

REPORT OF RECEIPTS AND DISBURSEMENTS
 BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1 / 320

1. NAME OF COMMITTEE (in full) Friends of Fred Thompson, Inc.		2. IDENTIFICATION NUMBER C00438507
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1130 8th Avenue South		
CITY, STATE, and ZIP CODE Nashville TN 37203		3. IS THIS REPORT FOR : <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General

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

<input type="checkbox"/> April 15 Quarterly Report <input type="checkbox"/> July 15 Quarterly Report <input type="checkbox"/> October 15 Quarterly Report <input type="checkbox"/> January 31 Year End Report	Monthly Report Due On: <input type="checkbox"/> February 20 <input type="checkbox"/> June 20 <input type="checkbox"/> October 20 <input checked="" type="checkbox"/> March 20 <input type="checkbox"/> July 20 <input type="checkbox"/> November 20 <input type="checkbox"/> April 20 <input type="checkbox"/> August 20 <input type="checkbox"/> December 20 <input type="checkbox"/> May 20 <input type="checkbox"/> September 20 <input type="checkbox"/> January 31
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Twelfth day report preceding Primary _____
 (Type of Election)
 election on 11/04/2008 in the State of _____

Thirtieth day report following the General Election on _____
 on _____

IS THIS REPORT AN AMENDMENT YES NO

5. COVERING PERIOD	FROM 02/01/2008	THROUGH 02/29/2008
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SUMMARY	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	1700588.58
	7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	63829.42
	8. SUBTOTAL (Lines 6 and 7)	1764418.00
	9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	1210206.08
	10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	554211.92
	11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	0.00
	12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	136802.31
	13. EXPENDITURES SUBJECT TO LIMITATION	0.00

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES	14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	23407626.62
	15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2)	22901777.51

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 Lin Howard	Date 03/20/2008
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Signature of Treasurer

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

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

FEC FORM 3P
(01/2001)

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

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(PAGE 2, FEC FORM 3P)

Name of committee (in full) Friends of Fred Thompson, Inc.		Report Covering the Period From: 02/01/2008 To: 02/29/2008	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00	
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	353.54	23618928.12	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees	4000.00	180355.02	
(d) The Candidate	0.00	0.00	
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))	4353.54	23799283.14	
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00	
(b) Other Loans	0.00	0.00	
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	0.00	
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	56194.01	106200.64	
(b) Fundraising	0.00	0.00	
(c) Legal and Accounting	0.00	0.00	
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))	56194.01	106200.64	
21. OTHER RECEIPTS (Dividend, Interest, etc.)	3281.87	48462.81	
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	63829.42	23953946.59	
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES	1014248.56	23007978.15	
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00	
25. FUNDRAISING DISBURSEMENTS	0.00	0.00	
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	0.00	0.00	
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	0.00	0.00	
(b) Other Repayments	0.00	0.00	
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	0.00	0.00	
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	191157.52	385856.52	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees	4800.00	5800.00	
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	195957.52	391656.52	
29. OTHER DISBURSEMENTS	0.00	100.00	
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	1210206.08	23399734.67	
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00		

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE 3 / 320
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

1. NAME OF COMMITTEE (in full)

Friends of Fred Thompson, Inc.

ADDRESS (number and street)

1130 8th Avenue South

CITY, STATE, and ZIP CODE

Nashville

TN

37203

2. IDENTIFICATION NUMBER

C00438507

ALLOCATION BY STATE

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

SCHEDULE D (FEC Form 3P)
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
 Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ALLISON BARRETT	Nature of Debt (Purpose): TRAVEL
Mailing Address 1760 OLD MEADOW RD STE 350	
City State ZIP Code MCLEAN VA 22102	

Outstanding Balance Beginning This Period 859.90	Transaction ID: SD29	
Amount Incurred This Period 0.00	Payment This Period 859.90	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor TERRELL BENHAM	Nature of Debt (Purpose): TRAVEL
Mailing Address 2601 GARDEN BEND	
City State ZIP Code BENTON AR 72015	

Outstanding Balance Beginning This Period 10831.64	Transaction ID: SD30	
Amount Incurred This Period 0.00	Payment This Period 10831.64	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor SUZIE BROWNING	Nature of Debt (Purpose): TRAVEL
Mailing Address PO BOX 128349	
City State ZIP Code NASHVILLE TN 37212	

Outstanding Balance Beginning This Period 1778.04	Transaction ID: SD31	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1778.04

1) SUBTOTALS This Period This Page (optional).....	▶	1778.04
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3P)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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11
 12

NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor JOSEPH CELLA	Nature of Debt (Purpose): TRAVEL
Mailing Address 1760 OLD MEADOW RD STE 350	
City State ZIP Code MCLEAN VA 22102	

Outstanding Balance Beginning This Period 897.88	Transaction ID: SD33	
Amount Incurred This Period 0.00	Payment This Period 897.88	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CHRIS FINNIGAN	Nature of Debt (Purpose): TRAVEL
Mailing Address 1760 OLD MEADOW RD STE 350	
City State ZIP Code MCLEAN VA 22102	

Outstanding Balance Beginning This Period 1334.18	Transaction ID: SD38	
Amount Incurred This Period 0.00	Payment This Period 1334.18	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MIKE GASKE	Nature of Debt (Purpose): TRAVEL
Mailing Address 1760 OLD MEADOW RD STE 350	
City State ZIP Code MCLEAN VA 22102	

Outstanding Balance Beginning This Period 1135.57	Transaction ID: SD39	
Amount Incurred This Period 0.00	Payment This Period 1135.57	Outstanding Balance at Close of This Period 0.00

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

SCHEDULE D (FEC Form 3P)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor KATHERINE GORDON			Nature of Debt (Purpose): TRAVEL
Mailing Address 2002 GREENWOOD DR			
City TALLAHASSEE	State FL	ZIP Code 32303	

Outstanding Balance Beginning This Period 602.32		Transaction ID: SD40	
Amount Incurred This Period 0.00	Payment This Period 602.32	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CLAYTON LAFORGE			Nature of Debt (Purpose): TRAVEL
Mailing Address 1760 OLD MEADOW RD STE 350			
City MCLEAN	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period 1308.18		Transaction ID: SD43	
Amount Incurred This Period 0.00	Payment This Period 1308.18	Outstanding Balance at Close of This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor STEPHANIE MCNEES			Nature of Debt (Purpose): TRAVEL
Mailing Address 1760 OLD MEADOW RD STE 350			
City MCLEAN	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period 1025.78		Transaction ID: SD44	
Amount Incurred This Period 0.00	Payment This Period 585.00	Outstanding Balance at Close of This Period 440.78	

1) SUBTOTALS This Period This Page (optional).....	▶ 440.78
2) TOTALS This Period (last page this line number only).....	▶
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶

SCHEDULE D (FEC Form 3P)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor TIMOTHY NUSSBAUM	Nature of Debt (Purpose): TRAVEL
Mailing Address 1760 OLD MEADOW RD STE 350	
City State ZIP Code MCLEAN VA 22102	

Outstanding Balance Beginning This Period 887.04	Transaction ID: SD46	
Amount Incurred This Period 0.00	Payment This Period 482.04	Outstanding Balance at Close of This Period 405.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THOMAS SMITH	Nature of Debt (Purpose): FINANCE CONSULTING
Mailing Address PO BOX 128349	
City State ZIP Code NASHVILLE TN 37212	

Outstanding Balance Beginning This Period 5900.00	Transaction ID: SD50	
Amount Incurred This Period 0.00	Payment This Period 5900.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ROGER WHYTE	Nature of Debt (Purpose): TRAVEL
Mailing Address 1760 OLD MEADOW RD STE 350	
City State ZIP Code MCLEAN VA 22102	

Outstanding Balance Beginning This Period 1563.69	Transaction ID: SD53	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1563.69

1) SUBTOTALS This Period This Page (optional).....	1968.69
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3P)

DEBTS AND OBLIGATIONS

Excluding Loans

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ABERNATHY STRATEGIES			Nature of Debt (Purpose): POLITICAL STRATEGY CONSULTING
Mailing Address PO BOX 11511			
City CHARLESTON	State WV	ZIP Code 25339	

Outstanding Balance Beginning This Period 5000.00		Transaction ID: SD27	
Amount Incurred This Period 0.00	Payment This Period 5000.00	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor AJL INTERNATIONAL			Nature of Debt (Purpose): TRANSPORTATION SERVICES
Mailing Address 2553 Gravel Dr			
City FT WORTH	State TX	ZIP Code 76118	

Outstanding Balance Beginning This Period 608.11		Transaction ID: SD28	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 608.11	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAC DIRECT MARKETING SVC			Nature of Debt (Purpose): PRINTING
Mailing Address 99 RAY RD			
City BALTIMORE	State MD	ZIP Code 21227	

Outstanding Balance Beginning This Period 7923.46		Transaction ID: SD32	
Amount Incurred This Period 0.00	Payment This Period 7923.46	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	608.11
2) TOTALS This Period (last page this line number only).....	[]
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	[]
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	[]

SCHEDULE D (FEC Form 3P)

DEBTS AND OBLIGATIONS

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor DIRECT IMPRESSIONS			Nature of Debt (Purpose): PRINTING
Mailing Address 2100 TOMLYNN ST			
City RICHMOND	State VA	ZIP Code 22320	

Outstanding Balance Beginning This Period		Transaction ID: SD34	
2716.50			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	2716.50	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor DUPLI ENVELOPES & GRAPHICS			Nature of Debt (Purpose): PRINTING
Mailing Address PO BOX 11500			
City SYRACUSE	State NY	ZIP Code 13218	

Outstanding Balance Beginning This Period		Transaction ID: SD35	
4992.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	4992.00	0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor EATON RIVER STRATEGIES			Nature of Debt (Purpose): POLITICAL STRATEGY CONSULTING/TVL
Mailing Address 28 EDWARD RD			
City WEST NEWTON	State MA	ZIP Code 02465	

Outstanding Balance Beginning This Period		Transaction ID: SD36	
9455.12			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	9455.12	0.00	

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

SCHEDULE D (FEC Form 3P)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ELECTION CONNECTIONS INC			Nature of Debt (Purpose): MESSAGE PHONE CALLS
Mailing Address PO BOX 10866			
City TALLAHASSEE	State FL	ZIP Code 32302	

Outstanding Balance Beginning This Period <input type="text" value="207052.11"/>		Transaction ID: SD3	
Amount Incurred This Period <input type="text" value="21340.47"/>	Payment This Period <input type="text" value="228392.58"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ESI			Nature of Debt (Purpose): STAGING/TRAVEL
Mailing Address 211 N UNION ST STE 220			
City ALEXANDRIA	State VA	ZIP Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="4671.45"/>		Transaction ID: SD37	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4671.45"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor GLOBAL CROSSING CONFERENCING			Nature of Debt (Purpose): PHONE SVC
Mailing Address PO BOX 790407			
City ST LOUIS	State MO	ZIP Code 63179	

Outstanding Balance Beginning This Period <input type="text" value="42953.13"/>		Transaction ID: SD7	
Amount Incurred This Period <input type="text" value="13566.12"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="56519.25"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="61190.70"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3P)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor HOSTMYSITE.COM			Nature of Debt (Purpose): WEB SVC
Mailing Address 350 PENCADER DR STE B			
City NEWARK	State DE	ZIP Code 19702	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD57	
Amount Incurred This Period <input type="text" value="14983.02"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="14983.02"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ILLUMEN			Nature of Debt (Purpose): WEB SVC
Mailing Address 1000 POTOMAC ST NW STE 430			
City WASHINGTON	State DC	ZIP Code 20007	

Outstanding Balance Beginning This Period <input type="text" value="1250.00"/>		Transaction ID: SD41	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="416.67"/>	Outstanding Balance at Close of This Period <input type="text" value="833.33"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor KEYSpan ENERGY			Nature of Debt (Purpose): UTILITIES
Mailing Address PO BOX 4300			
City WOBURN	State MA	ZIP Code 01888	

Outstanding Balance Beginning This Period <input type="text" value="842.29"/>		Transaction ID: SD42	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="604.98"/>	Outstanding Balance at Close of This Period <input type="text" value="237.31"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="16053.66"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3P)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEXTEL			Nature of Debt (Purpose): TELEPHONE SERVICE
Mailing Address PO BOX 4181			
City CAROL STREAM	State IL	ZIP Code 60197	

Outstanding Balance Beginning This Period <input type="text" value="24495.67"/>		Transaction ID: SD45	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="24495.67"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PITNEY BOWES			Nature of Debt (Purpose): EQUIPMENT RENTAL
Mailing Address PO BOX 856390			
City LOUISVILLE	State KY	ZIP Code 40285	

Outstanding Balance Beginning This Period <input type="text" value="1152.00"/>		Transaction ID: SD47	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1152.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PM DIRECT MARKETING			Nature of Debt (Purpose): PRINTING
Mailing Address 11250 WAPLES MILL RD STE 310			
City FAIRFAX	State VA	ZIP Code 22030	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD55	
Amount Incurred This Period <input type="text" value="20000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="20000.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="44495.67"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3P)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor POTTERS BAKERY & CAFE			Nature of Debt (Purpose): CATERING
Mailing Address 13412 HARPER PL			
City FONTANA	State CA	ZIP Code 92336	

Outstanding Balance Beginning This Period 1556.98		Transaction ID: SD48	
Amount Incurred This Period 0.00	Payment This Period 1556.98	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PRESS ASSOCIATION			Nature of Debt (Purpose): TRAVEL
Mailing Address PO BOX 414243			
City BOSTON	State MA	ZIP Code 02241	

Outstanding Balance Beginning This Period 7600.00		Transaction ID: SD49	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7600.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCHERMERHORN SYMPHONY CENTER			Nature of Debt (Purpose): FACILITY RENTAL
Mailing Address ONE SYMPHONY PLACE			
City NASHVILLE	State TN	ZIP Code 37201	

Outstanding Balance Beginning This Period 12793.89		Transaction ID: SD18	
Amount Incurred This Period 0.00	Payment This Period 12793.89	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	7600.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3P)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor STARBOARD COMMUNICATIONS			Nature of Debt (Purpose): PRINTING
Mailing Address 1043 BARR RD			
City LEXINGTON	State SC	ZIP Code 28072	

Outstanding Balance Beginning This Period 570.00		Transaction ID: SD51	
Amount Incurred This Period 0.00	Payment This Period 570.00	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor STREAMLOGICS INC			Nature of Debt (Purpose): WEB SVC
Mailing Address 555 RICHMOND ST W STE 400			
City TORONTO	State FF	ZIP Code 99999	

Outstanding Balance Beginning This Period 900.00		Transaction ID: SD22	
Amount Incurred This Period 0.00	Payment This Period 900.00	Outstanding Balance at Close of This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor THOMAS GRAPHICS			Nature of Debt (Purpose): PRINTING
Mailing Address PO BOX 142226			
City AUSTIN	State TX	ZIP Code 78714	

