue		Amount of Each Disbursement this Period 590.76
City Colorado Springs State CO Zip Code 80906	Purpose of Disbursement Travel-Lodging Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type: 002		

Full Name (Last, First, Middle Initial) B. Budget Conferencing Cambridge		Transaction ID: SB21B.40999.7 Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
Mailing Address 60 State Street Suite 700		Amount of Each Disbursement this Period 205.55
City Cambridge State MA Zip Code 02109	Purpose of Disbursement Teleconferencing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type: 001		

Full Name (Last, First, Middle Initial) C. Carey International		Transaction ID: SB21B.40999.8 Date of Disbursement MM / DD / YYYY 05 / 04 / 2006
Mailing Address 520 North Capitol Street		Amount of Each Disbursement this Period 8985.84
City Washington State DC Zip Code 20001	Purpose of Disbursement Travel-Car Service Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type: 002		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Comfort Inn Dyersville		Transaction ID: SB21B.40999.9 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 527 16th Avenue		Amount of Each Disbursement this Period 238.39
City Dyersville State IA Zip Code 52040	[MEMO ITEM]	
Purpose of Disbursement Travel-Lodging Candidate Name		002 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) ▼

Full Name (Last, First, Middle Initial) B. Continental Airlines		Transaction ID: SB21B.40999.10 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1500 Smith St 21st Floor		Amount of Each Disbursement this Period 1737.20
City Houston State TX Zip Code 77002	[MEMO ITEM]	
Purpose of Disbursement Travel-Airfare Candidate Name		002 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) ▼

Full Name (Last, First, Middle Initial) C. Marriott Courtyard Little Rock		Transaction ID: SB21B.40999.11 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 10900 Financial Center Parkway		Amount of Each Disbursement this Period 340.18
City Little Rock State AR Zip Code 72211	[MEMO ITEM]	
Purpose of Disbursement Travel-Lodging Candidate Name		002 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) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Delta Airlines		Transaction ID: SB21B.40999.12 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address PO Box 20980		Amount of Each Disbursement this Period 1560.20
City Atlanta State GA Zip Code 30320	[MEMO ITEM]	
Purpose of Disbursement Travel-Airfare Candidate Name		002 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) ▼

Full Name (Last, First, Middle Initial) B. Embassy Suites Rogers		Transaction ID: SB21B.40999.13 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3303 Pinnacle Hills Parkway		Amount of Each Disbursement this Period 386.30
City Rogers State AR Zip Code 72758	[MEMO ITEM]	
Purpose of Disbursement Travel-Lodging Candidate Name		002 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) ▼

Full Name (Last, First, Middle Initial) C. Great Performances Catering		Transaction ID: SB21B.40999.15 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 287 Spring Street		Amount of Each Disbursement this Period 8500.00
City New York State NY Zip Code 10013	[MEMO ITEM]	
Purpose of Disbursement Event Expense-Catering Candidate Name		003 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) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<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)
STRAIGHT TALK AMERICA

<p>A. Hancock Inn</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 33 Main Street</p> <p>City Hancock State NH Zip Code 03449</p> <p>Purpose of Disbursement Travel-Lodging</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>Transaction ID: SB21B.40999.16</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="622.38"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="002"/></p>

<p>B. Mark Lightcap</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 17292 Clay Hill Road</p> <p>City Dubuque State IA Zip Code 52002</p> <p>Purpose of Disbursement Travel-Car 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>Transaction ID: SB21B.40999.19</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="225.00"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="002"/></p>

<p>C. Marriott Harbor Beach</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 3030 Holiday Drive</p> <p>City Fort Lauderdale State FL Zip Code 33316</p> <p>Purpose of Disbursement Travel-Lodging</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>Transaction ID: SB21B.40999.20</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="872.64"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="002"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Northwest Airlines		Transaction ID: SB21B.40999.22 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 5101 Northwest Drive		Amount of Each Disbursement this Period 1244.20
City St Paul State MN Zip Code 51111	[MEMO ITEM]	
Purpose of Disbursement Travel-Airfare Candidate Name		002 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) ▼	

Full Name (Last, First, Middle Initial) B. Prompt Limousine		Transaction ID: SB21B.40999.23 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address PO Box 411		Amount of Each Disbursement this Period 950.30
City Piscataway State NJ Zip Code 08855	[MEMO ITEM]	
Purpose of Disbursement Travel-Car Service Candidate Name		002 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) ▼	

Full Name (Last, First, Middle Initial) C. Renaissance Hotels Boca Raton		Transaction ID: SB21B.40999.25 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 2000 NW 19th Street		Amount of Each Disbursement this Period 808.51
City Boca Raton State FL Zip Code 33431	[MEMO ITEM]	
Purpose of Disbursement Travel-Lodging Candidate Name		002 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) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Residence Inn 546		Transaction ID: SB21B.40999.26 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 3701 Harden Blvd.		Amount of Each Disbursement this Period 228.48
City Lakeland State FL Zip Code 33803	[MEMO ITEM]	
Purpose of Disbursement Travel-Lodging Candidate Name		002 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) ▼	

Full Name (Last, First, Middle Initial) B. Staples Corporate Chambersburg		Transaction ID: SB21B.40999.28 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1025 Wayne Avenue		Amount of Each Disbursement this Period 1123.08
City Chambersburg State PA Zip Code 17201	[MEMO ITEM]	
Purpose of Disbursement Office Supplies Candidate Name		001 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) ▼	

Full Name (Last, First, Middle Initial) C. Ritz Calton Phoenix		Transaction ID: SB21B.40999.29 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 2401 E. Camelback Road		Amount of Each Disbursement this Period 941.67
City Phoenix State AZ Zip Code 85016	[MEMO ITEM]	
Purpose of Disbursement Travel-Lodging Candidate Name		002 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) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Regency Hotel		Transaction ID: SB21B.40999.30 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 540 Park Avenue		Amount of Each Disbursement this Period 1500.00
City New York State NY Zip Code 10021	[MEMO ITEM]	
Purpose of Disbursement Event Expense - Catering		Category/Type 003
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) ▼	

Full Name (Last, First, Middle Initial) B. McNair Travel Agency		Transaction ID: SB21B.40999.31 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1703 Duke Street		Amount of Each Disbursement this Period 980.00
City Alexandria State VA Zip Code 22314	[MEMO ITEM]	
Purpose of Disbursement Travel - Agency Fees		Category/Type 002
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) ▼	

Full Name (Last, First, Middle Initial) C. United Airlines		Transaction ID: SB21B.40999.32 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 9864 Main Street		Amount of Each Disbursement this Period 993.90
City Fairfax State VA Zip Code 22031	[MEMO ITEM]	
Purpose of Disbursement Travel - Airfare		Category/Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER: (check only one)

<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. US Airways		Transaction ID: SB21B.40999.33 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address PO Box 2501		Amount of Each Disbursement this Period 690.37
City Washington State DC Zip Code 27102	[MEMO ITEM]	
Purpose of Disbursement Travel-Airfare Candidate Name		002 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) ▼	

Full Name (Last, First, Middle Initial) B. US Postal Service		Transaction ID: SB21B.40999.34 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1100 Wythe Street		Amount of Each Disbursement this Period 1960.25
City Alexandria State VA Zip Code 22314	[MEMO ITEM]	
Purpose of Disbursement Postage Candidate Name		001 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) ▼	

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B.41247 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 127.66
City Newark State NJ Zip Code 07101-1270	[MEMO ITEM]	
Purpose of Disbursement In Kind Contribution-Travel Lodging Candidate Name GUTKNECHT FOR U.S. CONGRESS COMMITTEE		011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 01	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**SCHEDULE B (FEC Form 3X)
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"/> 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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B.41248 Date of Disbursement 05 / 04 / 2006	
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 69.81	
City Newark	State NJ	Zip Code 07101-1270	[MEMO ITEM]
Purpose of Disbursement In Kind Contribution-Travel Lodging		011 Category/Type	
Candidate Name STEVE CHABOT FOR CONGRESS			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OH District: 01			

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B.41249 Date of Disbursement 05 / 04 / 2006	
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 38.70	
City Newark	State NJ	Zip Code 07101-1270	[MEMO ITEM]
Purpose of Disbursement In Kind Contribution-Travel Lodging		011 Category/Type	
Candidate Name BASS VICTORY COMMITTEE			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NH District: 02			

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B.41262 Date of Disbursement 05 / 04 / 2006	
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 112.99	
City Newark	State NJ	Zip Code 07101-1270	[MEMO ITEM]
Purpose of Disbursement In Kind Contribution-Travel Lodging		011 Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

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

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

FOR LINE NUMBER: (check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B.41272 Date of Disbursement																					
Mailing Address PO Box 1270		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		0	4		2	0	0	6														
City Newark	State NJ	Zip Code 07101-1270	Amount of Each Disbursement this Period																				
Purpose of Disbursement In Kind Contribution-Travel Lodging			38.70																				
Candidate Name			[MEMO ITEM]																				
Category/Type 011																							
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:																							

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B.41273 Date of Disbursement																					
Mailing Address PO Box 1270		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		0	4		2	0	0	6														
City Newark	State NJ	Zip Code 07101-1270	Amount of Each Disbursement this Period																				
Purpose of Disbursement In Kind Contribution-Travel Lodging			38.70																				
Candidate Name			[MEMO ITEM]																				
Category/Type 011																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:	2006																						