Outstanding Balance Beginning This Period 9953.59		Transaction ID: SD52	
Amount Incurred This Period 11248.06	Payment This Period 21201.65	Outstanding Balance at Close of This Period 0.00	

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

SCHEDULE D (FEC Form 3P)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

11
 12

NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALLEY NET TECH			Nature of Debt (Purpose): WEB SVC
Mailing Address PO BOX 51498			
City PHOENIX	State AZ	ZIP Code 85076	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD56	
Amount Incurred This Period <input type="text" value="2666.66"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2666.66"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor WARFIELD & WALSH INC			Nature of Debt (Purpose): LIST MANAGEMENT SVC
Mailing Address 601 S WASHINGTON STREET			
City ALEXANDRIA	State VA	ZIP Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="3123.20"/>		Transaction ID: SD26	
Amount Incurred This Period <input type="text" value="5000.00"/>	Payment This Period <input type="text" value="8123.20"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor YUMA SOLUTIONS INC			Nature of Debt (Purpose): EQUIPMENT RENTAL
Mailing Address 1876 ELDER CT STE B			
City TALLAHASSEE	State FL	ZIP Code 32308	

Outstanding Balance Beginning This Period <input type="text" value="9561.94"/>		Transaction ID: SD54	
Amount Incurred This Period <input type="text" value="25000.00"/>	Payment This Period <input type="text" value="34561.94"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="2666.66"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="136802.31"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="136802.31"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. MARSHALL G. ALLAN		Date of Receipt
Mailing Address 17 SOMERSET STREET 3RD FLOOR		<input type="checkbox"/> M <input type="checkbox"/> M / <input type="checkbox"/> D <input type="checkbox"/> D / <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code NEW YORK NY 54007		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		-1000.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		CONTRIBUTION [MEMO ITEM] REFUND
Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00		Transaction ID: SA17.249171

B. Full Name (Last, First, Middle Initial) MS. CAROLYN E. AMIOT		Date of Receipt
Mailing Address 106 BONNAVENTURE PLACE		<input type="checkbox"/> M <input type="checkbox"/> M / <input type="checkbox"/> D <input type="checkbox"/> D / <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code NASHVILLE TN 37205-4440		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		-2300.00
Name of Employer Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		CONTRIBUTION [MEMO ITEM] REFUND
Occupation HOMEMAKER Election Cycle-to-Date ▼ 2300.00		Transaction ID: SA17.249192

C. Full Name (Last, First, Middle Initial) TANI D. AUSTIN		Date of Receipt
Mailing Address 5334 HARBOR TOWN DRIVE		<input type="checkbox"/> M <input type="checkbox"/> M / <input type="checkbox"/> D <input type="checkbox"/> D / <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code DALLAS TX 75287-7319		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		-2300.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		CONTRIBUTION [MEMO ITEM] REFUND
Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00		Transaction ID: SA17.249104

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 320				
	<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a	<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. MIKE S. AZER		Date of Receipt
Mailing Address 1 TRACY DRIVE		M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 0 8
City State Zip Code MANALAPAN NJ 07726-2838	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee.		CONTRIBUTION
Name of Employer I.T.T.	Occupation CONSULTANT	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 255.00	
		Transaction ID: SA17.248925

B. Full Name (Last, First, Middle Initial) BILL BANDY		Date of Receipt
Mailing Address 632 CABERNET CT		M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 8
City State Zip Code MC KINNEY TX 75069-1597	Amount of Each Receipt this Period -2200.00	
FEC ID number of contributing federal political committee.		CONTRIBUTION CHARGED BACK
Name of Employer LUBE CENTER MGT.	Occupation SELF EMPLOYED	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	
		Transaction ID: SA17.248972

C. Full Name (Last, First, Middle Initial) MR. RONALD P. BARNES		Date of Receipt
Mailing Address 8212 BELL MILL ROAD		M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 8
City State Zip Code OOLTEWAH TN 37363-8896	Amount of Each Receipt this Period -1000.00	
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMORITUM] REFUND
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	
		Transaction ID: SA17.249005

SUBTOTAL of Receipts This Page (optional) ▶	-2175.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 18 / 320	
	(check only one)			
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a	<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c
				<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MRS. JANET BECHTEL		Date of Receipt	
	Mailing Address 10216 MEADOW RIDGES LANE		M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8	
	City	State	Zip Code	Amount of Each Receipt this Period 500.00
	KNOXVILLE	TN	37922-7226	
	FEC ID number of contributing federal political committee.		CONTRIBUTION	
Name of Employer U.S. BANK, NOVA INFORMATION SYSTEMS		Occupation MANAGEMENT		Transaction ID: SA17.248878
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00			

B.	Full Name (Last, First, Middle Initial) MR. KENNETH BOLEN		Date of Receipt	
	Mailing Address 152 JEFFERSON DRIVE		M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
	City	State	Zip Code	Amount of Each Receipt this Period -2300.00
	BEAVER	WV	25813-9660	
	FEC ID number of contributing federal political committee.		CONTRIBUTION	
Name of Employer POWELL CONSTRUCTION		Occupation ENGINEER		Transaction ID: SA17.249152
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		[MEMO ITEM] REFUND	

C.	Full Name (Last, First, Middle Initial) MR. JOHN D. BOLSTAD		Date of Receipt	
	Mailing Address 1542 IRVINE AVENUE		M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
	City	State	Zip Code	Amount of Each Receipt this Period -200.00
	NEWPORT BEACH	CA	92660-4411	
	FEC ID number of contributing federal political committee.		CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS		Transaction ID: SA17.249117
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		[MEMO ITEM] REFUND	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MR. GUY BOSTICK	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 1300 W. LAKE OTIS DRIVE SE	Amount of Each Receipt this Period -100.00
	City State Zip Code WINTER HAVEN FL 33880-4234	
	FEC ID number of contributing federal political committee.	CONTRIBUTION [MEMO ITEM] REFUND
	Name of Employer Occupation COMCAR INDUSTRIES DIRECTOR OF SALES	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	
		Transaction ID: SA17.249144

B.	Full Name (Last, First, Middle Initial) BONNIE BOUSMAN	Date of Receipt MM / DD / YYYY 02 / 13 / 2008
	Mailing Address 9331 DEWEY DR.	Amount of Each Receipt this Period -600.00
	City State Zip Code GARDEN GROVE CA 92841-1159	
	FEC ID number of contributing federal political committee.	CONTRIBUTION [MEMO ITEM] REFUND
	Name of Employer Occupation FRIENDS COMMUNITY CHURCH PASTOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	
		Transaction ID: SA17.248997

C.	Full Name (Last, First, Middle Initial) MS. FUMIE BOYCE	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 4532 INTELCO LOOP SE APARTMENT 354	Amount of Each Receipt this Period -1400.00
	City State Zip Code LACEY WA 98503-5583	
	FEC ID number of contributing federal political committee.	CONTRIBUTION [MEMO ITEM] REFUND
	Name of Employer Occupation RETIRED	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	
		Transaction ID: SA17.249125

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 20 / 320	
	(check only one)			
<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c
				<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MS. JANE E. BRAUER		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8	
Mailing Address 1355 CHURCH STREET		Amount of Each Receipt this Period 50.00	
City ELM GROVE	State WI	Zip Code 53122-1713	
FEC ID number of contributing federal political committee.		CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 250.00		
		Transaction ID: SA17.248887	

B. Full Name (Last, First, Middle Initial) MR. R. W. BROWNLEE		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 0 8	
Mailing Address 160 SHOREHAM ROAD		Amount of Each Receipt this Period -300.00	
City SPARTANBURG	State SC	Zip Code 29307-3853	
FEC ID number of contributing federal political committee.		CONTRIBUTION CHECK RETURNED BY BANK	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 0.00		
		Transaction ID: SA17.248969	

C. Full Name (Last, First, Middle Initial) MR. RALPH BUCKNER, JR.		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 8	
Mailing Address 400 ANATOLE LANE N.E		Amount of Each Receipt this Period -2300.00	
City CLEVELAND	State TN	Zip Code 37312	
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00		
		Transaction ID: SA17.249008	

SUBTOTAL of Receipts This Page (optional) ▶	-250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MRS. SUE ANN BURCHETTE	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 28060 BRICK ROW DRIVE	Amount of Each Receipt this Period -2300.00
	City State Zip Code OXFORD MD 21654-1702	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2300.00	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249132

B.	Full Name (Last, First, Middle Initial) MR. WILLIAM BURCHETTE, ESQ.	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 28060 BRICK ROW DRIVE	Amount of Each Receipt this Period -2300.00
	City State Zip Code OXFORD MD 21654-1702	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2300.00	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249123

C.	Full Name (Last, First, Middle Initial) MRS. REBA BURGESS	Date of Receipt MM / DD / YYYY 02 / 03 / 2008
	Mailing Address 4426 WARSCHUN ROAD	Amount of Each Receipt this Period 100.00
	City State Zip Code AUBREY TX 76227-4101	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00	CONTRIBUTION [MEMO ITEM] REATTRIBUTION FROM SPOUSE Transaction ID: SA17.248943

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. LOUIS R. CAPPELLI		Date of Receipt
Mailing Address 115 STEVENS AVENUE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code VALHALLA NY 10595-1252	Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249154
Name of Employer CAPPELLI ENTERPRISES INC.	Occupation PRESIDENT	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

B. Full Name (Last, First, Middle Initial) MR. LOUIS L. CERUZZI, JR.		Date of Receipt
Mailing Address 1099 PEQUOT AVENUE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code SOUTHPORT CT 06890-1421	Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249161
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

C. Full Name (Last, First, Middle Initial) MRS. TERESE M. CERUZZI		Date of Receipt
Mailing Address 1099 PEQUOT AVENUE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code SOUTHPORT CT 06890-1421	Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249162
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 0.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) WILLIAM CHILDS		Date of Receipt																				
Mailing Address 3538 EASTWIND STREET		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code INDIANAPOLIS IN 46227-8047		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		-249.00																				
Name of Employer Occupation Occupation RETIRED		CONTRIBUTION																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] REFUND																				
Election Cycle-to-Date ▼ 2300.00		Transaction ID: SA17.249108																				

B. Full Name (Last, First, Middle Initial) KAREN CLARK		Date of Receipt																				
Mailing Address 3515 WATER WALK DRIVE		<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>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	3		2	0	0	8													
City State Zip Code WYOMING MI 49418-9248		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		-50.00																				
Name of Employer Occupation GREEN ENERGY LIVE, INC ENTREPRENEUR		CONTRIBUTION																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] REFUND																				
Election Cycle-to-Date ▼ 2300.00		Transaction ID: SA17.248996																				

C. Full Name (Last, First, Middle Initial) MRS. FRAN L. CLIPPARD		Date of Receipt																				
Mailing Address 2315 ABBOTT MARTIN ROAD		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code NASHVILLE TN 37215-1919		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		0.50																				
Name of Employer Occupation CENTER FOR LIVING AND LEARNING EXECUTIVE DIRECTOR		CONTRIBUTION																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] REFUND																				
Election Cycle-to-Date ▼ 2300.00		Transaction ID: SA17.249172																				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. HAROLD COKER		Date of Receipt
Mailing Address 6730 STANDIFER GAP ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code CHATTANOOGA TN 37421-1408	Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		
Name of Employer Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation RETIRED Election Cycle-to-Date ▼ 2300.00	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249082

B. Full Name (Last, First, Middle Initial) MR. WILLIAM T. COLEMAN, JR.		Date of Receipt
Mailing Address 1286 BALLANTRAE FARM DRIVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code MCLEAN VA 22101-3026	Amount of Each Receipt this Period -700.00	
FEC ID number of contributing federal political committee.		
Name of Employer O'MELVENY & MYERS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation ATTORNEY Election Cycle-to-Date ▼ 2300.00	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249181

C. Full Name (Last, First, Middle Initial) MS. SONJA K. COOPER		Date of Receipt
Mailing Address 1401 BULLARD ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code POWDER SPRINGS GA 30127-1127	Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249156

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. JACK L. COPELAND		Date of Receipt
Mailing Address 105 E. BEDFORD STREET		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 02 / 29 / 2008
City State Zip Code DIMMITT TX 79027-2623	Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		
Name of Employer SELF-EMPLOYED	Occupation OIL & GAS CONSULTANT	CONTRIBUTION [MEMO ITEM] REFUND
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249084

B. Full Name (Last, First, Middle Initial) MR. J. M. COX, JR.		Date of Receipt
Mailing Address P.O. BOX 3891		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 02 / 29 / 2008
City State Zip Code JOHNSON CITY TN 37602-3891	Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION [MEMO ITEM] REFUND
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249150

C. Full Name (Last, First, Middle Initial) MR. DANIEL F. CREMINS		Date of Receipt
Mailing Address 77 MOUNTAIN AVENUE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 02 / 29 / 2008
City State Zip Code LARCHMONT NY 10538-1936	Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		
Name of Employer H.J. KALIKOW	Occupation EXECUTIVE	CONTRIBUTION [MEMO ITEM] REFUND
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249188

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MRS. MARGARET CREMINS		Date of Receipt																				
Mailing Address 77 MOUNTAIN AVENUE		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code LARCHMONT NY 10538-1936	Amount of Each Receipt this Period -2300.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249187																				
Name of Employer Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation HOMEMAKER Election Cycle-to-Date ▼ 2300.00																					

B. Full Name (Last, First, Middle Initial) MR. LIONEL E. CROSS		Date of Receipt																				
Mailing Address P.O. BOX 307		<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>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	1		2	0	0	8													
City State Zip Code WHEATLAND CA 95692-0307	Amount of Each Receipt this Period 50.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION Transaction ID: SA17.249018																				
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation RETIRED Election Cycle-to-Date ▼ 400.00																					

C. Full Name (Last, First, Middle Initial) MR. CHIP CRUNK		Date of Receipt																				
Mailing Address 1225 BEECH HILL ROAD		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code BRENTWOOD TN 37027-5531	Amount of Each Receipt this Period -2300.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249195																				
Name of Employer R.J. YOUNG COMPANY Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation SALES Election Cycle-to-Date ▼ 2300.00																					

SUBTOTAL of Receipts This Page (optional) ▶	50.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) DR. JEFFREY A. DAVIDSON		Date of Receipt																				
Mailing Address 272 S. WOODMONT DRIVE		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code DOWNTOWN PA 19335-5317	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.		-50.00																				
Name of Employer Occupation ACI RESEARCHER	CONTRIBUTION																					
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	[MEMO ITEM] REFUND																				
Transaction ID: SA17.249145																						