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B.41274 Date of Disbursement																					
Mailing Address PO Box 1270		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		0	4		2	0	0	6														
City Newark	State NJ	Zip Code 07101-1270	Amount of Each Disbursement this Period																				
Purpose of Disbursement In Kind Contrib-Lodging Seeking Refund			124.87																				
Candidate Name			[MEMO ITEM]																				
Category/Type 011																							
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)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B.41000 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 3235.11
City Newark State NJ Zip Code 07101-1270	Purpose of Disbursement See Attached Memos 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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) B. American Airlines		Transaction ID: SB21B.41000.0 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address PO Box 619133		Amount of Each Disbursement this Period 1390.70
City Dallas State TX Zip Code 75261	Purpose of Disbursement Travel-Airfare 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) ▼	Category/Type 002 [MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Delta Airlines		Transaction ID: SB21B.41000.1 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address PO Box 20980		Amount of Each Disbursement this Period 618.60
City Atlanta State GA Zip Code 30320	Purpose of Disbursement Travel-Airfare 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) ▼	Category/Type 002 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	3235.11
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. McNair Travel Agency		Transaction ID: SB21B.41000.2 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 1703 Duke Street		Amount of Each Disbursement this Period 140.00
City Alexandria State VA Zip Code 22314	[MEMO ITEM]	
Purpose of Disbursement Travel - Agency Fees		002 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:		

Full Name (Last, First, Middle Initial) B. United Airlines		Transaction ID: SB21B.41000.3 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 9864 Main Street		Amount of Each Disbursement this Period 267.30
City Fairfax State VA Zip Code 22031	[MEMO ITEM]	
Purpose of Disbursement Travel-Airfare		002 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:		

Full Name (Last, First, Middle Initial) C. US Airways		Transaction ID: SB21B.41000.4 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address PO Box 2501		Amount of Each Disbursement this Period 826.20
City Washington State DC Zip Code 27102	[MEMO ITEM]	
Purpose of Disbursement Travel-Airfare		002 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) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<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)
STRAIGHT TALK AMERICA

A. AT&T Full Name (Last, First, Middle Initial) Mailing Address PO Box 9001309 City Louisville State KY Zip Code 40290-1309 Purpose of Disbursement Telephone - Local 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: SB21B.40931 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 345.33 001 Category/Type
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B. AT&T Full Name (Last, First, Middle Initial) Mailing Address PO Box 9001309 City Louisville State KY Zip Code 40290-1309 Purpose of Disbursement Telephone-Long Distance 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: SB21B.40933 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 57.03 001 Category/Type
--	--	--

C. AT&T Full Name (Last, First, Middle Initial) Mailing Address PO Box 9001309 City Louisville State KY Zip Code 40290-1309 Purpose of Disbursement Telephone - Local 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: SB21B.40932 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 195.22 001 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	597.58
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. AT&T		Transaction ID: SB21B.40934 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 9001309		Amount of Each Disbursement this Period 235.90
City Louisville State KY Zip Code 40290-1309		
Purpose of Disbursement Telephone-Long Distance Candidate Name	001 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) ▼	

Full Name (Last, First, Middle Initial) B. Avaya		Transaction ID: SB21B.40935 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address PO Box 93000		Amount of Each Disbursement this Period 192.27
City Chicago State IL Zip Code 60673-3000		
Purpose of Disbursement Equipment Lease Candidate Name	001 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) ▼	

Full Name (Last, First, Middle Initial) C. BLM Strategies, LLC		Transaction ID: SB21B.40937 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 54 B Ridgedale Avenue		Amount of Each Disbursement this Period 10000.00
City Morristown State NJ Zip Code 07960		
Purpose of Disbursement Financial Consultant Candidate Name	001 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) ▶	10428.17
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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 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

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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Campaign Solutions		Transaction ID: SB21B.40938 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 118 North Saint Asaph St.		Amount of Each Disbursement this Period 712.31
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Computer Purch/Hardware Candidate Name Category/Type 001	
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) ▼

Full Name (Last, First, Middle Initial) B. Campaign Solutions		Transaction ID: SB21B.40939 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 118 North Saint Asaph St.		Amount of Each Disbursement this Period 2000.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Website Consultant Candidate Name Category/Type 001	
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) ▼

Full Name (Last, First, Middle Initial) C. Campaign Solutions		Transaction ID: SB21B.40940 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 118 North Saint Asaph St.		Amount of Each Disbursement this Period 2808.75
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Website Consultant Candidate Name Category/Type 001	
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) ▶	5521.06
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Campaign Solutions		Transaction ID: SB21B.40941 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 118 North Saint Asaph St.		Amount of Each Disbursement this Period 100.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Website Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) B. Campaign Solutions		Transaction ID: SB21B.41157 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 118 North Saint Asaph St.		Amount of Each Disbursement this Period 775.39
City Alexandria State VA Zip Code 22314	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) ▼
		Category/Type 003

Full Name (Last, First, Middle Initial) C. Capital Self Storage		Transaction ID: SB21B.40942 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 301 N Street, NE		Amount of Each Disbursement this Period 90.00
City Washington State DC Zip Code 20002	Purpose of Disbursement Storage 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) ▼
		Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	965.39
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Capitol Flourish		Transaction ID: SB21B.41125 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 12186 Hickory Knoll Place		Amount of Each Disbursement this Period 13062.84
City Fairfax State VA Zip Code 22033	Purpose of Disbursement Event Expense - Invitations 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) ▼
		Category/Type 003

Full Name (Last, First, Middle Initial) B. Capitol Flourish		Transaction ID: SB21B.41126 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 12186 Hickory Knoll Place		Amount of Each Disbursement this Period 20533.40
City Fairfax State VA Zip Code 22033	Purpose of Disbursement Event Expense - Invitations 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) ▼
		Category/Type 003

Full Name (Last, First, Middle Initial) C. Caplin & Drysdale		Transaction ID: SB21B.40943 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address One Thomas Circle, NW Ste. 1100		Amount of Each Disbursement this Period 11104.62
City Washington State DC Zip Code 20005	Purpose of Disbursement Legal Consultant 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) ▼
		Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	44700.86
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Care First Blue Cross Blue Shield		Transaction ID: SB21B.40944	
Mailing Address PO Box 79749		Date of Disbursement 05 / 23 / 2006	
City Baltimore	State MD	Zip Code 21279	Amount of Each Disbursement this Period 1902.00
Purpose of Disbursement Health Insurance		001 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:			

Full Name (Last, First, Middle Initial) B. Care First Blue Cross Blue Shield		Transaction ID: SB21B.40945	
Mailing Address PO Box 79749		Date of Disbursement 05 / 25 / 2006	
City Baltimore	State MD	Zip Code 21279	Amount of Each Disbursement this Period 392.00
Purpose of Disbursement Health Insurance		001 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:			

Full Name (Last, First, Middle Initial) C. Central Parking System		Transaction ID: SB21B.40946	
Mailing Address PO Box 17505		Date of Disbursement 05 / 23 / 2006	
City Baltimore	State MD	Zip Code 21297-1505	Amount of Each Disbursement this Period 150.00
Purpose of Disbursement Parking		001 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)	2444.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Chantilly Printing & Graphics, Inc.		Transaction ID: SB21B.40947 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 13808 Redskin Drive		Amount of Each Disbursement this Period 469.12
City Herndon State VA Zip Code 20171	Purpose of Disbursement Printing Candidate Name Category/Type 001	
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) ▼	

Full Name (Last, First, Middle Initial) B. Cingular		Transaction ID: SB21B.40948 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address PO Box 17356		Amount of Each Disbursement this Period 98.81
City Baltimore State MD Zip Code 21297-1356	Purpose of Disbursement Telephone - Cellular Candidate Name Category/Type 001	
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) ▼	

Full Name (Last, First, Middle Initial) C. Cingular		Transaction ID: SB21B.40949 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address PO Box 17356		Amount of Each Disbursement this Period 169.33
City Baltimore State MD Zip Code 21297-1356	Purpose of Disbursement Telephone - Cellular Candidate Name Category/Type 001	
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) ▶	737.26
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Cingular		Transaction ID: SB21B.40950 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 17356		Amount of Each Disbursement this Period 98.81
City Baltimore State MD Zip Code 21297-1356	Purpose of Disbursement Telephone - Cellular 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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) B. Communications Corporation Of America		Transaction ID: SB21B.41128 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 13195 Freedom Way		Amount of Each Disbursement this Period 11188.10
City Boston State VA Zip Code 22713	Purpose of Disbursement Direct Mail - Postage 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) ▼	Category/Type 003

Full Name (Last, First, Middle Initial) C. Connell Donatelli, Inc.		Transaction ID: SB21B.40951 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 1877		Amount of Each Disbursement this Period 1145.77
City Alexandria State VA Zip Code 22313	Purpose of Disbursement Website Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	12432.68
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Dawson McCarthy Nelson Media, LLC		Transaction ID: SB21B.40953 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 1023 31st Street, NW Fourth Floor		Amount of Each Disbursement this Period 20000.00
City Washington State DC Zip Code 20007	Purpose of Disbursement Political Consultant Candidate Name Category/Type 001	
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) ▼

Full Name (Last, First, Middle Initial) B. Deluxe Business Forms & Supplies		Transaction ID: SB21B.40954 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address PO Box 742572		Amount of Each Disbursement this Period 176.03
City Cincinnati State OH Zip Code 45274-2570	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
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) ▼

Full Name (Last, First, Middle Initial) C. DGM & Associates		Transaction ID: SB21B.40955 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address PO Box 509		Amount of Each Disbursement this Period 100.00
City Novi State MI Zip Code 48376	Purpose of Disbursement Financial Consultant Candidate Name Category/Type 001	
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) ▶	20276.03
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. DGM & Associates		Transaction ID: SB21B.40956 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address PO Box 509		Amount of Each Disbursement this Period 100.00
City Novi State MI Zip Code 48376	Purpose of Disbursement Financial Consultant 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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) B. Earthlink, Inc.		Transaction ID: SB21B.40957 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address PO Box 6452		Amount of Each Disbursement this Period 52.85
City Carol Stream State IL Zip Code 60197-6452	Purpose of Disbursement Subscription/publication 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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) C. EDonation		Transaction ID: SB21B.41129 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 118 N. St. Asaph Street		Amount of Each Disbursement this Period 2477.70
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Merchant 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) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶

2630.55

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Carla Eudy		Transaction ID: SB21B.41148 Date of Disbursement 05 / 03 / 2006
Mailing Address 4200 Massachusetts Ave. NW, Apt. 3		Amount of Each Disbursement this Period 88.00
City Washington State DC Zip Code 20016	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) ▼	Category/Type 002

Full Name (Last, First, Middle Initial) B. Carla Eudy		Transaction ID: SB21B.41149 Date of Disbursement 05 / 23 / 2006
Mailing Address 4200 Massachusetts Ave. NW, Apt. 3		Amount of Each Disbursement this Period 118.00
City Washington State DC Zip Code 20016	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) ▼	Category/Type 002

Full Name (Last, First, Middle Initial) C. Federal Express		Transaction ID: SB21B.40958 Date of Disbursement 05 / 03 / 2006
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 2026.41
City Pittsburgh State PA Zip Code 15250-7461	Purpose of Disbursement Shipping 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) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	2232.41
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Federal Express		Transaction ID: SB21B.40959 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 1661.51
City Pittsburgh State PA Zip Code 15250-7461	001 Category/ Type	
Purpose of Disbursement Shipping 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:		

Full Name (Last, First, Middle Initial) B. Federal Express		Transaction ID: SB21B.40960 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 320.96
City Pittsburgh State PA Zip Code 15250-7461	001 Category/ Type	
Purpose of Disbursement Shipping 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:		

Full Name (Last, First, Middle Initial) C. Nicole C. Fenwick		Transaction ID: SB21B.40909 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 631 D Street, NW #435		Amount of Each Disbursement this Period 2493.17
City Washington State DC Zip Code 20004	001 Category/ Type	
Purpose of Disbursement Salaries 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) ▶	4475.64
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Nicole C. Fenwick		Transaction ID: SB21B.40908 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 631 D Street, NW #435		Amount of Each Disbursement this Period 31.00
City Washington State DC Zip Code 20004	001 Category/ Type	
Purpose of Disbursement Parking		
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) ▼	

Full Name (Last, First, Middle Initial) B. Nicole C. Fenwick		Transaction ID: SB21B.40910 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 631 D Street, NW #435		Amount of Each Disbursement this Period 2493.17
City Washington State DC Zip Code 20004	001 Category/ Type	
Purpose of Disbursement Salaries		
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) ▼	

Full Name (Last, First, Middle Initial) C. Flight Options		Transaction ID: SB21B.41158 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 26180 Curtiss-Wright Parkway Cuyahoga County Airport		Amount of Each Disbursement this Period 31321.18
City Cleveland State OH Zip Code 44143	002 Category/ Type	
Purpose of Disbursement Travel-Charter Air		
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) ▶	33845.35
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Flight Options

Mailing Address 26180 Curtiss-Wright Parkway
Cuyahoga County Airport

City Cleveland State OH Zip Code 44143

Purpose of Disbursement
In Kind Contribution-Travel-Airfare

011
Category/
Type

Candidate Name
GUTKNECHT FOR U.S. CONGRESS COMMITTEE

Office Sought: House Senate President
Disbursement For: 2006 Primary General Other (specify) ▼

State: MN District: 01

Transaction ID: SB21B.41232

Date of Disbursement

05 / 04 / 2006

Amount of Each Disbursement this Period

4694.37

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Flight Options

Mailing Address 26180 Curtiss-Wright Parkway
Cuyahoga County Airport

City Cleveland State OH Zip Code 44143

Purpose of Disbursement
In Kind Contribution-Travel Airfare

011
Category/
Type

Candidate Name
STEVE CHABOT FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2006 Primary General Other (specify) ▼

State: OH District: 01

Transaction ID: SB21B.41242

Date of Disbursement

05 / 04 / 2006

Amount of Each Disbursement this Period

1289.04

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Flight Options

Mailing Address 26180 Curtiss-Wright Parkway
Cuyahoga County Airport

City Cleveland State OH Zip Code 44143

Purpose of Disbursement
Travel-Charter Air

002
Category/
Type

Candidate Name

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

State: District:

Transaction ID: SB21B.41159

Date of Disbursement

05 / 31 / 2006

Amount of Each Disbursement this Period

55401.24

SUBTOTAL of Disbursements This Page (optional) ▶

55401.24

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Flight Options

Mailing Address 26180 Curtiss-Wright Parkway
Cuyahoga County Airport

City Cleveland State OH Zip Code 44143

Purpose of Disbursement
In Kind Contribution-Airfare

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.41257

Date of Disbursement

05 / 31 / 2006

Amount of Each Disbursement this Period

2701.06

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Flight Options

Mailing Address 26180 Curtiss-Wright Parkway
Cuyahoga County Airport

City Cleveland State OH Zip Code 44143

Purpose of Disbursement
In Kind Contribution-Travel Airfare

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.41266

Date of Disbursement

05 / 31 / 2006

Amount of Each Disbursement this Period

2858.71

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Flight Options

Mailing Address 26180 Curtiss-Wright Parkway
Cuyahoga County Airport

City Cleveland State OH Zip Code 44143

Purpose of Disbursement
In Kind Contribution-Travel Airfare

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.41267

Date of Disbursement

05 / 31 / 2006

Amount of Each Disbursement this Period

924.67

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Flight Options

Mailing Address 26180 Curtiss-Wright Parkway
Cuyahoga County Airport

City Cleveland State OH Zip Code 44143

Purpose of Disbursement
In Kind Contribution-Travel Airfare

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.41270

Date of Disbursement

05 / 31 / 2006

Amount of Each Disbursement this Period

1385.36

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Kathryn Fox

Mailing Address 100 Luna Park Drive, #339

City Alexandria State VA Zip Code 22305

Purpose of Disbursement
Salaries

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.40911

Date of Disbursement

05 / 15 / 2006

Amount of Each Disbursement this Period

1279.54

Full Name (Last, First, Middle Initial)

C. Kathryn Fox

Mailing Address 100 Luna Park Drive, #339

City Alexandria State VA Zip Code 22305

Purpose of Disbursement
Salaries

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.40912

Date of Disbursement

05 / 31 / 2006

Amount of Each Disbursement this Period

1279.54

SUBTOTAL of Disbursements This Page (optional) ▶

2559.08

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

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. FRIENDS OF JOHN MCCAIN		Transaction ID: SB21B.41130
Mailing Address 211 NORTH UNION STREET SUITE 200		Date of Disbursement MM / DD / YYYY 05 / 31 / 2006
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement Direct Mail - List Expense	Amount of Each Disbursement this Period 5106.70	
Candidate Name	Category/ Type 003	
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:		

Full Name (Last, First, Middle Initial) B. Ronald Glassman		Transaction ID: SB21B.41119
Mailing Address 103 Arden Lane		Date of Disbursement MM / DD / YYYY 05 / 31 / 2006
City Stamford	State CT	Zip Code 06905
Purpose of Disbursement Event Expense-Photography	Amount of Each Disbursement this Period 625.00	
Candidate Name	Category/ Type 003	
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:		

Full Name (Last, First, Middle Initial) C. Craig A. Goldman		Transaction ID: SB21B.40913
Mailing Address 5747 Sherier Place NW		Date of Disbursement MM / DD / YYYY 05 / 15 / 2006
City Washington	State DC	Zip Code 20016
Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 3856.64	
Candidate Name	Category/ Type 001	
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)	9588.34
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Craig A. Goldman		Transaction ID: SB21B.41150 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 5747 Sherier Place NW		Amount of Each Disbursement this Period 1567.19
City Washington State DC Zip Code 20016	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) ▼	Category/Type 002

Full Name (Last, First, Middle Initial) B. Craig A. Goldman		Transaction ID: SB21B.40914 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 5747 Sherier Place NW		Amount of Each Disbursement this Period 3856.64
City Washington State DC Zip Code 20016	Purpose of Disbursement Salaries 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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) C. Holloway Consulting		Transaction ID: SB21B.40961 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address PO Box 550004		Amount of Each Disbursement this Period 7000.00
City Atlanta State GA Zip Code 30355	Purpose of Disbursement Financial Consultant 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) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	12423.83
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Hoon Designs		Transaction ID: SB21B.41131 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 2800 Shirlington Road, Ste. 920		Amount of Each Disbursement this Period 1850.00
City Arlington State VA Zip Code 22206	Purpose of Disbursement Direct Mail - Production 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) ▼
Purpose of Disbursement Compliance Consultant Candidate Name		

Full Name (Last, First, Middle Initial) B. Huckaby Davis Lisker		Transaction ID: SB21B.40962 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 228 S. Washington St., Suite 115		Amount of Each Disbursement this Period 3017.88
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Compliance Consultant 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) ▼
Purpose of Disbursement Compliance Consultant Candidate Name		

Full Name (Last, First, Middle Initial) C. IDMI		Transaction ID: SB21B.40963 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 490 White Pond Drive		Amount of Each Disbursement this Period 11642.67
City Akron State OH Zip Code 44320	Purpose of Disbursement DataBase File Maintenance 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) ▼
Purpose of Disbursement DataBase File Maintenance Candidate Name		