B. Full Name (Last, First, Middle Initial) MR. RICHARD A. DEAN		Date of Receipt																				
Mailing Address 13631 IBBETSON		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code BELLFLOWER CA 90706-2517	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.		-1300.00																				
Name of Employer Occupation T.H.X. L.T.D. ENGINEER	CONTRIBUTION																					
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	[MEMO ITEM] REFUND																				
Transaction ID: SA17.249085																						

C. Full Name (Last, First, Middle Initial) MRS. CAROLE DOWD		Date of Receipt																				
Mailing Address 1529 CROWELL ROAD		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code VIENNA VA 22182-1514	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.		-2300.00																				
Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION																					
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	[MEMO ITEM] REFUND																				
Transaction ID: SA17.249180																						

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. JOHN M. DOWD		Date of Receipt
Mailing Address 1529 CROWELL ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> 0 <input type="text"/> 2 / <input type="text"/> 2 <input type="text"/> 9 / <input type="text"/> 2 <input type="text"/> 0 <input type="text"/> 8
City State Zip Code VIENNA VA 22182-1514	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.		<input type="text"/> -2300.00
Name of Employer PARTNER, AKIN, GUMP STRAUSS HAUER & FE	Occupation LAWYER	CONTRIBUTION
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text"/> 2300.00	[MEMO ITEM] REFUND
		Transaction ID: SA17.249179

B. Full Name (Last, First, Middle Initial) MR. STEPHEN E. DYER		Date of Receipt
Mailing Address 15871 DUQUESNE CIRCLE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> 0 <input type="text"/> 2 / <input type="text"/> 2 <input type="text"/> 9 / <input type="text"/> 2 <input type="text"/> 0 <input type="text"/> 8
City State Zip Code BRIGHTON CO 80603-3856	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.		<input type="text"/> -500.00
Name of Employer UNIVAIR AIRCRAFT CORPORATION	Occupation CHAIRMAN OF BOARD	CONTRIBUTION
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text"/> 2300.00	[MEMO ITEM] REFUND
		Transaction ID: SA17.249111

C. Full Name (Last, First, Middle Initial) MR. EDMUND WILLIAM EVANS		Date of Receipt
Mailing Address 16186 KELLOGG ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> 0 <input type="text"/> 2 / <input type="text"/> 2 <input type="text"/> 9 / <input type="text"/> 2 <input type="text"/> 0 <input type="text"/> 8
City State Zip Code BOWLING GREEN OH 43402-9780	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.		<input type="text"/> -200.00
Name of Employer	Occupation RETIRED	CONTRIBUTION
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text"/> 2300.00	[MEMO ITEM] REFUND
		Transaction ID: SA17.249149

SUBTOTAL of Receipts This Page (optional) ▶	<input type="text"/> 0.00
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MRS. WILDA D. FARBER	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 200 DOMINICAN DRIVE APARTMENT 1308 City State Zip Code MADISON MS 39110-8630	Amount of Each Receipt this Period -200.00
FEC ID number of contributing federal political committee.		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00
		CONTRIBUTION MEMORITEM REFUND Transaction ID: SA17.249103

B.	Full Name (Last, First, Middle Initial) MR. NIJAD I. FARES	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address P.O. BOX 130688 City State Zip Code HOUSTON TX 77219-0688	Amount of Each Receipt this Period -2300.00
FEC ID number of contributing federal political committee.		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00
		CONTRIBUTION MEMORITEM REFUND Transaction ID: SA17.249158

C.	Full Name (Last, First, Middle Initial) MRS. ZEINA FARES	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address P.O. BOX 130688 City State Zip Code HOUSTON TX 77219-0688	Amount of Each Receipt this Period -2300.00
FEC ID number of contributing federal political committee.		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00
		CONTRIBUTION MEMORITEM REFUND Transaction ID: SA17.249157

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 30 / 320	
	(check only one)			
<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c
				<input type="checkbox"/> 18
				<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MRS. CANDY C. FAZAKERLEY		Date of Receipt		
	Mailing Address P.O. BOX 2070		M M / D D / Y Y Y Y Y 0 2 / 0 5 / 2 0 0 8		
	City	State	Zip Code	Amount of Each Receipt this Period	
	MIDDLEBURG	VA	20118-2070	1350.00	
	FEC ID number of contributing federal political committee.				
Name of Employer C.G. INVESTMENTS, INC.		Occupation REAL ESTATE DEVELOPER		CONTRIBUTION	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2300.00		IN-KIND- VALET SERVICES REFUNDED \$1,350.00 ON 02/- 13/2008	
Transaction ID: SA17.249002					

B.	Full Name (Last, First, Middle Initial) PATRICK D. FITZGERALD		Date of Receipt		
	Mailing Address 1718 WESTEND PL		M M / D D / Y Y Y Y Y 0 2 / 2 9 / 2 0 0 8		
	City	State	Zip Code	Amount of Each Receipt this Period	
	ROUND ROCK	TX	78681-2252	-2300.00	
	FEC ID number of contributing federal political committee.				
Name of Employer		Occupation RETIRED		CONTRIBUTION	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2300.00		[MEMO ITEM] REFUND	
Transaction ID: SA17.249112					

C.	Full Name (Last, First, Middle Initial) MR. MAX L. FULLER		Date of Receipt		
	Mailing Address 8569 BALATA DRIVE		M M / D D / Y Y Y Y Y 0 2 / 1 3 / 2 0 0 8		
	City	State	Zip Code	Amount of Each Receipt this Period	
	OOLTEWAH	TN	37363-6286	-2300.00	
	FEC ID number of contributing federal political committee.				
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2300.00		[MEMO ITEM] REFUND	
Transaction ID: SA17.249009					

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. JAMES E. GABLE		Date of Receipt
Mailing Address P.O. BOX 390		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code CHATHAM MA 02633-0390	Amount of Each Receipt this Period -1700.00	
FEC ID number of contributing federal political committee.		
Name of Employer GABLE BUILDING CORP.	Occupation DEVELOPER	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249198
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

B. Full Name (Last, First, Middle Initial) MR. THOMAS F. GARRETT		Date of Receipt
Mailing Address 1617 KINCAID ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code LEWISBURG TN 37091-5226	Amount of Each Receipt this Period -129.00	
FEC ID number of contributing federal political committee.		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249129
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

C. Full Name (Last, First, Middle Initial) MR. TREVOR GARRETT		Date of Receipt
Mailing Address 1130 8TH AVENUE SOUTH		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 6 / 2 0 0 8
City State Zip Code NASHVILLE TN 37203-4724	Amount of Each Receipt this Period 183.00	
FEC ID number of contributing federal political committee.		
Name of Employer FRIENDS OF FRED THOMPSON	Occupation CONSULTANT	CONTRIBUTION IN-KIND- TRAVEL Transaction ID: SA17.249038
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 258.00	

SUBTOTAL of Receipts This Page (optional) ▶	<input type="text"/> 183.00
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 32 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MR. NORMAN J. GOEBEL, JR.	Date of Receipt MM / DD / YYYY 02 / 05 / 2008
	Mailing Address 160 OCEAN DRIVE APARTMENT 6B	Amount of Each Receipt this Period 200.00
	City State Zip Code BATON ROUGE LA 70806-4655	FEC ID number of contributing federal political committee.
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 350.00
		Transaction ID: SA17.248855

B.	Full Name (Last, First, Middle Initial) MRS. JODIE GRAY	Date of Receipt MM / DD / YYYY 02 / 13 / 2008
	Mailing Address 802 GREENWICH WOODS DRIVE	Amount of Each Receipt this Period -2300.00
	City State Zip Code MCLEAN VA 22102	FEC ID number of contributing federal political committee.
	Name of Employer CUSTOMER RELATIONSHIP METRICS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation OWNER Election Cycle-to-Date ▼ 2300.00
		Transaction ID: SA17.249015

C.	Full Name (Last, First, Middle Initial) MRS. BETTY GRMABO	Date of Receipt MM / DD / YYYY 02 / 04 / 2008
	Mailing Address 4760 GURGER ROAD	Amount of Each Receipt this Period -450.00
	City State Zip Code CLEVELAND OH 44121	FEC ID number of contributing federal political committee.
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 50.00
		Transaction ID: SA17.249205

SUBTOTAL of Receipts This Page (optional)	▶	-250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. KENNETH V. HANDAL		Date of Receipt																				
Mailing Address 1075 PARK AVENUE APARTMENT 3B		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code NEW YORK NY 10128-1003		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		-2300.00																				
Name of Employer Occupation CA, INC LAWYER		CONTRIBUTION																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] REFUND																				
Election Cycle-to-Date ▼ 2300.00		Transaction ID: SA17.249196																				

B. Full Name (Last, First, Middle Initial) MRS. GLENNA L. HEAVIN		Date of Receipt																				
Mailing Address P.O. BOX 708		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code INGRAM TX 78025-0708		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		-2300.00																				
Name of Employer Occupation HEAVIN IDEAS IN ACTION, INC PRESIDENT		CONTRIBUTION																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] REFUND																				
Election Cycle-to-Date ▼ 2300.00		Transaction ID: SA17.249170																				

C. Full Name (Last, First, Middle Initial) MR. H. GARY HEAVIN		Date of Receipt																				
Mailing Address 875 C.R. 324		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code GATESVILLE TX 76528		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		-2300.00																				
Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] REFUND																				
Election Cycle-to-Date ▼ 2300.00		Transaction ID: SA17.249169																				

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MRS. LISA C. HENKEL		Date of Receipt <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 02 / 01 / 2008	
Mailing Address 2412 MARSHALL COURT		Amount of Each Receipt this Period <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> -2300.00	
City NAPERVILLE	State IL	Zip Code 60565-3475	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.248956
FEC ID number of contributing federal political committee.		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation HOMEMAKER Election Cycle-to-Date ▼ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 2300.00		

B. Full Name (Last, First, Middle Initial) MR. MICHAEL HENKEL		Date of Receipt <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 02 / 29 / 2008	
Mailing Address 2412 MARSHALL COURT		Amount of Each Receipt this Period <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> -2300.00	
City NAPERVILLE	State IL	Zip Code 60565-3475	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249141
FEC ID number of contributing federal political committee.		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Name of Employer I.S.P. CONSULTANTS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation VICE PRESIDENT Election Cycle-to-Date ▼ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 2300.00		

C. Full Name (Last, First, Middle Initial) MRS. JANE C. HENSON		Date of Receipt <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 02 / 06 / 2008	
Mailing Address 1111 BERING DRIVE #1301		Amount of Each Receipt this Period <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 250.00	
City HOUSTON	State TX	Zip Code 77057-2321	CONTRIBUTION Transaction ID: SA17.248876
FEC ID number of contributing federal political committee.		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation HOMEMAKER Election Cycle-to-Date ▼ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 250.00
TOTAL This Period (last page this line number only) ▶	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 320
	(check only one)	
<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MR. DONALD R. HESSELBROCK	Date of Receipt MM / DD / YYYY 02 / 21 / 2008
	Mailing Address 10045 N. 58TH PLACE	
	City State Zip Code SCOTTSDALE AZ 85253-1101	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee.	
	Name of Employer CORPORATE SECURITY SPECIALISTS, INC.	CONTRIBUTION
	Occupation SECURITY SPECIALIST	
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	IN-KIND- PRINTING
	Election Cycle-to-Date ▼ 220.00	Transaction ID: SA17.248990

B.	Full Name (Last, First, Middle Initial) MICHAEL HOLLOWAY	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 1937 W. PALMETTO ST	
	City State Zip Code FLORENCE SC 29501-3916	Amount of Each Receipt this Period -100.00
	FEC ID number of contributing federal political committee.	
	Name of Employer SELF-EMPLOYED	CONTRIBUTION
	Occupation CRNA	[MEMO ITEM]
	Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	REFUND
	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249194

C.	Full Name (Last, First, Middle Initial) NATHAN HOWARD	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 9191 GARLAND RD APT 817	
	City State Zip Code DALLAS TX 75218-3973	Amount of Each Receipt this Period -50.00
	FEC ID number of contributing federal political committee.	
	Name of Employer TEXAS INSTRUMENTS	CONTRIBUTION
	Occupation ELECTRICAL ENGINEER	[MEMO ITEM]
	Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	REFUND
	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249107

SUBTOTAL of Receipts This Page (optional)	20.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. WALTER R. HOWELL, III		Date of Receipt																				
Mailing Address 415 TIMBER BRANCH PKWY.		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code ALEXANDRIA VA 22302-4224	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.	-500.00																					
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00	CONTRIBUTION MEMORITUM REFUND Transaction ID: SA17.249165																				

B. Full Name (Last, First, Middle Initial) MR. WILLIAM F. JENKINS, JR.		Date of Receipt																				
Mailing Address 954 WILKENSON ROAD N.E.		<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>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	3		2	0	0	8													
City State Zip Code CLEVELAND TN 37323-5471	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.	-2300.00																					
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00	CONTRIBUTION MEMORITUM REFUND Transaction ID: SA17.249011																				

C. Full Name (Last, First, Middle Initial) MR. BRIAN JAY JENSEN		Date of Receipt																				
Mailing Address 239 BOB WHITE TRAIL		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code SEVIERVILLE TN 37876-1371	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.	-500.00																					
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00	CONTRIBUTION MEMORITUM REFUND Transaction ID: SA17.249099																				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MRS. LEONA JOHNSTON		Date of Receipt																				
Mailing Address 11011 N. ZEPHYR DRIVE UNIT 115		<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>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	1		2	0	0	8													
City State Zip Code FOUNTAIN HILLS AZ 85268-5505		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		50.00																				
Name of Employer Occupation RETIRE		CONTRIBUTION																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		IN-KIND- PRINTING																				
Election Cycle-to-Date ▼ 240.00		Transaction ID: SA17.248991																				

B. Full Name (Last, First, Middle Initial) MR. ROBERT C. KINSER		Date of Receipt																				
Mailing Address 68 W. OAKVIEW ROAD		<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>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	3		2	0	0	8													
City State Zip Code ASHEVILLE NC 28806-1433		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		100.00																				
Name of Employer Occupation RETIRE		CONTRIBUTION																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
Election Cycle-to-Date ▼ 600.00		Transaction ID: SA17.248962																				

C. Full Name (Last, First, Middle Initial) MR. TIMOTHY KNIGHT		Date of Receipt																				
Mailing Address 1059 BLACK RUSH CIRCLE		<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>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	3		2	0	0	8													
City State Zip Code MOUNT PLEASANT SC 29466-8082		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		-500.00																				
Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION [MEMORITM] REFUND																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
Election Cycle-to-Date ▼ 2300.00		Transaction ID: SA17.249012																				

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 320	
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. ROBERT KOWALSKI		Date of Receipt																				
Mailing Address 45573 N TERRITORIAL		<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>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	1		2	0	0	8													
City State Zip Code PLYMOUTH MI 48170-2955	Amount of Each Receipt this Period -2300.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249039																				
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00																					