SUBTOTAL of Disbursements This Page (optional) ▶	16510.55
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Integrated Web Strategy, LLC		Transaction ID: SB21B.40964	
Mailing Address 4715 N. 32nd Street, Ste. 107		Date of Disbursement 05 / 01 / 2006	
City Phoenix	State AZ	Zip Code 85018	Amount of Each Disbursement this Period 1550.00
Purpose of Disbursement Website Consultant		<input type="text" value="001"/>	
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:			

Full Name (Last, First, Middle Initial) B. Michael Jaconi		Transaction ID: SB21B.40918	
Mailing Address 1615 33rd Street, NW		Date of Disbursement 05 / 31 / 2006	
City Washington	State DC	Zip Code 20007	Amount of Each Disbursement this Period 1068.98
Purpose of Disbursement Salaries		<input type="text" value="001"/>	
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:			

Full Name (Last, First, Middle Initial) C. Amber L. Johnson		Transaction ID: SB21B.40919	
Mailing Address 1040 Hyde Park Drive		Date of Disbursement 05 / 15 / 2006	
City Annapolis	State MD	Zip Code 21403	Amount of Each Disbursement this Period 2358.60
Purpose of Disbursement Salaries		<input type="text" value="001"/>	
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)	4977.58
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Amber L. Johnson		Transaction ID: SB21B.40920 Date of Disbursement 05 / 31 / 2006
Mailing Address 1040 Hyde Park Drive		Amount of Each Disbursement this Period 2358.60
City Annapolis State MD Zip Code 21403	Purpose of Disbursement Salaries Candidate Name Category/Type 001	
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) ▼	

Full Name (Last, First, Middle Initial) B. Karen L. Kessenich		Transaction ID: SB21B.40923 Date of Disbursement 05 / 01 / 2006
Mailing Address 12186 Hickory Knoll Place		Amount of Each Disbursement this Period 3000.00
City Fairfax State VA Zip Code 22033	Purpose of Disbursement Financial Consultant Candidate Name Category/Type 001	
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) ▼	

Full Name (Last, First, Middle Initial) C. Becca McMullen		Transaction ID: SB21B.40924 Date of Disbursement 05 / 01 / 2006
Mailing Address 815 A Brazos, #254		Amount of Each Disbursement this Period 2000.00
City Austin State TX Zip Code 78701	Purpose of Disbursement Financial Consultant Candidate Name Category/Type 003	
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) ▶	7358.60
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Becca McMullen		Transaction ID: SB21B.40925 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 815 A Brazos, #254		Amount of Each Disbursement this Period 4000.00
City Austin State TX Zip Code 78701	Purpose of Disbursement Financial Consultant Candidate Name Category/Type 003	
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) ▼

Full Name (Last, First, Middle Initial) B. Becca McMullen		Transaction ID: SB21B.41122 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 815 A Brazos, #254		Amount of Each Disbursement this Period 139.96
City Austin State TX Zip Code 78701	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
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) ▼

Full Name (Last, First, Middle Initial) C. Courtney Nahigian		Transaction ID: SB21B.40926 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 331 Cameron Station Blvd.		Amount of Each Disbursement this Period 3188.84
City Alexandria State VA Zip Code 22304	Purpose of Disbursement Salaries Candidate Name Category/Type 001	
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) ▶	7328.80
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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 138 / 194

<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)
STRAIGHT TALK AMERICA

A. Courtney Nahigian Full Name (Last, First, Middle Initial) Mailing Address 331 Cameron Station Blvd. City Alexandria State VA Zip Code 22304 Purpose of Disbursement Salaries 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: SB21B.40927 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 3188.84 001 Category/ Type
--	--	--

B. National City Bank Full Name (Last, First, Middle Initial) Mailing Address PO Box 5756 City Akron State OH Zip Code 44101 Purpose of Disbursement Bank Charges 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: SB21B.40965 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 329.35 001 Category/ Type
--	--	---

C. New Media Strategies Full Name (Last, First, Middle Initial) Mailing Address 33 Deer Street, Ste. 3A City Portsmouth State NH Zip Code 03801 Purpose of Disbursement Political Consultant 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: SB21B.40967 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6 Amount of Each Disbursement this Period 16500.00 001 Category/ Type
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SUBTOTAL of Disbursements This Page (optional) ▶	20018.19
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Patricia Blake Catering		Transaction ID: SB21B.41133 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 7 Tokeneke Road		Amount of Each Disbursement this Period 2130.60
City Darien State CT Zip Code 06820	Purpose of Disbursement Event Expense - Catering 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) ▼
		Category/Type 003

Full Name (Last, First, Middle Initial) B. Paula Y. Edwards, CPA		Transaction ID: SB21B.40969 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 1318 Roxanna Road, NW		Amount of Each Disbursement this Period 5600.00
City Washington State DC Zip Code 20012	Purpose of Disbursement Compliance Consultant 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) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) C. Paychex		Transaction ID: SB21B.40972 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 7450 Tilghman St., Ste. 107		Amount of Each Disbursement this Period 226.27
City Allentown State PA Zip Code 18106-9037	Purpose of Disbursement Payroll Service Charge 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) ▼
		Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	7956.87
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Paychex		Transaction ID: SB21B.40970
Mailing Address 7450 Tilghman St., Ste. 107		Date of Disbursement MM / DD / YYYY 05 / 15 / 2006
City Allentown	State PA	Zip Code 18106-9037
Purpose of Disbursement Employer Contrib P/R Tax	Amount of Each Disbursement this Period 7638.95	
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) B. Paychex		Transaction ID: SB21B.40971
Mailing Address 7450 Tilghman St., Ste. 107		Date of Disbursement MM / DD / YYYY 05 / 31 / 2006
City Allentown	State PA	Zip Code 18106-9037
Purpose of Disbursement Employer Contrib P/R Tax	Amount of Each Disbursement this Period 8049.41	
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) C. Philander Smith College		Transaction ID: SB21B.40974
Mailing Address One Trudie Kibbe Reed Drive		Date of Disbursement MM / DD / YYYY 05 / 23 / 2006
City Little Rock	State AR	Zip Code 72202
Purpose of Disbursement Event Expense-Facility	Amount of Each Disbursement this Period 987.49	
Candidate Name	001 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)	16675.85
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. PRO-LIFE CAMPAIGN COMMITTEE		Transaction ID: SB21B.40902
Mailing Address PO Box 650248		Date of Disbursement MM / DD / YYYY 05 / 11 / 2006
City Sterling	State VA	Zip Code 20165
Purpose of Disbursement In-kind - Use of list of voter names		Amount of Each Disbursement this Period 4432.13
Candidate Name		003 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:		

Full Name (Last, First, Middle Initial) B. Production Mailing Service		Transaction ID: SB21B.41134
Mailing Address 15 Bank Street		Date of Disbursement MM / DD / YYYY 05 / 16 / 2006
City Staten Island	State NY	Zip Code 10301
Purpose of Disbursement Event Expense - Invitations		Amount of Each Disbursement this Period 694.49
Candidate Name		003 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:		

Full Name (Last, First, Middle Initial) C. REPUBLICAN ISSUES COMMITTEE		Transaction ID: SB21B.40899
Mailing Address PO Box 650700		Date of Disbursement MM / DD / YYYY 05 / 08 / 2006
City Sterling	State VA	Zip Code 20165
Purpose of Disbursement In-kind - Use of list of voter names		Amount of Each Disbursement this Period 2155.44
Candidate Name		003 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)	7282.06
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Margaret S. Scholz		Transaction ID: SB21B.40928 Date of Disbursement 05 / 15 / 2006
Mailing Address 1523 Bering Drive		Amount of Each Disbursement this Period 878.86
City Houston State TX Zip Code 77057	001 Category/ Type	
Purpose of Disbursement Salaries 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) ▼		

Full Name (Last, First, Middle Initial) B. Margaret S. Scholz		Transaction ID: SB21B.40929 Date of Disbursement 05 / 31 / 2006
Mailing Address 1523 Bering Drive		Amount of Each Disbursement this Period 878.86
City Houston State TX Zip Code 77057	001 Category/ Type	
Purpose of Disbursement Salaries 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) ▼		

Full Name (Last, First, Middle Initial) C. Southern Insights, LLC		Transaction ID: SB21B.40975 Date of Disbursement 05 / 01 / 2006
Mailing Address 3072 Sunview Drive		Amount of Each Disbursement this Period 6000.00
City Birmingham State AL Zip Code 35243	001 Category/ Type	
Purpose of Disbursement Political Consultant 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) ▶	7757.72
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Southwest Publishing		Transaction ID: SB21B.41135 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 2600 NW Topeka Blvd.		Amount of Each Disbursement this Period 63965.69
City Topeka State KS Zip Code 66617	Purpose of Disbursement Direct Mail - Postage Candidate Name Category/Type 003	
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) ▼

Full Name (Last, First, Middle Initial) B. Southwest Publishing		Transaction ID: SB21B.41137 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 2600 NW Topeka Blvd.		Amount of Each Disbursement this Period 36190.43
City Topeka State KS Zip Code 66617	Purpose of Disbursement Direct Mail - Production Candidate Name Category/Type 003	
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) ▼