B. Full Name (Last, First, Middle Initial) MS. LEIGHTA M. LAITINEN		Date of Receipt																				
Mailing Address 811 FOREST AVENUE		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code JOHNSON CITY TN 37601-3319	Amount of Each Receipt this Period -2300.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249151																				
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00																					

C. Full Name (Last, First, Middle Initial) MR. H. D. LAMBERT		Date of Receipt																				
Mailing Address 1211 S. HERITAGE DRIVE		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code MARYVILLE TN 37803-6413	Amount of Each Receipt this Period -2300.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249097																				
Name of Employer Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation RETIRED Election Cycle-to-Date ▼ 2300.00																					

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	[]

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 / 320
	(check only one)	
<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. FRANK F. LAWRENCE		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
Mailing Address 40 ALGIE NEELY ROAD		Amount of Each Receipt this Period -2300.00	
City JACKSON	State TN	Zip Code 38301-9672	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249178
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period -2300.00	
Name of Employer S.M. LAWRENCE COMPANY	Occupation MECHANICAL ENGINEER		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		

B. Full Name (Last, First, Middle Initial) MRS. LOIS A. LEAVENGOOD		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
Mailing Address 2690 FOXGLOVE LOOP SE		Amount of Each Receipt this Period -100.00	
City ALBANY	State OR	Zip Code 97322-7107	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249109
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period -100.00	
Name of Employer		Occupation RETIRED	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		

C. Full Name (Last, First, Middle Initial) MR. BYRON LEFLORE, JR.		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
Mailing Address 117 CRESCENT		Amount of Each Receipt this Period -2300.00	
City SAN ANTONIO	State TX	Zip Code 78209-5219	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249131
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period -2300.00	
Name of Employer ARGONANT GROUP		Occupation ATTORNEY	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 320	
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. FRANCIS P. LEHAR		Date of Receipt																				
Mailing Address P.O. BOX 1482		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code MANCHESTER MA 01944-0856	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.	-100.00																					
Name of Employer	Occupation	CONTRIBUTION [MEMO ITEM] REFUND																				
	RETIRED																					
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249146																				

B. Full Name (Last, First, Middle Initial) MR. DAVID W. LEVINSON		Date of Receipt																				
Mailing Address 11 E. 69TH STREET		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code NEW YORK NY 10021-4905	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.	-2300.00																					
Name of Employer	Occupation	CONTRIBUTION [MEMO ITEM] REFUND																				
L. & L. HOLDING COMPANY L.L.C.	REAL ESTATE INVESTOR																					
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249142																				

C. Full Name (Last, First, Middle Initial) MR. WILLIAM LINK		Date of Receipt																				
Mailing Address 5953 SEDBERRY ROAD		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code NASHVILLE TN 37205-3249	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.	-150.00																					
Name of Employer	Occupation	CONTRIBUTION [MEMO ITEM] REFUND																				
	RETIRED																					
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249184																				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 41 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MR. HOWARD M. LORBER	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 70 E. SUNRISE HIGHWAY SUITE 411	Amount of Each Receipt this Period -700.00
	City State Zip Code VALLEY STREAM NY 11581-1233	FEC ID number of contributing federal political committee.
	Name of Employer Occupation DOUGLAS ELLIMAN/VECTOR GR- OUP REAL ESTATE EXECUTIVE	CONTRIBUTION [MEMO ITEM] REFUND
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249147

B.	Full Name (Last, First, Middle Initial) MS. THEA LORBER	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 439 HALSEY NECK LANE	Amount of Each Receipt this Period -700.00
	City State Zip Code SOUTHAMPTON NY 11968-4611	FEC ID number of contributing federal political committee.
	Name of Employer Occupation HOMEMAKER	CONTRIBUTION [MEMO ITEM] REFUND
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249148

C.	Full Name (Last, First, Middle Initial) MR. JOSEPH G. LUBECK	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 825 PARKWAY STREET	Amount of Each Receipt this Period -1000.00
	City State Zip Code JUPITER FL 33477-7347	FEC ID number of contributing federal political committee.
	Name of Employer Occupation LANDMARK RESIDENTIAL ATTORNEY	CONTRIBUTION [MEMO ITEM] REFUND
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249122

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MR. GRANT H. LYNN	Date of Receipt MM / DD / YYYY 02 / 01 / 2008
	Mailing Address 3201 SKYCREST CIRCLE	Amount of Each Receipt this Period -450.00
	City State Zip Code SALT LAKE CITY UT 84108-1611	
	FEC ID number of contributing federal political committee.	
	Name of Employer SELF-EMPLOYED	Occupation FINANCIAL PLANNER
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.248952

B.	Full Name (Last, First, Middle Initial) MR. BRIAN H. MADDEN	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 97 SHARON LANE	Amount of Each Receipt this Period -2300.00
	City State Zip Code GREENLAWN NY 11740-2808	
	FEC ID number of contributing federal political committee.	
	Name of Employer LIBERTY TITLE AGENCY	Occupation EXECUTIVE
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249083

C.	Full Name (Last, First, Middle Initial) GERALD MALONE	Date of Receipt MM / DD / YYYY 02 / 14 / 2008
	Mailing Address 9448 LYNDAL AVENUE SOUTH	Amount of Each Receipt this Period -200.00
	City State Zip Code BLOOMINGTON MN 55420-4246	
	FEC ID number of contributing federal political committee.	
	Name of Employer SELF-EMPLOYED	Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	CONTRIBUTION CHARGED BACK Transaction ID: SA17.249216

SUBTOTAL of Receipts This Page (optional)	-200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 / 320
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MR. LESLIE EUGENE MCCLELLAND	Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	Mailing Address 6150 MARIETTA ROAD	Amount of Each Receipt this Period -2029.00
	City State Zip Code LANCASTER OH 43130-0310	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation CYRIL SCOTT COMPANY OFFICE WORK	CONTRIBUTION [MEMO ITEM] REFUND
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249100

B.	Full Name (Last, First, Middle Initial) MR. ROBERT MCGANN	Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	Mailing Address 606 RILEY TRAIL	Amount of Each Receipt this Period -500.00
	City State Zip Code CEDAR PARK TX 78613-7430	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation SECURE GROWTH L.L.C. SELF-EMPLOYED	CONTRIBUTION [MEMO ITEM] REFUND
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249081

C.	Full Name (Last, First, Middle Initial) DOM MEFFE	Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	Mailing Address 6010 BLAKEFORD DR	Amount of Each Receipt this Period -2300.00
	City State Zip Code WINDERMERE FL 34786-5601	
	FEC ID number of contributing federal political committee.	
	Name of Employer Occupation TRIAD ISOTOPES, INC. HEALTHCARE EXECUTIVE	CONTRIBUTION [MEMO ITEM] REFUND
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249119

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 44 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) CURTIS E. MEIER	Date of Receipt MM / DD / YYYY 02 / 13 / 2008
	Mailing Address 4721 ROAD 18	
	City State Zip Code LAGRANGE WY 82221-8410	
	FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period -100.00
	Name of Employer Occupation AGRICULTURE SELF-EMPLOYED	CONTRIBUTION [MEMO ITEM] REFUND
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249014

B.	Full Name (Last, First, Middle Initial) KELLY A. MELIUS	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 2 WHITEWOOD CT	
	City State Zip Code HUNTINGTON NY 11743-6025	
	FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period -2300.00
	Name of Employer Occupation OHEKA MANAGEMENT CORP CATERING SALES	CONTRIBUTION [MEMO ITEM] REFUND
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249153

C.	Full Name (Last, First, Middle Initial) MRS. JANE KAY MILLER	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 12275 N. OGDEN POINT ROAD #112	
	City State Zip Code SYRACUSE IN 46567-9700	
	FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period -2300.00
	Name of Employer Occupation RETIRED	CONTRIBUTION [MEMO ITEM] REFUND
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249105

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 320				
	<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a	<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. RIP MILLER		Date of Receipt
Mailing Address 3600 BALCONES DR.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code AUSTIN TX 78731-5804	Amount of Each Receipt this Period -1800.00	
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249173

B. Full Name (Last, First, Middle Initial) MR. V. RICHARD MILLER		Date of Receipt
Mailing Address 12275 N. OGDEN POINT ROAD UNIT 112		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code SYRACUSE IN 46567-9700	Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249106

C. Full Name (Last, First, Middle Initial) MR. ROBERT C. MIMMS		Date of Receipt
Mailing Address 780 OLD ROSWELL PLACE SUITE 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code ROSWELL GA 30076-1627	Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249159

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 46 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. JOHN T. MOORE		Date of Receipt																				
Mailing Address 7 OLD FIELD ROAD		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code SETAUKET NY 11733-2259	Amount of Each Receipt this Period -2000.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249199																				
Name of Employer MARWOOD GROUP	Occupation CHAIRMAN & CEO																					
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00																					

B. Full Name (Last, First, Middle Initial) MR. CHARLES E. MUNCATCHY		Date of Receipt																				
Mailing Address 1445 S.E. 21ST LANE		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code CAPE CORAL FL 33990-4665	Amount of Each Receipt this Period -20.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249133																				
Name of Employer	Occupation RETIRED																					
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00																					

C. Full Name (Last, First, Middle Initial) MR. FRANCIS P. MURPHY		Date of Receipt																				
Mailing Address 2720 GREEN TEE DRIVE		<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>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	1		2	0	0	8													
City State Zip Code PEARLAND TX 77581-5021	Amount of Each Receipt this Period -2300.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249041																				
Name of Employer	Occupation RETIRED																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00																					

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 320	
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MR. ROBERT NAEGELE, JR.	Date of Receipt MM / DD / YYYY 02 / 13 / 2008
	Mailing Address 7993 VIA VECCHIA	Amount of Each Receipt this Period -200.00
	City State Zip Code NAPLES FL 34108-7531	CONTRIBUTION [MEMO ITEM] REFUND
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.249007
	Name of Employer Occupation SELF-EMPLOYED BUSINESS OWNER	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

B.	Full Name (Last, First, Middle Initial) MR. RICHARD T. NASTI	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 42 WOODLAWN AVENUE	Amount of Each Receipt this Period -2300.00
	City State Zip Code NEW ROCHELLE NY 10804-4619	CONTRIBUTION [MEMO ITEM] REFUND
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.249197
	Name of Employer Occupation H.J. KALIKOW & COMPANY EXECUTIVE	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

C.	Full Name (Last, First, Middle Initial) MR. CARL ANTHONY NEFF	Date of Receipt MM / DD / YYYY 02 / 01 / 2008
	Mailing Address 8187 STATE ROUTE 43	Amount of Each Receipt this Period -100.00
	City State Zip Code STREETSBORO OH 44241-5864	CONTRIBUTION [MEMO ITEM] REFUND
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.248950
	Name of Employer Occupation RETIRED	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 48 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. CARL ANTHONY NEFF		Date of Receipt																				
Mailing Address 8187 STATE ROUTE 43		<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>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	1		2	0	0	8													
City State Zip Code STREETSBORO OH 44241-5864		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		-100.00																				
Name of Employer Occupation RETIRE		CONTRIBUTION																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] REFUND																				
Election Cycle-to-Date ▼ 2300.00		Transaction ID: SA17.248951																				

B. Full Name (Last, First, Middle Initial) MR. WILBUR L. NIEMAN		Date of Receipt																				
Mailing Address 5141 E. COUNTY ROAD 100 S.		<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>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	1		2	0	0	8													
City State Zip Code SEYMOUR IN 47274-8642		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		100.00																				
Name of Employer Occupation RETIRE		CONTRIBUTION																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
Election Cycle-to-Date ▼ 465.00		Transaction ID: SA17.248918																				

C. Full Name (Last, First, Middle Initial) MR. ROBERT PASCUCCI		Date of Receipt																				
Mailing Address 277 NORTHERN BLVD.		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code GREAT NECK NY 11021-4703		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		-2300.00																				
Name of Employer Occupation JOB CO PRESIDENT		CONTRIBUTION																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] REFUND																				
Election Cycle-to-Date ▼ 2300.00		Transaction ID: SA17.249174																				

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. JOSEPH H. PILLER		Date of Receipt
Mailing Address 3801 F.M. 1829		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code GATESVILLE TX 76528	Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00	CONTRIBUTION REFUND Transaction ID: SA17.249168

B. Full Name (Last, First, Middle Initial) MRS. LESLIE P. POPE		Date of Receipt
Mailing Address P.O. BOX 5709		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code JOHNSON CITY TN 37602-5709	Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00	CONTRIBUTION REFUND Transaction ID: SA17.249137

C. Full Name (Last, First, Middle Initial) MR. FRED A. POTTER		Date of Receipt
Mailing Address P.O. BOX 538		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code ROAN MOUNTAIN TN 37687-0538	Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 2300.00	CONTRIBUTION REFUND Transaction ID: SA17.249138

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 0.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 50 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MR. MICHAEL F. PUNTILLO, SR.	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 277 NORTHERN BLVD.	Amount of Each Receipt this Period -2300.00
	City State Zip Code GREAT NECK NY 11021-4703	CONTRIBUTION [MEMO ITEM] REFUND
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.249163
Name of Employer JOBSCO REALTY & CONSTRUCTION, INC.	Occupation PRINCIPAL/FOUNDER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

B.	Full Name (Last, First, Middle Initial) FRANK RAVIOLA	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 861 FREDERICK COMMONS	Amount of Each Receipt this Period -500.00
	City State Zip Code SAN JOSE CA 95126-4854	CONTRIBUTION [MEMO ITEM] REFUND
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.249096
Name of Employer MICRO ANALYTICAL	Occupation LABORATORY DIRECTOR	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

C.	Full Name (Last, First, Middle Initial) MR. CHARLES H. RENFROE	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 9 OLD PACES PLACE NW	Amount of Each Receipt this Period -200.00
	City State Zip Code ATLANTA GA 30327-2469	CONTRIBUTION [MEMO ITEM] REFUND
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.249118
Name of Employer RENFROE ENTERPRISES	Occupation C.E.O.	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) WILLIAM RITCHIE		Date of Receipt																				
Mailing Address 5302 BROOKWAY DR		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code BETHESDA MD 20816-1308	Amount of Each Receipt this Period -950.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249090																				
Name of Employer Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation RETIRED Election Cycle-to-Date ▼ 2300.00																					

B. Full Name (Last, First, Middle Initial) MR. KENNETH M. ROBINETTE, JR.		Date of Receipt																				
Mailing Address 3056 HIGHWAY 81 S.		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code JONESBOROUGH TN 37659-6912	Amount of Each Receipt this Period -2300.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249139																				
Name of Employer DECANTER MACHINE, INC Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation MANAGER Election Cycle-to-Date ▼ 2300.00																					

C. Full Name (Last, First, Middle Initial) MR. WINSTON ROBINSON		Date of Receipt																				
Mailing Address 4 LIS COURT		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code SAYREVILLE NJ 08872-2228	Amount of Each Receipt this Period -100.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249183																				
Name of Employer SELF-EMPLOYED Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation ENGINEER/RE DEVELOPER Election Cycle-to-Date ▼ 2300.00																					

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 / 320
	(check only one)	
<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. JAMES H. ROWE, III		Date of Receipt																				
Mailing Address 3915 49TH STREET N.W.		<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>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	3		2	0	0	8													
City State Zip Code WASHINGTON DC 20016-2319	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.		-1300.00																				
Name of Employer JAMES MINTZ GROUP, INC	Occupation VICE PRESIDENT	CONTRIBUTION																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	[MEMO ITEM] REFUND																				
		Transaction ID: SA17.249006																				

B. Full Name (Last, First, Middle Initial) MR. EMERSON EDWARD RUSSELL, JR.		Date of Receipt																				
Mailing Address 574 MILLER ROAD		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code SIGNAL MOUNTAIN TN 37377-7658	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.		-1900.00																				
Name of Employer E.R.M.C.	Occupation VICE PRESIDENT BUSINESS DEVELOPMENT	CONTRIBUTION																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	[MEMO ITEM] REFUND																				
		Transaction ID: SA17.249120																				

C. Full Name (Last, First, Middle Initial) GINGER SAMPLES		Date of Receipt																				
Mailing Address 1551 UPPER E. VALLEY RD.		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code PIKEVILLE TN 37367-3859	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.		-250.00																				
Name of Employer FLETCHER BRIGHT COM.	Occupation REAL ESTATE	CONTRIBUTION																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	[MEMO ITEM] REFUND																				
		Transaction ID: SA17.249193																				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MR. BARRY F. SCHWARTZ	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 35 E. 62ND STREET	Amount of Each Receipt this Period -2300.00
	City State Zip Code NEW YORK NY 10065-8014	
	FEC ID number of contributing federal political committee.	
Name of Employer MAC ANDREWS & FORBES HOLDINGS INC	Occupation VICE CHAIRMAN	CONTRIBUTION
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	[MEMO ITEM] REFUND
		Transaction ID: SA17.249167

B.	Full Name (Last, First, Middle Initial) PETER SHERMAN	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 4038 COURTSIRE DR.	Amount of Each Receipt this Period -700.00
	City State Zip Code DALLAS TX 75229-2839	
	FEC ID number of contributing federal political committee.	
Name of Employer SHERMCO INDUSTRIES	Occupation PRESIDENT	CONTRIBUTION
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	[MEMO ITEM] REFUND
		Transaction ID: SA17.249116

C.	Full Name (Last, First, Middle Initial) MR. BILLIE E. SHIELDS	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 1222 OAK MEADOW BLVD.	Amount of Each Receipt this Period -650.00
	City State Zip Code JONESBORO AR 72401-5247	
	FEC ID number of contributing federal political committee.	
Name of Employer	Occupation RETIRED	CONTRIBUTION
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	[MEMO ITEM] REFUND
		Transaction ID: SA17.249113

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 54 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MS. LYN SILKE		Date of Receipt																				
Mailing Address 956 HILLCREST DRIVE		<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>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	1		2	0	0	8													
City State Zip Code CAMBRIA CA 93428-2502	Amount of Each Receipt this Period -400.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.248955																				
Name of Employer	Occupation																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00																					

B. Full Name (Last, First, Middle Initial) MR. DAVID E. SKAGGS		Date of Receipt																				
Mailing Address 1853 N. SEDGWICK STREET		<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>2</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	5		2	0	0	8													
City State Zip Code WICHITA KS 67203-1565	Amount of Each Receipt this Period -540.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION CHARGED BACK Transaction ID: SA17.249072																				
Name of Employer	Occupation																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 130.00																					

C. Full Name (Last, First, Middle Initial) MR. THOMAS W. SMITH		Date of Receipt																				
Mailing Address 5250 VIRGINIA WAY SUITE 100		<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>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	1		2	0	0	8													
City State Zip Code BRENTWOOD TN 37027-7575	Amount of Each Receipt this Period -2300.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249042																				
Name of Employer	Occupation																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00																					

SUBTOTAL of Receipts This Page (optional) ▶	-540.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. MARVIN STOKELY		Date of Receipt																				
Mailing Address 455 POINTE VISTA DRIVE		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code ELIZABETH CITY NC 27909-7784	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.	-300.00																					
Name of Employer	Occupation	CONTRIBUTION [MEMO ITEM] REFUND																				
	RETIRED																					
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249189																				

B. Full Name (Last, First, Middle Initial) MR. BENJAMIN JENNINGS STONE, III		Date of Receipt																				
Mailing Address 10207 E. HUNTER VALLEY ROAD		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code VIENNA VA 22181-3011	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.	-2300.00																					
Name of Employer	Occupation	CONTRIBUTION [MEMO ITEM] REFUND																				
STONE RSH, INC.	RESTAURATEUR																					
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249182																				

C. Full Name (Last, First, Middle Initial) MR. STUART SUBOTNICK		Date of Receipt																				
Mailing Address 425 E. 58TH STREET #47H		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code NEW YORK NY 10022-2300	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.	-2300.00																					
Name of Employer	Occupation	CONTRIBUTION [MEMO ITEM] REFUND																				
INFORMATION REQUESTED PER BEST EFFORTS	INFORMATION REQUESTED PER BEST EFFORTS																					
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249155																				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MS. JUANITA W. SUMMERS		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
Mailing Address P.O. BOX 1628		Amount of Each Receipt this Period -2300.00	
City ELIZABETHTON	State TN	Zip Code 37644-1628	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249136
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period -2300.00	
Name of Employer Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation HOMEMAKER Election Cycle-to-Date ▼ 2300.00		

B. Full Name (Last, First, Middle Initial) MR. ROBERT T. SUMMERS		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
Mailing Address P.O. BOX 1628		Amount of Each Receipt this Period -2300.00	
City ELIZABETHTON	State TN	Zip Code 37644-1628	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249135
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period -2300.00	
Name of Employer SUMMERS TAYLOR INC. Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation CONSTRUCTION Election Cycle-to-Date ▼ 2300.00		

C. Full Name (Last, First, Middle Initial) MR. GARY A. TAYLOR		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
Mailing Address 85A STONEBROOK PLACE		Amount of Each Receipt this Period -2300.00	
City JACKSON	State TN	Zip Code 38305-3653	CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249177
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period -2300.00	
Name of Employer SELF-EMPLOYED Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation COMMERCE RETAIL DEVELOPER Election Cycle-to-Date ▼ 2300.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 57 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) JUDITH TAYLOR		Date of Receipt																				
Mailing Address 485 HARBORSIDE ST, #100		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code WOODBRIDGE VA 22191-5457		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		-300.00																				
Name of Employer Occupation SBA FINANCIAL ANALYST/ATTORNEY		CONTRIBUTION																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] REFUND																				
Election Cycle-to-Date ▼ 2300.00		Transaction ID: SA17.249079																				

B. Full Name (Last, First, Middle Initial) MRS. LISA H. TAYLOR		Date of Receipt																				
Mailing Address 85A STONEBROOK PLACE		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code JACKSON TN 38305-3653		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		-2300.00																				
Name of Employer Occupation SELF-EMPLOYED RETAIL OWNER		CONTRIBUTION																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] REFUND																				
Election Cycle-to-Date ▼ 2300.00		Transaction ID: SA17.249176																				

C. Full Name (Last, First, Middle Initial) MS. JEWEL L. THOMAS		Date of Receipt																				
Mailing Address 3396 335TH STREET LOT 113		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code NEOLA IA 51559-5507		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		-135.00																				
Name of Employer Occupation RETIRED		CONTRIBUTION																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] REFUND																				
Election Cycle-to-Date ▼ 2300.00		Transaction ID: SA17.249164																				

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 / 320
	(check only one)	
<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. DAN C. TUTCHER		Date of Receipt																				
Mailing Address ONE SHADDER WAY		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code HOUSTON TX 77019-1415	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.		-2300.00																				
Name of Employer	Occupation	CONTRIBUTION [MEMO ITEM] REFUND																				
	RETIRED																					
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249089																				

B. Full Name (Last, First, Middle Initial) MRS. KIM TUTCHER		Date of Receipt																				
Mailing Address ONE SHADDER WAY		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code HOUSTON TX 77019-1415	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.		-2300.00																				
Name of Employer	Occupation	CONTRIBUTION [MEMO ITEM] REFUND																				
	HOMEMAKER																					
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249140																				

C. Full Name (Last, First, Middle Initial) MRS. JULIE VANDERMOST		Date of Receipt																				
Mailing Address 27312 CALLE ARROYO		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code SAN JACINTO CA 92675-2768	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.		-1700.00																				
Name of Employer	Occupation	CONTRIBUTION [MEMO ITEM] REFUND																				
VANDERMOST CONSULTING	CONSULTANT																					
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249098																				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 59 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MR. CARROLL R. WALKER	Date of Receipt MM / DD / YYYY 02 / 13 / 2008
	Mailing Address 102 RUE MARSEILLE	Amount of Each Receipt this Period -3300.00
	City State Zip Code DAYTON OH 45429-1879	CONTRIBUTION [MEMO ITEM] REFUND
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.249004
	Name of Employer Occupation RETIRED	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

B.	Full Name (Last, First, Middle Initial) HUGH WALL	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 3112 COTTRELL DRIVE	Amount of Each Receipt this Period -2300.00
	City State Zip Code FLOWER MOUND TX 75022-2911	CONTRIBUTION [MEMO ITEM] REFUND
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.249124
	Name of Employer Occupation SELF-EMPLOYED REAL ESTATE INVESTMENT	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

C.	Full Name (Last, First, Middle Initial) MRS. SALLY WALLACE	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 981 TURKEY CREEK LANE	Amount of Each Receipt this Period -2300.00
	City State Zip Code BEECH BLUFF TN 38313	CONTRIBUTION [MEMO ITEM] REFUND
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.249143
	Name of Employer Occupation SELF-EMPLOYED CONTRACTOR	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MRS. ANNE B. WALSH		Date of Receipt
Mailing Address 2 GLEN CREEK LANE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code SAINT LOUIS MO 63124-1505	Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249191
Name of Employer GUGGENHEIM PARTNERS	Occupation INVESTMENTS MANAGER	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

B. Full Name (Last, First, Middle Initial) MR. THOMAS M. WALSH		Date of Receipt
Mailing Address 2 GLEN CREEK LANE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
City State Zip Code SAINT LOUIS MO 63124-1505	Amount of Each Receipt this Period -2300.00	
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249190
Name of Employer SONNENSCHNEIN, NATH & ROSE-NTHAL, L.L.P.	Occupation ATTORNEY	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

C. Full Name (Last, First, Middle Initial) MR. RICHARD B. WALTER		Date of Receipt
Mailing Address 8210 SCENIC RIDGE COVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 3 / 2 0 0 8
City State Zip Code AUSTIN TX 78735-1626	Amount of Each Receipt this Period -1363.77	
FEC ID number of contributing federal political committee.		CONTRIBUTION CHECK RETURNED BY BANK Transaction ID: SA17.249203
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional) ▶	<input type="text"/> -1363.77
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 61 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MS. JANE COMBS WARNOCK	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 309 MIDVALE TERRACE	Amount of Each Receipt this Period -460.00
	City State Zip Code SEBASTIAN FL 32958-6615	CONTRIBUTION
	FEC ID number of contributing federal political committee.	[MEMO ITEM]
	Name of Employer Occupation RETIREED	REFUND
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249160

B.	Full Name (Last, First, Middle Initial) ROBERT WATSON	Date of Receipt MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 4505 RIVER OAKS RD	Amount of Each Receipt this Period -500.00
	City State Zip Code LAKE WYLIE SC 29710-7027	CONTRIBUTION
	FEC ID number of contributing federal political committee.	CHARGED BACK
	Name of Employer Occupation WATSON INSURANCE INSURANCE SALES	Transaction ID: SA17.249067
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00	

C.	Full Name (Last, First, Middle Initial) GEORGE J. WERNETTE	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 1039 MOUNTAIN AIR CT.	Amount of Each Receipt this Period -2300.00
	City State Zip Code RENO NV 89511-5358	CONTRIBUTION
	FEC ID number of contributing federal political committee.	[MEMO ITEM]
	Name of Employer Occupation TRI TOOL INC. PRESIDENT	REFUND
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	Transaction ID: SA17.249077

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 320
	<input type="checkbox"/> 16 19a <input checked="" type="checkbox"/> 17a 19b <input type="checkbox"/> 17b 20a <input type="checkbox"/> 17c 20b <input type="checkbox"/> 17d 20c <input type="checkbox"/> 18 21	

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. JOSEPH WIESELBERG		Date of Receipt																				
Mailing Address 16970 S.W. 90 AVENUE		<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>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	3		2	0	0	8													
City State Zip Code MIAMI FL 33157-4503	Amount of Each Receipt this Period -2300.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249003																				
Name of Employer CONCORDE PROPERTIES	Occupation REAL ESTATE																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00																					

B. Full Name (Last, First, Middle Initial) HON. C. HOWARD WILKINS, JR.		Date of Receipt																				
Mailing Address 3030 K. STREET NW		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code WASHINGTON DC 20007-5104	Amount of Each Receipt this Period -700.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249134																				
Name of Employer SELF-EMPLOYED	Occupation INVESTOR																					
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00																					

C. Full Name (Last, First, Middle Initial) MR. MARK A. ZIUS		Date of Receipt																				
Mailing Address P.O. BOX 2306		<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>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	3		2	0	0	8													
City State Zip Code CLEVELAND TN 37320-2306	Amount of Each Receipt this Period -2300.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM] REFUND Transaction ID: SA17.249010																				
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00																					

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 63 / 320	
	(check only one)			
<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c
				<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. JIMMY M. IRWIN, SR Mailing Address 2668 SPENCER MILL ROAD City State Zip Code BON AQUA TN 37025-5113 FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 8 Amount of Each Receipt this Period 125.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		CONTRIBUTION [MEMO ITEM] Transaction ID: SA17.249030
Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 125.00		

B. Full Name (Last, First, Middle Initial) MR. JIMMY M. IRWIN, JR. Mailing Address 2668 SPENCER MILL ROAD City State Zip Code BON AQUA TN 37025-5113 FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 8 Amount of Each Receipt this Period 125.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		CONTRIBUTION [MEMO ITEM] Transaction ID: SA17.249031
Occupation INFORMATION REQUESTED PER BEST EFFORTS Election Cycle-to-Date ▼ 125.00		