Full Name (Last, First, Middle Initial) C. Southwest Publishing		Transaction ID: SB21B.41136 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 2600 NW Topeka Blvd.		Amount of Each Disbursement this Period 22198.18
City Topeka State KS Zip Code 66617	Purpose of Disbursement Direct Mail - Postage Candidate Name Category/Type 003	
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) ▶	122354.30
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Sprint PCS		Transaction ID: SB21B.40976
Mailing Address PO Box 1769		Date of Disbursement 05 / 23 / 2006
City Newark	State NJ	Zip Code 07101-1769
Purpose of Disbursement Telephone - Cellular	Amount of Each Disbursement this Period 71.85	
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) B. Strategic National Consulting, LLC		Transaction ID: SB21B.40978
Mailing Address 531 North Capitol Ave.		Date of Disbursement 05 / 01 / 2006
City Lansing	State MI	Zip Code 48933
Purpose of Disbursement Political Consultant	Amount of Each Disbursement this Period 5000.00	
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) C. Strategic National Consulting, LLC		Transaction ID: SB21B.40979
Mailing Address 531 North Capitol Ave.		Date of Disbursement 05 / 01 / 2006
City Lansing	State MI	Zip Code 48933
Purpose of Disbursement Printing	Amount of Each Disbursement this Period 1600.00	
Candidate Name	001 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)	6671.85
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Strategic Telecommunications		Transaction ID: SB21B.41139 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 7591 9th Street North		Amount of Each Disbursement this Period 9353.45
City State Zip Code Oakdale MN 55128	Purpose of Disbursement Telemarketing 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) ▼	Category/Type 003

Full Name (Last, First, Middle Initial) B. Strategic Telecommunications		Transaction ID: SB21B.41140 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 7591 9th Street North		Amount of Each Disbursement this Period 34110.85
City State Zip Code Oakdale MN 55128	Purpose of Disbursement Telemarketing 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) ▼	Category/Type 003

Full Name (Last, First, Middle Initial) C. T-Mobile		Transaction ID: SB21B.40990 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address PO Box 742596		Amount of Each Disbursement this Period 535.47
City State Zip Code Cincinnati OH 45274-2596	Purpose of Disbursement Telephone - Cellular 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) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	43999.77
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. T-Mobile		Transaction ID: SB21B.40991 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 742596		Amount of Each Disbursement this Period 219.71
City Cincinnati State OH Zip Code 45274-2596	Purpose of Disbursement Telephone - Cellular 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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) B. The Computer Workshop		Transaction ID: SB21B.40982 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 3223 Brookings Court		Amount of Each Disbursement this Period 813.75
City Farifax State VA Zip Code 22031	Purpose of Disbursement Computer Services 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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) C. The Dennehy Group		Transaction ID: SB21B.40983 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 11 Depot Street, Ste. 2		Amount of Each Disbursement this Period 15000.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Political Consultant 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) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	16033.46
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. The Dennehy Group		Transaction ID: SB21B.41160 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 11 Depot Street, Ste. 2		Amount of Each Disbursement this Period 817.44
City Concord State NH Zip Code 03301	Purpose of Disbursement Travel Reimbursement Candidate Name Category/Type 002	
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) ▼

Full Name (Last, First, Middle Initial) B. The Eudy Company		Transaction ID: SB21B.40984 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 211 N. Union St., Ste. 200		Amount of Each Disbursement this Period 18000.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Financial Consultant Candidate Name Category/Type 001	
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) ▼

Full Name (Last, First, Middle Initial) C. The Eudy Company		Transaction ID: SB21B.40985 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 211 N. Union St., Ste. 200		Amount of Each Disbursement this Period 1369.70
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
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) ▶	20187.14
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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<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

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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. The Eudy Company		Transaction ID: SB21B.40986
Mailing Address 211 N. Union St., Ste. 200		Date of Disbursement 05 / 03 / 2006
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Security	001 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:		
		Amount of Each Disbursement this Period 74.40

Full Name (Last, First, Middle Initial) B. The Eudy Company		Transaction ID: SB21B.40987
Mailing Address 211 N. Union St., Ste. 200		Date of Disbursement 05 / 03 / 2006
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Shipping	001 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:		
		Amount of Each Disbursement this Period 116.71

Full Name (Last, First, Middle Initial) C. The Eudy Company		Transaction ID: SB21B.40988
Mailing Address 211 N. Union St., Ste. 200		Date of Disbursement 05 / 03 / 2006
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Telephone-Long Distance	001 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:		
		Amount of Each Disbursement this Period 7.05

SUBTOTAL of Disbursements This Page (optional)	▶	198.16
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. The Eudy Company		Transaction ID: SB21B.41161 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 211 N. Union St., Ste. 200		Amount of Each Disbursement this Period 55.17
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Travel Reimbursement Candidate Name Category/Type 002	
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) ▼

Full Name (Last, First, Middle Initial) B. The Hallisey Group		Transaction ID: SB21B.40989 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 38 East 85th Street, #5		Amount of Each Disbursement this Period 10000.00
City New York State NY Zip Code 10028	Purpose of Disbursement Financial Consultant Candidate Name Category/Type 001	
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) ▼

Full Name (Last, First, Middle Initial) C. Union Street, LP		Transaction ID: SB21B.40992 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address c/o PNGS Management Co., Inc. 1350 Connecticut Ave., NW Ste. 120		Amount of Each Disbursement this Period 520.00
City Washington State DC Zip Code 20036	Purpose of Disbursement Parking Candidate Name Category/Type 001	
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) ▶	10575.17
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Union Street, LP		Transaction ID: SB21B.40993 Date of Disbursement 05 / 01 / 2006
Mailing Address c/o PNGS Management Co., Inc. 1350 Connecticut Ave., NW Ste. 120		Amount of Each Disbursement this Period 10452.01
City Washington State DC Zip Code 20036	Purpose of Disbursement Rent Candidate Name Category/Type 001	
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) ▼	

Full Name (Last, First, Middle Initial) B. Union Street, LP		Transaction ID: SB21B.40994 Date of Disbursement 05 / 01 / 2006
Mailing Address c/o PNGS Management Co., Inc. 1350 Connecticut Ave., NW Ste. 120		Amount of Each Disbursement this Period 15.00
City Washington State DC Zip Code 20036	Purpose of Disbursement Security Candidate Name Category/Type 001	
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) ▼	

Full Name (Last, First, Middle Initial) C. US Postmaster		Transaction ID: SB21B.41144 Date of Disbursement 05 / 22 / 2006
Mailing Address		Amount of Each Disbursement this Period 6000.00
City Alexandria State VA Zip Code	Purpose of Disbursement Direct Mail - BRE Candidate Name Category/Type 003	
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) ▶

16467.01

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. US Postmaster		Transaction ID: SB21B.41145 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address		Amount of Each Disbursement this Period 8000.00
City Alexandria	State VA	
Purpose of Disbursement Direct Mail - BRE	Category/ Type 003	
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: _____		

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: SB21B.40995 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 156.40
City Baltimore	State MD	
Purpose of Disbursement Telephone-Long Distance	Category/ Type 001	
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: _____		

Full Name (Last, First, Middle Initial) C. Chuck Warren		Transaction ID: SB21B.41124 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 6000 South Fashion Place Blvd., St		Amount of Each Disbursement this Period 2202.23
City Salt Lake City	State UT	
Purpose of Disbursement Event Expense - Catering	Category/ Type 003	
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) ▶	10358.63
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. John Weaver		Transaction ID: SB21B.40930 Date of Disbursement 05 / 01 / 2006
Mailing Address 337 West 12th Street		Amount of Each Disbursement this Period 15000.00
City New York State NY Zip Code 10014	001 Category/ Type	
Purpose of Disbursement Political Consultant		
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) ▼	

Full Name (Last, First, Middle Initial) B. John Weaver		Transaction ID: SB21B.41153 Date of Disbursement 05 / 31 / 2006
Mailing Address 337 West 12th Street		Amount of Each Disbursement this Period 2528.53
City New York State NY Zip Code 10014	002 Category/ Type	
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) ▼	

Full Name (Last, First, Middle Initial) C. John Yob		Transaction ID: SB21B.41155 Date of Disbursement 05 / 16 / 2006
Mailing Address 2052 College		Amount of Each Disbursement this Period 2545.81
City Grand Rapids State MI Zip Code 49507	002 Category/ Type	
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) ▼	

SUBTOTAL of Disbursements This Page (optional)

20074.34

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
John Yob

Mailing Address 2052 College

City Grand Rapids State MI Zip Code 49507

Purpose of Disbursement
Travel Reimbursement

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.41156

Date of Disbursement

05 / 23 / 2006

Amount of Each Disbursement this Period

1518.22

SUBTOTAL of Disbursements This Page (optional) ▶

1518.22

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

642227.28

**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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB23.41251
Mailing Address PO Box 1270		Date of Disbursement 05 / 04 / 2006
City Newark	State NJ	Zip Code 07101-1270
Purpose of Disbursement In Kind Contribution-Travel Lodging		Amount of Each Disbursement this Period 38.70
Candidate Name BASS VICTORY COMMITTEE		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NH	District: 02	

Full Name (Last, First, Middle Initial) B. Hancock Inn		Transaction ID: SB23.41251.0
Mailing Address 33 Main Street		Date of Disbursement 05 / 04 / 2006
City Hancock	State NH	Zip Code 03449
Purpose of Disbursement In Kind Contribution-Travel Lodging		Amount of Each Disbursement this Period 38.70
Candidate Name BASS VICTORY COMMITTEE		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NH	District: 02	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB23.41253
Mailing Address PO Box 1270		Date of Disbursement 05 / 04 / 2006
City Newark	State NJ	Zip Code 07101-1270
Purpose of Disbursement In Kind Contribution-Travel Lodging		Amount of Each Disbursement this Period 69.81
Candidate Name STEVE CHABOT FOR CONGRESS		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 01	