C. Full Name (Last, First, Middle Initial) FELLOWSHIP CONSTRUCTION L.L.C. Mailing Address P.O. BOX 220 City State Zip Code BON AQUA TN 37025-0220 FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 7 Amount of Each Receipt this Period 250.00
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		CONTRIBUTION [MEMO ITEM] SEE ATTRIBUTION BELOW Transaction ID: SA17.158596
Occupation Election Cycle-to-Date ▼ 0.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 64 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MR. W. BART JENKINS	Date of Receipt MM / DD / YYYY 02 / 08 / 2008
	Mailing Address 10301 COGDILL ROAD, SUITE 304	Amount of Each Receipt this Period 500.00
	City State Zip Code KNOXVILLE TN 37932-3423	CONTRIBUTION [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.248988
	Name of Employer Occupation JENKINS & STILES, LLC PRESIDENT	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) MR. M. TODD STILES	Date of Receipt MM / DD / YYYY 02 / 08 / 2008
	Mailing Address 10301 COGDILL ROAD, SUITE 304	Amount of Each Receipt this Period 500.00
	City State Zip Code KNOXVILLE TN 37932-3423	CONTRIBUTION [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.248989
	Name of Employer Occupation JENKINS & STILES, LLC VICE PRESIDENT	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) JENKINS & STILES, L.L.C.	Date of Receipt MM / DD / YYYY 12 / 14 / 2007
	Mailing Address 10301 COGDILL ROAD SUITE 304	Amount of Each Receipt this Period 1000.00
	City State Zip Code KNOXVILLE TN 37932-3423	CONTRIBUTION [MEMO ITEM] SEE ATTRIBUTION BELOW
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.197314
	Name of Employer Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 65 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) LYNN JONES		Date of Receipt <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>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	3		2	0	0	8													
Mailing Address P.O. BOX 4193		Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																						
City State Zip Code CLEVELAND TN 37320-4193	CONTRIBUTION [MEMO ITEM]																					
FEC ID number of contributing federal political committee.																						
Name of Employer Occupation LYNNCO PROPERTIES, LLC OWNER																						
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00	Transaction ID: SA17.248944																			
1000.00																						

B. Full Name (Last, First, Middle Initial) LYNNCO PROPERTIES, L.L.C.		Date of Receipt <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>1</td><td>2</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	7		2	0	0	7													
Mailing Address P.O. BOX 4193		Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																						
City State Zip Code CLEVELAND TN 37320-4193	CONTRIBUTION [MEMO ITEM] SEE ATTRIBUTION BELOW																					
FEC ID number of contributing federal political committee.																						
Name of Employer Occupation																						
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00	Transaction ID: SA17.199830																			
0.00																						

C. Full Name (Last, First, Middle Initial) MARGUERITE A. BROWN		Date of Receipt <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>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	0		2	0	0	8													
Mailing Address 14784 TIMBERBLUFF DRIVE		Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00																			
100.00																						
City State Zip Code CHESTERFIELD MO 63017-5576	CONTRIBUTION [MEMO ITEM]																					
FEC ID number of contributing federal political committee.																						
Name of Employer Occupation PARIC HR MANAGER																						
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td>200.00</td> </tr> </table>	200.00	Transaction ID: SA17.249035																			
200.00																						

SUBTOTAL of Receipts This Page (optional) ▶	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td> </td> </tr> </table>	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 66 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MR. CHRISTOPHER P. MCKEE		Date of Receipt																				
Mailing Address 19 PORTLAND DR.		<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>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	0		2	0	0	8													
City State Zip Code ST. LOUIS MO 63131-3324	Amount of Each Receipt this Period 100.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM]																				
Name of Employer MCEAGLE	Occupation PRESIDENT																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00																					
		Transaction ID: SA17.249037																				

B. Full Name (Last, First, Middle Initial) MARGUERITE A. MCKEE		Date of Receipt																				
Mailing Address 12 DUNLORA LANE		<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>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	0		2	0	0	8													
City State Zip Code ST. LOUIS MO 63131-4804	Amount of Each Receipt this Period 300.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM]																				
Name of Employer MCEAGLE	Occupation OWNER																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00																					
		Transaction ID: SA17.249033																				

C. Full Name (Last, First, Middle Initial) MR. PAUL J. MCKEE, JR.		Date of Receipt																				
Mailing Address 12 DUNLORA LANE		<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>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	0		2	0	0	8													
City State Zip Code ST. LOUIS MO 63131-4804	Amount of Each Receipt this Period 300.00																					
FEC ID number of contributing federal political committee.		CONTRIBUTION [MEMO ITEM]																				
Name of Employer MCEAGLE	Occupation OWNER																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00																					
		Transaction ID: SA17.249032																				

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 67 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input checked="" type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MR. PAUL J. MCKEE, III	Date of Receipt MM / DD / YYYY 02 / 10 / 2008
	Mailing Address 29 GLENN ABBEY DRIVE	Amount of Each Receipt this Period 100.00
	City State Zip Code SAINT LOUIS MO 63131-2735	CONTRIBUTION [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.249036
	Name of Employer Occupation PARIC OWNER Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 200.00	

B.	Full Name (Last, First, Middle Initial) MS. KATHLEEN J. MITCHELL	Date of Receipt MM / DD / YYYY 02 / 10 / 2008
	Mailing Address 20 VOUGA LN.	Amount of Each Receipt this Period 100.00
	City State Zip Code FRONTENAC MO 63131-2628	CONTRIBUTION [MEMO ITEM]
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.249034
	Name of Employer Occupation HOMEMAKER Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 200.00	

C.	Full Name (Last, First, Middle Initial) MCEAGLE FUND, L.L.C.	Date of Receipt MM / DD / YYYY 12 / 12 / 2007
	Mailing Address 1001 BOARDWALK SPRINGS PLACE	Amount of Each Receipt this Period 1000.00
	City State Zip Code O'FALLON MO 63368-4778	CONTRIBUTION [MEMO ITEM] SEE ATTRIBUTION BELOW
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.194396
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 0.00	

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 68 / 320	
	(check only one)			
<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c
				<input type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MORGAN BROTHERS		Date of Receipt																					
	Mailing Address P.O. BOX 746		<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>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	2		1	3		2	0	0	8														
	City CLARKSVILLE		State TN	Zip Code 37041-0746																				
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period -1700.00																						
Name of Employer		Occupation		CONTRIBUTION [MEMO ITEM] REFUND																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2300.00																						
				Transaction ID: SA17.249013																				

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	-2675.77

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 69 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input checked="" type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) HOOSIERS SUPPORTING BUYER FOR CONGRESS	Date of Receipt
	Mailing Address 200 N. MAIN STREET	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
	City State Zip Code MONTICELLO IN 47960-2131	Amount of Each Receipt this Period -1275.02
	FEC ID number of contributing federal political committee. C00255471	CONTRIBUTION [MEMO ITEM] REFUND
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 724.98	Transaction ID: SA17.249202

B.	Full Name (Last, First, Middle Initial) RAY MEIER FOR CONGRESS INC.	Date of Receipt
	Mailing Address 8600 ELMER HILL ROAD	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
	City State Zip Code ROME NY 13440-9313	Amount of Each Receipt this Period -2000.00
	FEC ID number of contributing federal political committee. C00422220	CONTRIBUTION [MEMO ITEM] REFUND
	Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00	Transaction ID: SA17.249166

C.	Full Name (Last, First, Middle Initial) CECIL STATON FOR STATE SENATE	Date of Receipt
	Mailing Address P.O. BOX 26427	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
	City State Zip Code MACON GA 31221-6427	Amount of Each Receipt this Period -300.00
	FEC ID number of contributing federal political committee.	CONTRIBUTION [MEMO ITEM] REFUND
	Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	Transaction ID: SA17.249200

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 0.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 70 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input checked="" type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) CECIL STATON FOR STATE SENATE		Date of Receipt																				
Mailing Address P.O. BOX 26427		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code MACON GA 31221-6427	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.	-1000.00																					
Name of Employer	Occupation	CONTRIBUTION [MEMO ITEM] REFUND																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00																					
		Transaction ID: SA17.249201																				

B. Full Name (Last, First, Middle Initial) FRIENDS OF MARK LUTTRELL		Date of Receipt																				
Mailing Address 6584 POPLAR AVENUE SUITE 200		<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>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	3		2	0	0	8													
City State Zip Code MEMPHIS TN 38138-0606	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.	-1000.00																					
Name of Employer	Occupation	CONTRIBUTION [MEMO ITEM] REFUND																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00																					
		Transaction ID: SA17.248995																				

C. Full Name (Last, First, Middle Initial) HOOSIERS SUPPORTING BUYER FOR CONGRESS		Date of Receipt																				
Mailing Address 200 N. MAIN STREET		<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	9		2	0	0	8													
City State Zip Code MONTICELLO IN 47960-2131	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.	-275.02																					
Name of Employer	Occupation	CONTRIBUTION [MEMO ITEM] REFUND																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 724.98																					
		Transaction ID: SA17.249121																				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 71 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b	<input type="checkbox"/> 17b 20a
<input checked="" type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) MCDONNELL FOR VIRGINIA		Date of Receipt																				
Mailing Address P.O. BOX 62386		<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>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	1		2	0	0	8													
City State Zip Code VIRGINIA BEACH VA 23466-2386	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.	-500.00																					
Name of Employer	Occupation	CONTRIBUTION [MEMO ITEM] REFUND																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00																					
		Transaction ID: SA17.249044																				

B. Full Name (Last, First, Middle Initial) GOOD GOVERNMENT FOR AMERICA COMMITTEE		Date of Receipt																				
Mailing Address P.O. BOX 87		<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>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	6		2	0	0	8													
City State Zip Code ALEXANDRIA VA 22313-0087	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.	4000.00																					
Name of Employer	Occupation	CONTRIBUTION																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00																					
		Transaction ID: SA17.248882																				

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 320
	(check only one)
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b
<input checked="" type="checkbox"/> 17b 20a	<input type="checkbox"/> 17c 20b
<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) ALEXANDER FOR SENATE		Date of Receipt																				
Mailing Address 1130 8TH AVE S		<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>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	6		2	0	0	8													
City State Zip Code NASHVILLE TN 37203	Amount of Each Receipt this Period 1687.41																					
FEC ID number of contributing federal political committee.		REFUND- EQUIPMENT PURCHASE Transaction ID: SA20A.12																				
Name of Employer	Occupation																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1687.41																					

B. Full Name (Last, First, Middle Initial) MELANIE A EDMONDS		Date of Receipt																				
Mailing Address 7216 TURNBORROW LN		<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>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	1		2	0	0	8													
City State Zip Code KNOXVILLE TN 37918	Amount of Each Receipt this Period 350.00																					
FEC ID number of contributing federal political committee.		REIMBURSEMENT- EQUIPMENT PURCHASE Transaction ID: SA20A.39																				
Name of Employer	Occupation																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00																					

C. Full Name (Last, First, Middle Initial) CORINNE A FALENCKI		Date of Receipt																				
Mailing Address 557 N PIEDMONT ST		<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>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	6		2	0	0	8													
City State Zip Code ARLINGTON VA 22203	Amount of Each Receipt this Period 625.00																					
FEC ID number of contributing federal political committee.		REIMBURSEMENT- EQUIPMENT PURCHASE Transaction ID: SA20A.7																				
Name of Employer	Occupation																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 625.00																					

SUBTOTAL of Receipts This Page (optional) ▶	2662.41
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 73 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b	<input checked="" type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) EMILY A FRANDSEN		Date of Receipt																				
Mailing Address 522 TERRACE ST		<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>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	7		2	0	0	8													
City State Zip Code TALLAHASSEE FL 32308		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		550.00																				
Name of Employer Occupation		REIMBURSEMENT- EQUIPMENT PURCHASE																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SA20A.21																				
Election Cycle-to-Date ▼ 550.00																						

B. Full Name (Last, First, Middle Initial) SOMER GRASSER		Date of Receipt																				
Mailing Address 736 GLOUCESTER FERRY RD		<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>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	6		2	0	0	8													
City State Zip Code GREENVILLE SC 29607		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		450.00																				
Name of Employer Occupation		REIMBURSEMENT- EQUIPMENT PURCHASE																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SA20A.5																				
Election Cycle-to-Date ▼ 450.00																						

C. Full Name (Last, First, Middle Initial) TREVOR GRAY		Date of Receipt																				
Mailing Address 11918 CROSSWIND CT		<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>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	1		2	0	0	8													
City State Zip Code RESTON VA 20194		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		550.00																				
Name of Employer Occupation		REIMBURSEMENT- EQUIPMENT PURCHASE																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SA20A.42																				
Election Cycle-to-Date ▼ 550.00																						

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 74 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b	<input checked="" type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) RICHARD HERTLING		Date of Receipt																				
Mailing Address 119 HESKETH ST		<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>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	6		2	0	0	8													
City State Zip Code CHEVY CHASE MD 20815		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		550.00																				
Name of Employer Occupation		REIMBURSEMENT- EQUIPMENT PURCHASE																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SA20A.1																				
Election Cycle-to-Date ▼ 550.00																						

B. Full Name (Last, First, Middle Initial) CHARLES KAYHART		Date of Receipt																				
Mailing Address 204 HAYNES BLVD		<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>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	1		2	0	0	8													
City State Zip Code GREENVILLE TN 37745		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		350.00																				
Name of Employer Occupation		REIMBURSEMENT- EQUIPMENT PURCHASE																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SA20A.41																				
Election Cycle-to-Date ▼ 350.00																						

C. Full Name (Last, First, Middle Initial) STEPHEN J KIDD		Date of Receipt																				
Mailing Address PO BOX 104		<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>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	7		2	0	0	8													
City State Zip Code GREENWOOD VA 22943		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		350.00																				
Name of Employer Occupation		REIMBURSEMENT- EQUIPMENT PURCHASE																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SA20A.23																				
Election Cycle-to-Date ▼ 350.00																						

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

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 75 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b	<input checked="" type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) WILLIAM LAFORGE	Date of Receipt MM / DD / YYYY 02 / 06 / 2008
	Mailing Address 12609 CAMBERLEY FOREST DR	Amount of Each Receipt this Period 450.00
	City State Zip Code OAK HILL VA 20171	
	FEC ID number of contributing federal political committee.	REIMBURSEMENT- EQUIPMENT PURCHASE
	Name of Employer Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 450.00	
		Transaction ID: SA20A.2

B.	Full Name (Last, First, Middle Initial) SUSAN MALLINI	Date of Receipt MM / DD / YYYY 02 / 21 / 2008
	Mailing Address 225 POINTE OVERLOOK DR	Amount of Each Receipt this Period 550.00
	City State Zip Code CHAPIN SC 29036	
	FEC ID number of contributing federal political committee.	REIMBURSEMENT- EQUIPMENT PURCHASE
	Name of Employer Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 550.00	
		Transaction ID: SA20A.40

C.	Full Name (Last, First, Middle Initial) AGUSTIN MORALES	Date of Receipt MM / DD / YYYY 02 / 22 / 2008
	Mailing Address 1381 ALAMEDA DR	Amount of Each Receipt this Period 3100.00
	City State Zip Code SPRING HILL FL 34609	
	FEC ID number of contributing federal political committee.	REIMBURSEMENT- EQUIPMENT PURCHASE
	Name of Employer Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3100.00	
		Transaction ID: SA20A.37

SUBTOTAL of Receipts This Page (optional)	4100.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 320
	(check only one)
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b
<input checked="" type="checkbox"/> 17b 20a	<input type="checkbox"/> 17c 20b
<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) ANDREW T PALMER		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8	
Mailing Address 742 E COLLEGE AVE		Amount of Each Receipt this Period 550.00	
City TALLAHASSEE	State FL	Zip Code 32301	
FEC ID number of contributing federal political committee.		REIMBURSEMENT- EQUIPMENT PURCHASE	
Name of Employer		Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 900.00	
		Transaction ID: SA20A.22	

B. Full Name (Last, First, Middle Initial) ANDREW T PALMER		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 8	
Mailing Address 742 E COLLEGE AVE		Amount of Each Receipt this Period 350.00	
City TALLAHASSEE	State FL	Zip Code 32301	
FEC ID number of contributing federal political committee.		REIMBURSEMENT- EQUIPMENT PURCHASE	
Name of Employer		Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 900.00	
		Transaction ID: SA20A.43	

C. Full Name (Last, First, Middle Initial) DEAN RICE		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8	
Mailing Address PO BOX 128349		Amount of Each Receipt this Period 450.00	
City NASHVILLE	State TN	Zip Code 37212	
FEC ID number of contributing federal political committee.		REIMBURSEMENT- EQUIPMENT PURCHASE	
Name of Employer		Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 450.00	
		Transaction ID: SA20A.3	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 77 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b	<input checked="" type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) BRYAN ROBERTS		Date of Receipt
	Mailing Address 210 SEAMON ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 1 / 2 0 0 8
	City	State	Zip Code
	KNOXVILLE	TN	37918
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer		Occupation	REIMBURSEMENT- EQUIPMENT PURCHASE
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	
		<input type="text"/> 3300.00	
			Amount of Each Receipt this Period <input type="text"/> 3300.00
			Transaction ID: SA20A.38

B.	Full Name (Last, First, Middle Initial) RICHARD H ROBERTS		Date of Receipt
	Mailing Address 2107 OLD TUSCULUM RD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 2 / 2 0 0 8
	City	State	Zip Code
	GREENVILLE	TN	37745
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer		Occupation	REIMBURSEMENT- EQUIPMENT PURCHASE
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	
		<input type="text"/> 350.00	
			Amount of Each Receipt this Period <input type="text"/> 350.00
			Transaction ID: SA20A.35

C.	Full Name (Last, First, Middle Initial) F TODD THOMSON		Date of Receipt
	Mailing Address 6388 MALLARD TRACE DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 0 7 / 2 0 0 8
	City	State	Zip Code
	TALLAHASSEE	FL	32312
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer		Occupation	REIMBURSEMENT- EQUIPMENT PURCHASE
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	
		<input type="text"/> 550.00	
			Amount of Each Receipt this Period <input type="text"/> 550.00
			Transaction ID: SA20A.20

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 4200.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 78 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b	<input checked="" type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) DAVID WIPPERMAN		Date of Receipt																				
Mailing Address PO BOX 128349		<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>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	6		2	0	0	8													
City State Zip Code NASHVILLE TN 37212	Amount of Each Receipt this Period 450.00																					
FEC ID number of contributing federal political committee.		REIMBURSEMENT- EQUIPMENT PURCHASE																				
Name of Employer	Occupation																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 900.00																					
		Transaction ID: SA20A.4																				

B. Full Name (Last, First, Middle Initial) DAVID WIPPERMAN		Date of Receipt																				
Mailing Address PO BOX 128349		<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>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	6		2	0	0	8													
City State Zip Code NASHVILLE TN 37212	Amount of Each Receipt this Period 450.00																					
FEC ID number of contributing federal political committee.		REIMBURSEMENT- EQUIPMENT PURCHASE																				
Name of Employer	Occupation																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 900.00																					
		Transaction ID: SA20A.6																				

C. Full Name (Last, First, Middle Initial) CHRISTIAN WOELK		Date of Receipt																				
Mailing Address 450 MASSACHUSETTS AVE NW #615		<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>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	1		2	0	0	8													
City State Zip Code WASHINGTON DC 20001	Amount of Each Receipt this Period 686.50																					
FEC ID number of contributing federal political committee.		REIMBURSEMENT- EQUIPMENT PURCHASE																				
Name of Employer	Occupation																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 686.50																					
		Transaction ID: SA20A.17																				

SUBTOTAL of Receipts This Page (optional) ▶	1586.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 79 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b	<input checked="" type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) JOSEPH A WOODRUFF		Date of Receipt																				
Mailing Address 511 UNION ST STE 2700		<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>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	6		2	0	0	8													
City State Zip Code NASHVILLE TN 37219		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		450.00																				
Name of Employer Occupation		REIMBURSEMENT- EQUIPMENT PURCHASE																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SA20A.8																				
Election Cycle-to-Date ▼ 450.00																						

B. Full Name (Last, First, Middle Initial) ABC		Date of Receipt																				
Mailing Address 147 COLUMBUS AVE		<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>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	7		2	0	0	8													
City State Zip Code NEW YORK NY 10023		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		3389.09																				
Name of Employer Occupation		REIMBURSEMENT- TRAVEL																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SA20A.24																				
Election Cycle-to-Date ▼ 12373.80																						

C. Full Name (Last, First, Middle Initial) ABC		Date of Receipt																				
Mailing Address 147 COLUMBUS AVE		<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>2</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	5		2	0	0	8													
City State Zip Code NEW YORK NY 10023		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		3081.70																				
Name of Employer Occupation		REIMBURSEMENT- TRAVEL																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SA20A.48																				
Election Cycle-to-Date ▼ 12373.80																						

SUBTOTAL of Receipts This Page (optional)	▶	6920.79
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 80 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b	<input checked="" type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) ABC	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 147 COLUMBUS AVE	Amount of Each Receipt this Period 3081.70
	City State Zip Code NEW YORK NY 10023	
	FEC ID number of contributing federal political committee.	REIMBURSEMENT- TRAVEL
	Name of Employer Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 12373.80	
		Transaction ID: SA20A.50

B.	Full Name (Last, First, Middle Initial) CBS NEWS	Date of Receipt MM / DD / YYYY 02 / 07 / 2008
	Mailing Address 524 W 57TH ST	Amount of Each Receipt this Period 3321.82
	City State Zip Code NEW YORK NY 10019	
	FEC ID number of contributing federal political committee.	REIMBURSEMENT- TRAVEL
	Name of Employer Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5893.68	
		Transaction ID: SA20A.28

C.	Full Name (Last, First, Middle Initial) CBS NEWS	Date of Receipt MM / DD / YYYY 02 / 21 / 2008
	Mailing Address 524 W 57TH ST	Amount of Each Receipt this Period 155.93
	City State Zip Code NEW YORK NY 10019	
	FEC ID number of contributing federal political committee.	REIMBURSEMENT- TRAVEL
	Name of Employer Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5893.68	
		Transaction ID: SA20A.44

SUBTOTAL of Receipts This Page (optional)	6559.45
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 81 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b	<input checked="" type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.		Full Name (Last, First, Middle Initial) FITZPATRICK PROPERTIES LLC		Date of Receipt	
Mailing Address PO BOX 7941		City COLUMBIA		M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 8	
State SC		Zip Code 29202		Amount of Each Receipt this Period 2398.75	
FEC ID number of contributing federal political committee.		Name of Employer		Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2398.75		REFUND- RENT	
				Transaction ID: SA20A.16	

B.		Full Name (Last, First, Middle Initial) GANNETT		Date of Receipt	
Mailing Address 100 NEW YORK AVE NW STE A		City WASHINGTON		M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 8	
State DC		Zip Code 20005		Amount of Each Receipt this Period 2923.29	
FEC ID number of contributing federal political committee.		Name of Employer		Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 5304.78		REIMBURSEMENT- TRAVEL	
				Transaction ID: SA20A.26	

C.		Full Name (Last, First, Middle Initial) GANNETT		Date of Receipt	
Mailing Address 1100 NEW YORK AVE NW STE A		City WASHINGTON		M M / D D / Y Y Y Y Y 0 2 / 2 7 / 2 0 0 8	
State DC		Zip Code 20005		Amount of Each Receipt this Period 1823.58	
FEC ID number of contributing federal political committee.		Name of Employer		Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 5304.78		REIMBURSEMENT- TRAVEL	
				Transaction ID: SA20A.49	

SUBTOTAL of Receipts This Page (optional)	▶	7145.62
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 82 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b	<input checked="" type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) HERITAGE COMMUNITY BANK		Date of Receipt																				
	Mailing Address PO BOX 428		<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>2</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	7		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	2		2	7		2	0	0	8													
	City	State	Zip Code																				
GREENVILLE	TN	37744																					
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period																					
		1705.00																					
Name of Employer		Occupation	REFUND- EQUIPMENT PURCHASE																				
Receipt For: 2008		Election Cycle-to-Date ▼	Transaction ID: SA20A.45																				
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General																						
<input type="checkbox"/> Other (specify) ▼		6055.00																					

B.	Full Name (Last, First, Middle Initial) HERITAGE COMMUNITY BANK		Date of Receipt																				
	Mailing Address PO BOX 428		<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>2</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	7		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	2		2	7		2	0	0	8													
	City	State	Zip Code																				
GREENVILLE	TN	37744																					
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period																					
		4350.00																					
Name of Employer		Occupation	REFUND- EQUIPMENT PURCHASE																				
Receipt For: 2008		Election Cycle-to-Date ▼	Transaction ID: SA20A.46																				
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General																						
<input type="checkbox"/> Other (specify) ▼		6055.00																					

C.	Full Name (Last, First, Middle Initial) LA TIMES		Date of Receipt																				
	Mailing Address 202 W 1ST ST		<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>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	2		0	7		2	0	0	8													
	City	State	Zip Code																				
LOS ANGELES	CA	90012																					
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period																					
		508.30																					
Name of Employer		Occupation	REIMBURSEMENT- TRAVEL																				
Receipt For: 2008		Election Cycle-to-Date ▼	Transaction ID: SA20A.29																				
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General																						
<input type="checkbox"/> Other (specify) ▼		1912.14																					

SUBTOTAL of Receipts This Page (optional)	▶	6563.30
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 83 / 320
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MENTZER MEDIA SERVICES INC		Date of Receipt
	Mailing Address 600 FAIRMOUNT AVE STE 306		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 0 6 / 2 0 0 8
	City	State	Zip Code
	TOWSON	MD	21286
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer		Occupation	Amount of Each Receipt this Period
			<input type="text"/> 3600.00
Receipt For: 2008		Election Cycle-to-Date ▼	REFUND- MEDIA
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text"/>	<input type="text"/> 3600.00
<input type="checkbox"/> Other (specify) ▼			Transaction ID: SA20A.14

B.	Full Name (Last, First, Middle Initial) POLITICO		Date of Receipt
	Mailing Address 134 6TH AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 0 7 / 2 0 0 8
	City	State	Zip Code
	BROOKLYN	NY	11217
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer		Occupation	Amount of Each Receipt this Period
			<input type="text"/> 18.95
Receipt For: 2008		Election Cycle-to-Date ▼	REIMBURSEMENT- TRAVEL
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text"/>	<input type="text"/> 1346.04
<input type="checkbox"/> Other (specify) ▼			Transaction ID: SA20A.25

C.	Full Name (Last, First, Middle Initial) POLITICO		Date of Receipt
	Mailing Address 134 6TH AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 3 / 2 0 0 8
	City	State	Zip Code
	BROOKLYN	NY	11217
	FEC ID number of contributing federal political committee.		<input type="text"/>
Name of Employer		Occupation	Amount of Each Receipt this Period
			<input type="text"/> 21.49
Receipt For: 2008		Election Cycle-to-Date ▼	REIMBURSEMENT- TRAVEL
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text"/>	<input type="text"/> 1346.04
<input type="checkbox"/> Other (specify) ▼			Transaction ID: SA20A.30

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3640.44
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 84 / 320
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) R Z SAFELY		Date of Receipt																				
Mailing Address PO BOX 10095		<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>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	7		2	0	0	8													
City State Zip Code TALLAHASSEE FL 32302		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		550.00																				
Name of Employer Occupation		REFUND- EQUIPMENT PURCHASE																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SA20A.19																				
Election Cycle-to-Date ▼ 550.00																						

B. Full Name (Last, First, Middle Initial) REGENCY PLAZA LLC		Date of Receipt																				
Mailing Address 6600 WESTOWN PKY STE 220		<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>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	6		2	0	0	8													
City State Zip Code DES MOINES IA 50266		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		680.00																				
Name of Employer Occupation		REFUND- RENT																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SA20A.15																				
Election Cycle-to-Date ▼ 680.00																						

C. Full Name (Last, First, Middle Initial) REPUBLICAN TRUST BUILDING CORP		Date of Receipt																				
Mailing Address 1913 MARION ST		<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>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	1		2	0	0	8													
City State Zip Code COLUMBIA SC 29201		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		250.00																				
Name of Employer Occupation		REFUND- EQUIPMENT PURCHASE																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SA20A.18																				
Election Cycle-to-Date ▼ 250.00																						

SUBTOTAL of Receipts This Page (optional)	▶	1480.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 85 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b	<input checked="" type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) SCE&G	Date of Receipt MM / DD / YYYY 02 / 06 / 2008
	Mailing Address 1400 LADY ST	Amount of Each Receipt this Period 307.81
	City State Zip Code COLUMBIA SC 29218	
	FEC ID number of contributing federal political committee.	REFUND- UTILITIES
	Name of Employer Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 307.81	
		Transaction ID: SA20A.13

B.	Full Name (Last, First, Middle Initial) SCRIPPS	Date of Receipt MM / DD / YYYY 02 / 25 / 2008
	Mailing Address 1090 VERMONT AVE NW STE 1000	Amount of Each Receipt this Period 424.86
	City State Zip Code WASHINGTON DC 20005	
	FEC ID number of contributing federal political committee.	REIMBURSEMENT- TRAVEL
	Name of Employer Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 424.86	
		Transaction ID: SA20A.47

C.	Full Name (Last, First, Middle Initial) STARBOARD COMMUNICATIONS	Date of Receipt MM / DD / YYYY 02 / 06 / 2008
	Mailing Address 1043 BARR RD	Amount of Each Receipt this Period 200.00
	City State Zip Code LEXINGTON SC 29072	
	FEC ID number of contributing federal political committee.	REFUND- FURNITURE PURCHASE
	Name of Employer Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	
		Transaction ID: SA20A.10