SUBTOTAL of Disbursements This Page (optional)	108.51
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Hyatt Cincinnati		Transaction ID: SB23.41253.0 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 151 West 5th Street		Amount of Each Disbursement this Period 69.81 [MEMO ITEM]
City Cincinnati State OH Zip Code 45202		
Purpose of Disbursement In Kind Contribution-Travel Lodging	011 Category/Type	
Candidate Name STEVE CHABOT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB23.41255 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 127.66 [MEMO ITEM]
City Newark State NJ Zip Code 07101-1270		
Purpose of Disbursement In Kind Contribution-Travel Lodging	011 Category/Type	
Candidate Name GUTKNECHT FOR U.S. CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 01	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ramada Inn Rochester		Transaction ID: SB23.41255.0 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 1517 16th Street SW		Amount of Each Disbursement this Period 127.66 [MEMO ITEM]
City Rochester State MN Zip Code 55902		
Purpose of Disbursement In Kind Contribution-Travel Lodging	011 Category/Type	
Candidate Name GUTKNECHT FOR U.S. CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 01	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	127.66
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. BASS VICTORY COMMITTEE		Transaction ID: SB23.41005 Date of Disbursement																					
Mailing Address PO Box 3451		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	6		2	0	0	6														
City Concord	State NH	Zip Code 03302	Amount of Each Disbursement this Period																				
Purpose of Disbursement Cand/Cmte Contributions-Fed		<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type	<table border="1"> <tr> <td>1500.00</td> </tr> </table>	1500.00																	
011																							
Category/ Type																							
1500.00																							
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: NH District: 02																							

Full Name (Last, First, Middle Initial) B. BRIAN BILBRAY FOR CONGRESS		Transaction ID: SB23.41015 Date of Disbursement																					
Mailing Address 5703 Oberlin Drive, Ste. 101		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		3	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		3	0		2	0	0	6														
City San Diego	State CA	Zip Code 92121	Amount of Each Disbursement this Period																				
Purpose of Disbursement Cand/Cmte Contributions-Fed		<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type	<table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00																	
011																							
Category/ Type																							
5000.00																							
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																						
State: CA District: 50	Special-Primary																						

Full Name (Last, First, Middle Initial) C. DEMINT FOR SENATE COMMITTEE INC		Transaction ID: SB23.41027 Date of Disbursement																					
Mailing Address PO Box 12425		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	4		2	0	0	6														
City Columbia	State SC	Zip Code 29211	Amount of Each Disbursement this Period																				
Purpose of Disbursement Cand/Cmte Contributions-Fed		<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type	<table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00																	
011																							
Category/ Type																							
5000.00																							
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: SC District: 00																							

SUBTOTAL of Disbursements This Page (optional)	▶	<table border="1"><tr><td>11500.00</td></tr></table>	11500.00
11500.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td></td></tr></table>	

**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)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)		Transaction ID: SB23.41230																					
A. Flight Options		Date of Disbursement																					
Mailing Address 26180 Curtiss-Wright Parkway Cuyahoga County Airport		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		0	4		2	0	0	6														
City Cleveland State OH Zip Code 44143		Amount of Each Disbursement this Period																					
Purpose of Disbursement In Kind Contribution-Travel Airfare		1289.04																					
Candidate Name STEVE CHABOT FOR CONGRESS		011 Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: OH District: 01																							

Full Name (Last, First, Middle Initial)		Transaction ID: SB23.41233																					
B. Flight Options		Date of Disbursement																					
Mailing Address 26180 Curtiss-Wright Parkway Cuyahoga County Airport		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		0	4		2	0	0	6														
City Cleveland State OH Zip Code 44143		Amount of Each Disbursement this Period																					
Purpose of Disbursement In Kind Contribution-Travel Airfare		4694.37																					
Candidate Name GUTKNECHT FOR U.S. CONGRESS COMMITTEE		011 Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: MN District: 01																							

Full Name (Last, First, Middle Initial)		Transaction ID: SB23.41035																					
C. FRIENDS OF GEORGE ALLEN		Date of Disbursement																					
Mailing Address PO Box 6859		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		3	1		2	0	0	6														
City Arlington State VA Zip Code 22305		Amount of Each Disbursement this Period																					
Purpose of Disbursement Cand/Cmte Contributions-Fed		5000.00																					
Candidate Name		011 Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VA District: 00																							

SUBTOTAL of Disbursements This Page (optional)	▶	10983.41
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Idaho Republican State Central Committee		Transaction ID: SB23.41049 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 802 West Bannock, Lower Plaza 103		Amount of Each Disbursement this Period 5000.00
City Boise State ID Zip Code 83702	Purpose of Disbursement Cand/Cmte Contributions-Fed 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) ▼	011 Category/Type

Full Name (Last, First, Middle Initial) B. INGLIS FOR CONGRESS COMMITTEE INC.		Transaction ID: SB23.41051 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address PO Box 361		Amount of Each Disbursement this Period 5000.00
City Greenville State SC Zip Code 29602	Purpose of Disbursement Cand/Cmte Contributions-Fed Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 04	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type

Full Name (Last, First, Middle Initial) C. KIRK FOR CONGRESS		Transaction ID: SB23.41059 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address PO Box 8		Amount of Each Disbursement this Period 5000.00
City Winnetka State IL Zip Code 60093	Purpose of Disbursement Cand/Cmte Contributions-Fed Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
LINDSEY GRAHAM FOR SENATE

Mailing Address 508 Hampton Street, Ste. 102

City Columbia State SC Zip Code 29201

Purpose of Disbursement
Cand/Cmte Contributions-Fed

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President
State: SC District: 00

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: SB23.41063

Date of Disbursement

05 / 24 / 2006

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
MISSOURI REPUBLICAN STATE COMMITTEE-FEDERAL

Mailing Address 204 East Dunklin

City Jefferson City State MO Zip Code 65101

Purpose of Disbursement
Cand/Cmte Contributions-Fed

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB23.41071

Date of Disbursement

05 / 24 / 2006

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
Nebraska Republican State Central Cmte.

Mailing Address 1610 N Street

City Lincoln State NE Zip Code 68508

Purpose of Disbursement
Cand/Cmte Contributions-Fed

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB23.41079

Date of Disbursement

05 / 24 / 2006

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. PICKERING FOR CONGRESS		Transaction ID: SB23.41085	
Mailing Address PO Box 4297		Date of Disbursement 05 / 24 / 2006	
City Brandon	State MS	Zip Code 39047	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Cand/Cmte Contributions-Fed		011 Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MS	District: 03		

Full Name (Last, First, Middle Initial) B. Republican Party of Alaska		Transaction ID: SB23.41091	
Mailing Address 1001 West Fireweed Lane		Date of Disbursement 05 / 24 / 2006	
City Anchorage	State AK	Zip Code 99503	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Cand/Cmte Contributions-Fed		011 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:		

Full Name (Last, First, Middle Initial) C. REPUBLICAN PARTY OF KENTUCKY		Transaction ID: SB23.41095	
Mailing Address 105 West 3rd Street		Date of Disbursement 05 / 16 / 2006	
City Frankfort	State KY	Zip Code 40602	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Cand/Cmte Contributions-Fed		011 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)	15000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 161 / 194

<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Republican State Central Cmte. of Nevada		Transaction ID: SB23.41097 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 8625 West Sahara Avenue		Amount of Each Disbursement this Period 5000.00
City Las Vegas State NV Zip Code 89117	Purpose of Disbursement Cand/Cmte Contributions-Fed 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) ▼	011 Category/ Type

Full Name (Last, First, Middle Initial) B. ROSKAM FOR CONGRESS COMMITTEE		Transaction ID: SB23.41101 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 423 W. Wesley Street		Amount of Each Disbursement this Period 2500.00
City Wheaton State IL Zip Code 60187	Purpose of Disbursement Cand/Cmte Contributions-Fed Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 6	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

Full Name (Last, First, Middle Initial) C. VOLUNTEERS FOR SHIMKUS		Transaction ID: SB23.41117 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address PO Box 5458		Amount of Each Disbursement this Period 5000.00
City Springfield State IL Zip Code 62705-5458	Purpose of Disbursement Cand/Cmte Contributions-Fed Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	12500.00
TOTAL This Period (last page this line number only) ▶	80219.58

**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)

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<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 checked="" 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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)
A. Dr. John R. Shepherd

Transaction ID: SB28A.40998

Date of Disbursement

Mailing Address 2921 Augusta Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	0	6

City State Zip Code
Las Vegas NV 89109

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contrib Refund - Indiv

010
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

1000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Adam Taylor for House		Transaction ID: SB29.41002 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 550 W. Main Street		Amount of Each Disbursement this Period 1000.00
City Laurens State SC Zip Code 29360	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB29.41278 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 112.99
City Newark State NJ Zip Code 07101-1270	Purpose of Disbursement In Kind Contribution-See Attached Memo Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

Full Name (Last, First, Middle Initial) C. Steve Lukan for Iowa House		Transaction ID: SB29.41278.0 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 7365 Columbus Street		Amount of Each Disbursement this Period 112.99
City New Vienna State IA Zip Code 52065	Purpose of Disbursement In Kind Contribution-Lodging Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	1112.99
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB29.41286 Date of Disbursement
Mailing Address PO Box 1270		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Newark	State NJ	Zip Code 07101-1270
Purpose of Disbursement In Kind Contribution See Attached Memo		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="38.70"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="011"/> Category/ Type
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. Friends of Peter Bragdon		Transaction ID: SB29.41286.0 Date of Disbursement
Mailing Address 20 Park Street		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Milford	State NH	Zip Code 03055
Purpose of Disbursement In Kind Contribution-Lodging		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="38.70"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB29.41287 Date of Disbursement
Mailing Address PO Box 1270		<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Newark	State NJ	Zip Code 07101-1270
Purpose of Disbursement In Kind Contribution-See Attached Memo		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="38.70"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="011"/> Category/ Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="77.40"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Senate Republican Vic. PAC		Transaction ID: SB29.41287.0 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 582 Chestnut Street		Amount of Each Disbursement this Period 38.70
City Manchester State NH Zip Code 03104	[MEMO ITEM]	
Purpose of Disbursement In Kind Contribution-Lodging		011 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) ▼	

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB29.41288 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 124.87
City Newark State NJ Zip Code 07101-1270	[MEMO ITEM]	
Purpose of Disbursement In Kind Contribution-See Attached Memo		011 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Republican Party of Broward County		Transaction ID: SB29.41288.0 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 150 South Andrews Avenue Suite 370		Amount of Each Disbursement this Period 124.87
City Pompano Beach State FL Zip Code 33069	[MEMO ITEM]	
Purpose of Disbursement In Kind Contribution-Lodging		011 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) ▶	124.87
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Baldwin Republican Executive Committee		Transaction ID: SB29.41004 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address PO Box 399		Amount of Each Disbursement this Period 2000.00
City Montrose State AL Zip Code 36559	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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) ▼
Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name		

Full Name (Last, First, Middle Initial) B. Becky Martin for House		Transaction ID: SB29.41007 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 1103 Hunter Trail		Amount of Each Disbursement this Period 1000.00
City Anderson State SC Zip Code 29651	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name		

Full Name (Last, First, Middle Initial) C. Belknap County GOP		Transaction ID: SB29.41009 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 56 Orchard Street		Amount of Each Disbursement this Period 2000.00
City Laconia State NH Zip Code 03246	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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) ▼
Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name		

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Bill Cotty for House		Transaction ID: SB29.41011 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 8807 C Two Notch Rd.		Amount of Each Disbursement this Period 1000.00
City Columbia State SC Zip Code 29223	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

Full Name (Last, First, Middle Initial) B. Blackwell for Governor		Transaction ID: SB29.41013 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 172 E. State Street, Ste. 203		Amount of Each Disbursement this Period 5000.00
City Columbus State OH Zip Code 43215	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

Full Name (Last, First, Middle Initial) C. Carroll County GOP		Transaction ID: SB29.41017 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address HCR 62, Box 415		Amount of Each Disbursement this Period 2000.00
City Center Harbor State NH Zip Code 03226	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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) ▼	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	8000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Cheshire County GOP		Transaction ID: SB29.41019 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 87 Maple Road		Amount of Each Disbursement this Period 2000.00
City Spofford State NH Zip Code 03462	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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) ▼
Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name		

Full Name (Last, First, Middle Initial) B. Committee to Re-Elect Alan Clemmons		Transaction ID: SB29.41021 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 610 18th Avenue		Amount of Each Disbursement this Period 1000.00
City North Myrtle Beach State SC Zip Code 29577	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name		

Full Name (Last, First, Middle Initial) C. Concord City GOP		Transaction ID: SB29.41023 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 139 N. State Street, Ste. 4		Amount of Each Disbursement this Period 2000.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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) ▼
Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name		

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Coos County GOP		Transaction ID: SB29.41025
Mailing Address 806 Route 3		Date of Disbursement MM / DD / YYYY 05 / 23 / 2006
City North Stratford	State NH	Zip Code 03540
Purpose of Disbursement Cand/Cmte Contributions-NonFed	011 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:		
		Amount of Each Disbursement this Period 2000.00

Full Name (Last, First, Middle Initial) B. Derry GOP		Transaction ID: SB29.41029
Mailing Address 5 Martha Drive		Date of Disbursement MM / DD / YYYY 05 / 23 / 2006
City Derry	State NH	Zip Code 03038
Purpose of Disbursement Cand/Cmte Contributions-NonFed	011 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:		
		Amount of Each Disbursement this Period 2000.00

Full Name (Last, First, Middle Initial) C. Duncan for House Campaign		Transaction ID: SB29.41031
Mailing Address PO Box 721		Date of Disbursement MM / DD / YYYY 05 / 31 / 2006
City Clinton	State SC	Zip Code 29325
Purpose of Disbursement Cand/Cmte Contributions-NonFed	011 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Etowah Republican Executive Committee		Transaction ID: SB29.41033 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 207 Roseland Drive		Amount of Each Disbursement this Period 1000.00
City Rainbow City State AL Zip Code 35906	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name 011 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) ▼

Full Name (Last, First, Middle Initial) B. Flight Options		Transaction ID: SB29.41289 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 26180 Curtiss-Wright Parkway Cuyahoga County Airport		Amount of Each Disbursement this Period 2701.06
City Cleveland State OH Zip Code 44143	Purpose of Disbursement In Kind Contribution See Attached Memo Candidate Name 011 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Steve Lukan for Iowa House		Transaction ID: SB29.41289.0 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 7365 Columbus Street		Amount of Each Disbursement this Period 2701.06
City New Vienna State IA Zip Code 52065	Purpose of Disbursement In Kind Contribution Travel Airfare Candidate Name 011 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	3701.06
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Flight Options		Transaction ID: SB29.41290 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 26180 Curtiss-Wright Parkway Cuyahoga County Airport		Amount of Each Disbursement this Period 2858.71
City Cleveland State OH Zip Code 44143	011 Category/ Type	
Purpose of Disbursement In Kind Contribution See Attached Memo		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ohioans for Ken Blackwell		Transaction ID: SB29.41290.0 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 172 East State Street 6th Floor		Amount of Each Disbursement this Period 2858.71
City Columbus State OH Zip Code 43215	011 Category/ Type	
Purpose of Disbursement In Kind Contribution Travel Airfare		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Flight Options		Transaction ID: SB29.41291 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 26180 Curtiss-Wright Parkway Cuyahoga County Airport		Amount of Each Disbursement this Period 924.67
City Cleveland State OH Zip Code 44143	011 Category/ Type	
Purpose of Disbursement In Kind Contribution-See Attached Memo		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3783.38
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Iowans for Nussle		Transaction ID: SB29.41291.0 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 7701		Amount of Each Disbursement this Period 924.67
City Urbandale State IA Zip Code 50323	[MEMO ITEM]	
Purpose of Disbursement In Kind Contribution Trave Airfae Candidate Name		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Flight Options		Transaction ID: SB29.41292 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 26180 Curtiss-Wright Parkway Cuyahoga County Airport		Amount of Each Disbursement this Period 1385.36
City Cleveland State OH Zip Code 44143	[MEMO ITEM]	
Purpose of Disbursement In Kind Contribution-See Attached Memo Candidate Name		011 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) ▼

Full Name (Last, First, Middle Initial) C. REPUBLICAN PARTY OF IOWA		Transaction ID: SB29.41292.0 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 621 E. Ninth Street		Amount of Each Disbursement this Period 1385.36
City Des Moines State IA Zip Code 50309	[MEMO ITEM]	
Purpose of Disbursement In Kind Contribution- Travel Airfare Candidate Name		011 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) ▶	1385.36
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Friends of Mike Hubbard		Transaction ID: SB29.41037 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address PO Box 950		Amount of Each Disbursement this Period 1000.00
City Auburn State AL Zip Code 36831	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

Full Name (Last, First, Middle Initial) B. Gene Pinson for House		Transaction ID: SB29.41039 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 306 Plantation Drive		Amount of Each Disbursement this Period 1000.00
City Greenwood State SC Zip Code 29649	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

Full Name (Last, First, Middle Initial) C. George Bailey for House		Transaction ID: SB29.41041 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 633		Amount of Each Disbursement this Period 1000.00
City St. George State SC Zip Code 29477	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Grafton County GOP		Transaction ID: SB29.41043 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 170 Hobart Hill Road		Amount of Each Disbursement this Period 2000.00
City Hebron State NH Zip Code 03241	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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) ▼	Category/Type 011

Full Name (Last, First, Middle Initial) B. Hillsborough County GOP		Transaction ID: SB29.41045 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 21 Mooreland Street		Amount of Each Disbursement this Period 2000.00
City Mileford State NH Zip Code 03055	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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) ▼	Category/Type 011

Full Name (Last, First, Middle Initial) C. Houston Republican Executive Committee		Transaction ID: SB29.41047 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 1200 Monte Carlo Drive		Amount of Each Disbursement this Period 500.00
City Dothan State AL Zip Code 36303	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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) ▼	Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Jefferson Republican Executive Committee		Transaction ID: SB29.41053 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 4330 Vestaview Lane		Amount of Each Disbursement this Period 2000.00
City Birmingham State AL Zip Code 35223	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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) ▼
Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name		

Full Name (Last, First, Middle Initial) B. Ken Clark for House		Transaction ID: SB29.41055 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 424 Cedar Creek Road		Amount of Each Disbursement this Period 1000.00
City Swansea State SC Zip Code 29160	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name		

Full Name (Last, First, Middle Initial) C. Kenny Bingham for House		Transaction ID: SB29.41057 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 2025		Amount of Each Disbursement this Period 1000.00
City Cayce State SC Zip Code 29171	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name		

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

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Lee Republican Executive Committee		Transaction ID: SB29.41061 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 313 Carter Street		Amount of Each Disbursement this Period 500.00
City Opelika State AL Zip Code 36801	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name 011 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) ▼

Full Name (Last, First, Middle Initial) B. Madison Republican Executive Committee		Transaction ID: SB29.41065 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 10004 Greenview Drive		Amount of Each Disbursement this Period 1000.00
City Huntsville State AL Zip Code 35803	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name 011 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) ▼

Full Name (Last, First, Middle Initial) C. Manchester City GOP		Transaction ID: SB29.41067 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 103 Bow Street		Amount of Each Disbursement this Period 2000.00
City Manchester State NH Zip Code 03103	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name 011 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) ▶	3500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Merrimack County GOP		Transaction ID: SB29.41069 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 1 Capitol Street		Amount of Each Disbursement this Period 2000.00
City Concord State NH Zip Code 03302	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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:		Category/Type 011

Full Name (Last, First, Middle Initial) B. Mobile Republican Executive Committee		Transaction ID: SB29.41073 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 8250 Reidy Court		Amount of Each Disbursement this Period 2000.00
City Mobile State AL Zip Code 36695	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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:		Category/Type 011

Full Name (Last, First, Middle Initial) C. Montgomery Republican Executive Committee		Transaction ID: SB29.41075 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 3824 Elm Avenue		Amount of Each Disbursement this Period 1000.00
City Montgomery State AL Zip Code 36109	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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:		Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Morgan Republican Executive Committee		Transaction ID: SB29.41077
Mailing Address 3507 Sierra Drive, SW		Date of Disbursement 05 / 01 / 2006
City Decatur	State AL	Zip Code 35603
Purpose of Disbursement Cand/Cmte Contributions-NonFed		Amount of Each Disbursement this Period 1000.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		011 Category/ Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	

Full Name (Last, First, Middle Initial) B. NH Federation of Republican Women		Transaction ID: SB29.41081
Mailing Address 84 Stratham Heights Road		Date of Disbursement 05 / 16 / 2006
City Stratham	State NH	Zip Code 03885
Purpose of Disbursement Cand/Cmte Contributions-NonFed		Amount of Each Disbursement this Period 2500.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		011 Category/ Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	

Full Name (Last, First, Middle Initial) C. Pery for the House		Transaction ID: SB29.41083
Mailing Address PO Box 702		Date of Disbursement 05 / 31 / 2006
City Aiken	State SC	Zip Code 29802
Purpose of Disbursement Cand/Cmte Contributions-NonFed		Amount of Each Disbursement this Period 1000.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		011 Category/ Type
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	

SUBTOTAL of Disbursements This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Portsmouth City GOP		Transaction ID: SB29.41087 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 180 Hartford Drive		Amount of Each Disbursement this Period 2000.00
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name 011 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) ▼

Full Name (Last, First, Middle Initial) B. Ralph Davenport for House		Transaction ID: SB29.41089 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 105 Ashland Terrace		Amount of Each Disbursement this Period 1000.00
City Boiling Springs State SC Zip Code 29316	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name 011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Republican Party of Bernalillo County		Transaction ID: SB29.41093 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 8100 Mountain Road NE		Amount of Each Disbursement this Period 3000.00
City Albuquerque State NM Zip Code 87110	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name 011 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) ▶	6000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Rockingham County GOP		Transaction ID: SB29.41099 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 98 Locke Road		Amount of Each Disbursement this Period 2000.00
City Hampton State NH Zip Code 03842	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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) ▼		Category/Type 011
State: District:		

Full Name (Last, First, Middle Initial) B. South Carolina House GOP Caucus		Transaction ID: SB29.41103 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 21		Amount of Each Disbursement this Period 3500.00
City Columbia State SC Zip Code 29202	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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) ▼		Category/Type 011
State: District:		

Full Name (Last, First, Middle Initial) C. South Carolina Senate GOP Caucus		Transaction ID: SB29.41105 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 12012		Amount of Each Disbursement this Period 3500.00
City Columbia State SC Zip Code 29211-2012	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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) ▼		Category/Type 011
State: District:		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Strafford County GOP		Transaction ID: SB29.41107 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address PO Box 396		Amount of Each Disbursement this Period 2000.00
City Dover State NH Zip Code 03820	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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) ▼	Category/Type 011

Full Name (Last, First, Middle Initial) B. Sullivan County GOP		Transaction ID: SB29.41109 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address Route 2		Amount of Each Disbursement this Period 2000.00
City Newport State NH Zip Code 03773	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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) ▼	Category/Type 011

Full Name (Last, First, Middle Initial) C. Tom Dantzler for House		Transaction ID: SB29.41111 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 208 Middleton Drive		Amount of Each Disbursement this Period 1000.00
City Goose Creek State SC Zip Code 29445	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<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)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Tom Herbkersman for House		Transaction ID: SB29.41113 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 7286		Amount of Each Disbursement this Period 1000.00
City Hilton Head Island State SC Zip Code 29938	Purpose of Disbursement Cand/Cmte Contributions-NonFed Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

Full Name (Last, First, Middle Initial) B. Tuscaloosa Republican Executive Committee		Transaction ID: SB29.41115 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 15232 West Wind Drive		Amount of Each Disbursement this Period 500.00
City Northport State AL Zip Code 35475	Purpose of Disbursement Cand/Cmte Contributions-NonFed 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) ▼	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ►

1500.00

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

79185.06

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 183 / 194	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jodi Rell '06	Nature of Debt (Purpose): Travel Expense
Mailing Address PO Box 370355	
City State ZIP Code West Hartford CT 06137	

Outstanding Balance Beginning This Period	Transaction ID: SD9.35840	
488.35		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	488.35

1) SUBTOTALS This Period This Page (optional).....	488.35
2) TOTALS This Period (last page this line number only).....	488.35
3) TOTALS 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 (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Derby H. Watkins	Nature of Debt (Purpose): Direct Mail Consultant
Mailing Address 3232 Wellington Road	
City State ZIP Code Alexandria VA 22302	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.41223	
Amount Incurred This Period 7000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor IDMI	Nature of Debt (Purpose): Database File Maintenance
Mailing Address 490 White Pond Drive	
City State ZIP Code Akron OH 44320	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.41224	
Amount Incurred This Period 7783.23	Payment This Period 0.00	Outstanding Balance at Close of This Period 7783.23

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Southwest Publishing	Nature of Debt (Purpose): Direct Mail
Mailing Address 2600 NW Topeka Blvd.	
City State ZIP Code Topeka KS 66617	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.41226	
Amount Incurred This Period 12560.22	Payment This Period 0.00	Outstanding Balance at Close of This Period 12560.22

1) SUBTOTALS This Period This Page (optional).....	▶	27343.45
2) TOTALS This Period (last page this line number only).....	▶	27343.45
3) TOTALS 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)	▶	

Image# 26940211130

Form/Schedule: **F3XN**

Transaction ID:

The Committee wishes to disclose the following: 1) No expenditures disclosed on Schedule B, Line 21b were made on behalf of any specifically identified federal candidate. All expenditures made on behalf of a specifically identified federal candidate have been disclosed on Schedule B, Line 23. 11 CFR 104.3 (b) and 106.1 2) No expenditures disclosed on Schedule B, Line 21b were made for public communications (as defined by 11 CFR 100.26) or voter drive activity (under 11 CFR 106.6(b)(2)(i)) containing express advocacy as defined under 11 CFR 100.-22 and thus did not constitute in-kind contributions or independent expenditures.

Form/Schedule: **SB21B** See Schedule B Line 23 Transaction SB23.41247

Transaction ID: **SB21B.41247**

Image# 26940211131

Form/Schedule: **SB21B** See Schedule B Line 23 Transaction SB23.41253
Transaction ID: **SB21B.41248**

Form/Schedule: **SB21B** See Schedule B Line 23 Transaction SB23.41251
Transaction ID: **SB21B.41249**

Image# 26940211132

Form/Schedule: **SB21B** See Schedule B Line 29 Transaction SB23.41278
Transaction ID: **SB21B.41262**

Form/Schedule: **SB21B** See Schedule B Line 29 Transaction SB23.41287
Transaction ID: **SB21B.41272**

Image# 26940211133

Form/Schedule: **SB21B** See Schedule B Line 29 Transaction SB23.41286

Transaction ID: **SB21B.41273**

Form/Schedule: **SB21B** See Schedule B Line 29 Transaction SB23.41288

Transaction ID: **SB21B.41274**

Image# 26940211134

Form/Schedule: **SB21B** See Schedule B Line 23 Transaction SB23.41233

Transaction ID: **SB21B.41232**

Form/Schedule: **SB21B** See Schedule B Line 23 Transaction SB23.41230

Transaction ID: **SB21B.41242**

Image# 26940211135

Form/Schedule: **SB21B** See Schedule B Line 29 Transaction SB23.41289
Transaction ID: **SB21B.41257**

Form/Schedule: **SB21B** See Schedule B Line 29 Transaction SB23.41290
Transaction ID: **SB21B.41266**

Image# 26940211136

Form/Schedule: **SB21B** See Schedule B Line 29 Transaction SB23.41291
Transaction ID: **SB21B.41267**

Form/Schedule: **SB21B** See Schedule B Line 29 Transaction SB23.41292
Transaction ID: **SB21B.41270**

Image# 26940211137

Form/Schedule: **SB29** Allocation for Lodging at Comfort Inn Dyersville 1517 16th Street SW Rochester MN 55902 paid to American Expre-
Transaction ID: **SB29.41278.0** on 5/4/06

Form/Schedule: **SB29** Allocation for Lodging at Hancock Inn 33 Main Street Hancock NH 03449 paid to American Express on 5/4/06
Transaction ID: **SB29.41286.0**

Image# 26940211138

Form/Schedule: **SB29** Allocation for Lodging at Hancock Inn 33 Main Street Hancock NH 03449 paid to American Express on 5/4/06
Transaction ID: **SB29.41287.0**

Form/Schedule: **SB29** Seeking Refund
Transaction ID: **SB29.41288**

Image# 26940211139

Form/Schedule: **SB29** Allocation for Lodging at Renaissance Hotels Boca 2000 NW 19th Street Boca Raton FL 33431 paid to American Exp-
Transaction ID: **SB29.41288.0** rgs on 5/4/06

Form/Schedule: **SD9** Travel expenditures paid to American Express on April 10, 2006 (See Schedule B Line 21B Transaction ID 35732:
Transaction ID: **SD9.35840** 1) US Airways \$222.15, 2) Carey Car 266.20