SUBTOTAL of Receipts This Page (optional)	932.67
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 86 / 320
	(check only one)	
<input type="checkbox"/> 16 19a	<input type="checkbox"/> 17a 19b	<input checked="" type="checkbox"/> 17b 20a
<input type="checkbox"/> 17c 20b	<input type="checkbox"/> 17d 20c	<input type="checkbox"/> 18 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) STARBOARD COMMUNICATIONS	Date of Receipt MM / DD / YYYY 02 / 06 / 2008
	Mailing Address 1043 BARR RD	Amount of Each Receipt this Period 1050.00
	City State Zip Code LEXINGTON SC 29072	REFUND- EQUIPMENT PURCHASE
	FEC ID number of contributing federal political committee.	Transaction ID: SA20A.9
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1250.00	

B.	Full Name (Last, First, Middle Initial) TARGET UP	Date of Receipt MM / DD / YYYY 02 / 06 / 2008
	Mailing Address PO BOX 682768	Amount of Each Receipt this Period 4350.00
	City State Zip Code FRANKLIN TN 37068	REFUND- EQUIPMENT PURCHASE
	FEC ID number of contributing federal political committee.	Transaction ID: SA20A.11
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4350.00	

C.	Full Name (Last, First, Middle Initial) THE NEW YORK TIMES	Date of Receipt MM / DD / YYYY 02 / 07 / 2008
	Mailing Address 229 WEST 43RD ST	Amount of Each Receipt this Period 615.90
	City State Zip Code NEW YORK NY 10001	REIMBURSEMENT- TRAVEL
	FEC ID number of contributing federal political committee.	Transaction ID: SA20A.27
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1719.41	

SUBTOTAL of Receipts This Page (optional)	6015.90
TOTAL This Period (last page this line number only)	55957.08

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 320	
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) WACHOVIA		Date of Receipt
	Mailing Address 230 FOURTH AVE N		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	NASHVILLE	TN	37219
	FEC ID number of contributing federal political committee.		<input type="text" value=""/>
Name of Employer		Occupation	Amount of Each Receipt this Period
<input type="checkbox"/> Other (specify) ▼			<input type="text" value="3281.87"/>
Receipt For: 2008		Election Cycle-to-Date ▼	INTEREST EARNINGS
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="48462.81"/>	
			Transaction ID: SA21A.1

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="3281.87"/>
TOTAL This Period (last page this line number only)	<input type="text" value="3281.87"/>

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
CHARLES ADAMS

Transaction ID: SB23.52

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	0	8

Mailing Address 1760 OLD MEADOW RD STE 350

Amount of Each Disbursement this Period

360.00

City State Zip Code
MCLEAN VA 22102

Purpose of Disbursement
TRAVEL

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
ALLISON P BARRETT

Transaction ID: SB23.53

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	0	8

Mailing Address 1760 OLD MEADOW RD STE 350

Amount of Each Disbursement this Period

360.00

City State Zip Code
MCLEAN VA 22102

Purpose of Disbursement
TRAVEL

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
ALLISON P BARRETT

Transaction ID: SB23.65

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	0	8

Mailing Address 1760 OLD MEADOW RD STE 350

Amount of Each Disbursement this Period

499.90

City State Zip Code
MCLEAN VA 22102

Purpose of Disbursement
TRAVEL

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1219.90

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

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SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) TERRELL E BENHAM	Transaction ID: SB23.137 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8	
	Mailing Address 2601 GARDEN BEND		
	City BENTON State AR Zip Code 72015	Amount of Each Disbursement this Period 10831.64	
	Purpose of Disbursement TRAVEL	Category/ Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) BRODY BLACK	Transaction ID: SB23.26 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8	
	Mailing Address 203 WOODY STATION 2		
	City CHARLOTTESVILLE State VA Zip Code 22904	Amount of Each Disbursement this Period 125.00	
	Purpose of Disbursement STRATEGIC CONSULTING	Category/ Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) SUZANNE E BROWNING	Transaction ID: SB23.115 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 8	
	Mailing Address 1130 8TH AVE S		
	City NASHVILLE State TN Zip Code 37203	Amount of Each Disbursement this Period 3469.90	
	Purpose of Disbursement PAYROLL	Category/ Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	14426.54
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) SUZANNE E BROWNING Mailing Address 1130 8TH AVE S City NASHVILLE State TN Zip Code 37203 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.116 Date of Disbursement <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>
	Amount of Each Disbursement this Period <input type="text" value="3469.90"/>
	<input type="text" value=""/>
	<input type="text" value=""/>
B. Full Name (Last, First, Middle Initial) SUZANNE E BROWNING Mailing Address 1130 8TH AVE S City NASHVILLE State TN Zip Code 37203 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.19 Date of Disbursement <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>
	Amount of Each Disbursement this Period <input type="text" value="83.65"/>
	<input type="text" value=""/>
	<input type="text" value=""/>
C. Full Name (Last, First, Middle Initial) SUZANNE E BROWNING Mailing Address 1130 8TH AVE S City NASHVILLE State TN Zip Code 37203 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.99 Date of Disbursement <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>
	Amount of Each Disbursement this Period <input type="text" value="1778.04"/>
	<input type="text" value=""/>
	<input type="text" value=""/>

SUBTOTAL of Disbursements This Page (optional)

5331.59

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) BLAKE BRYSON	Transaction ID: SB23.36 Date of Disbursement MM / DD / YYYY 02 / 07 / 2008
	Mailing Address 1700 WADE HAMPTON BLVD	Amount of Each Disbursement this Period 250.00
	City GREENVILLE State SC Zip Code 29614	
	Purpose of Disbursement STRATEGIC CONSULTING	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) BILL BUNTING	Transaction ID: SB23.64 Date of Disbursement MM / DD / YYYY 02 / 07 / 2008
	Mailing Address PO BOX 5039	Amount of Each Disbursement this Period 492.72
	City HUDSON State FL Zip Code 34674	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) CHRIS BURGER	Transaction ID: SB23.43 Date of Disbursement MM / DD / YYYY 02 / 07 / 2008
	Mailing Address 1373 LIBERTY PIKE	Amount of Each Disbursement this Period 285.00
	City FRANKLIN State TN Zip Code 37067	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	1027.72
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) JOSEPH J CELLA	Transaction ID: SB23.40 Date of Disbursement
	Mailing Address 1760 OLD MEADOW RD STE 350	<input type="text" value="02"/> <input type="text" value="21"/> / <input type="text" value="2008"/>
	City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="270.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JOSEPH J CELLA	Transaction ID: SB23.76 Date of Disbursement
	Mailing Address 1130 8TH AVE S	<input type="text" value="02"/> <input type="text" value="07"/> / <input type="text" value="2008"/>
	City NASHVILLE State TN Zip Code 37203	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="627.88"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ELIZABETH CHRISTOFFERSEN	Transaction ID: SB23.45 Date of Disbursement
	Mailing Address 23 W WEBSTER ST	<input type="text" value="02"/> <input type="text" value="07"/> / <input type="text" value="2008"/>
	City MANCHESTER State NH Zip Code 03104	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="307.04"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1204.92"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) DANIEL E CONSTON	Transaction ID: SB23.56 Date of Disbursement 02 / 27 / 2008	
	Mailing Address 1760 OLD MEADOW RD STE 350		
	City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period	405.00
	Purpose of Disbursement TRAVEL		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) ALEX CORTES	Transaction ID: SB23.33 Date of Disbursement 02 / 07 / 2008	
	Mailing Address 55 AL WEEDON		
	City CHARLOTTESVILLE State VA Zip Code 22904	Amount of Each Disbursement this Period	215.00
	Purpose of Disbursement STRATEGIC CONSULTING		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) CRAIG A CRISCOE	Transaction ID: SB23.50 Date of Disbursement 02 / 07 / 2008	
	Mailing Address 6421 ROYAL WOODS DR		
	City FORT MYERS State FL Zip Code 33908	Amount of Each Disbursement this Period	352.38
	Purpose of Disbursement TRAVEL		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	972.38
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
SAMUEL T. CRUMP, SR.

Transaction ID: SB23.248992
Date of Disbursement

Mailing Address 2827 W. ADVENTURE DR.

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	0	8

City ANTHEM State AZ Zip Code 85086-1790

Amount of Each Disbursement this Period

65.19

Purpose of Disbursement
IN-KIND- PRINTING

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
ANTHONY R DOLAN

Transaction ID: SB23.138
Date of Disbursement

Mailing Address 6641 WAKEFIELD DR APT 619

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	0	8

City ALEXANDRIA State VA Zip Code 22307

Amount of Each Disbursement this Period

11000.00

Purpose of Disbursement
MEDIA

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
JOHN C EASON

Transaction ID: SB23.57
Date of Disbursement

Mailing Address 1760 OLD MEADOW RD STE 350

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	0	8

City MCLEAN State VA Zip Code 22102

Amount of Each Disbursement this Period

405.00

Purpose of Disbursement
TRAVEL

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

11470.19

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) JOHN C EASON	Transaction ID: SB23.58
	Mailing Address 1760 OLD MEADOW RD 3RD FL	Date of Disbursement MM / DD / YYYY 02 / 21 / 2008
	City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period 405.00
	Purpose of Disbursement TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) RANDY ENWRIGHT	Transaction ID: SB23.93
	Mailing Address PO BOX 10362	Date of Disbursement MM / DD / YYYY 02 / 07 / 2008
	City TALLAHASSEE State FL Zip Code 32302	Amount of Each Disbursement this Period 1359.86
	Purpose of Disbursement TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) CANDY C. FAZAKERLEY	Transaction ID: SB23.249002
	Mailing Address P.O. BOX 2070	Date of Disbursement MM / DD / YYYY 02 / 05 / 2008
	City MIDDLEBURG State VA Zip Code 20118-2070	Amount of Each Disbursement this Period 1350.00
	Purpose of Disbursement IN-KIND- VALET SERVICES REFUNDED \$1,350.	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	3114.86
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) CHRISTIAN FINNIGAN	Transaction ID: SB23.68 Date of Disbursement 02 / 21 / 2008
	Mailing Address 1760 OLD MEADOW RD STE 350	Amount of Each Disbursement this Period 585.00
	City MCLEAN State VA Zip Code 22102	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) CHRISTIAN FINNIGAN	Transaction ID: SB23.82 Date of Disbursement 02 / 07 / 2008
	Mailing Address 1760 OLD MEADOW RD STE 350	Amount of Each Disbursement this Period 749.18
	City MCLEAN State VA Zip Code 22102	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) TREVOR GARRETT	Transaction ID: SB23.249038 Date of Disbursement 02 / 26 / 2008
	Mailing Address 1130 8TH AVENUE SOUTH	Amount of Each Disbursement this Period 183.03
	City NASHVILLE State TN Zip Code 37203-4724	
	Purpose of Disbursement IN-KIND- TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	1517.21
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) TREVOR J GARRETT	Transaction ID: SB23.23
	Mailing Address 1130 8TH AVE S	Date of Disbursement MM / DD / YYYY 02 / 20 / 2008
	City NASHVILLE State TN Zip Code 37203	Amount of Each Disbursement this Period 100.85
	Purpose of Disbursement PHONE EXPENSE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) TREVOR J GARRETT	Transaction ID: SB23.79
	Mailing Address 1130 8TH AVE S	Date of Disbursement MM / DD / YYYY 02 / 15 / 2008
	City NASHVILLE State TN Zip Code 37203	Amount of Each Disbursement this Period 708.34
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) TREVOR J GARRETT	Transaction ID: SB23.80
	Mailing Address 1130 8TH AVE S	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City NASHVILLE State TN Zip Code 37203	Amount of Each Disbursement this Period 708.34
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1517.53
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MICHAEL GASKE	Transaction ID: SB23.155
	Mailing Address 1760 OLD MEADOW RD STE 350	Date of Disbursement 02 / 07 / 2008
	City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period -22.02
	Purpose of Disbursement VOID CHECK	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MICHAEL S GASKE	Transaction ID: SB23.62
	Mailing Address 1760 OLD MEADOW RD STE 350	Date of Disbursement 02 / 21 / 2008
	City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period 450.00
	Purpose of Disbursement TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MICHAEL S GASKE	Transaction ID: SB23.78
	Mailing Address 1760 OLD MEADOW RD STE 350	Date of Disbursement 02 / 07 / 2008
	City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period 685.57
	Purpose of Disbursement TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1113.55
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) KATHERINE M GORDON	Transaction ID: SB23.74 Date of Disbursement 02 / 21 / 2008	
	Mailing Address 2002 GREENWOOD DR		
	City TALLAHASSEE State FL Zip Code 32303	Amount of Each Disbursement this Period	602.32
	Purpose of Disbursement TRAVEL		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) BEAU J HAMMOND	Transaction ID: SB23.31 Date of Disbursement 02 / 21 / 2008	
	Mailing Address 1760 OLD MEADOW RD STE 350		
	City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period	180.00
	Purpose of Disbursement TRAVEL		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) BEAU J HAMMOND	Transaction ID: SB23.72 Date of Disbursement 02 / 15 / 2008	
	Mailing Address 1760 OLD MEADOW RD STE 350		
	City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period	598.09
	Purpose of Disbursement PAYROLL		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1380.41
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
BEAU J HAMMOND

Transaction ID: SB23.73
Date of Disbursement

Mailing Address 1760 OLD MEADOW RD STE 350

/ /

City State Zip Code
MCLEAN VA 22102

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
RICHARD A HERTLING

Transaction ID: SB23.126
Date of Disbursement

Mailing Address 1760 OLD MEADOW RD STE 350

/ /

City State Zip Code
MCLEAN VA 22102

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
DONALD R. HESSELBROCK

Transaction ID: SB23.248990
Date of Disbursement

Mailing Address 10045 N. 58TH PLACE

/ /

City State Zip Code
SCOTTSDALE AZ 85253-1101

Amount of Each Disbursement this Period

Purpose of Disbursement
IN-KIND- PRINTING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) BLAIR E HOOD	Transaction ID: SB23.32	
	Mailing Address 1760 OLD MEADOW RD STE 350	Date of Disbursement 02 / 21 / 2008	
	City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period 180.00	
	Purpose of Disbursement TRAVEL	Category/Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

B.	Full Name (Last, First, Middle Initial) JORDAN HOSTETTER	Transaction ID: SB23.100	
	Mailing Address 1717 CROSSFIELD DR	Date of Disbursement 02 / 07 / 2008	
	City LANCASTER State PA Zip Code 17603	Amount of Each Disbursement this Period 1829.05	
	Purpose of Disbursement TRAVEL	Category/Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

C.	Full Name (Last, First, Middle Initial) LEONA JOHNSTON	Transaction ID: SB23.248991	
	Mailing Address 11011 N. ZEPHYR DRIVE UNIT 115	Date of Disbursement 02 / 21 / 2008	
	City FOUNTAIN HILLS State AZ Zip Code 85268-5505	Amount of Each Disbursement this Period 50.00	
	Purpose of Disbursement IN-KIND- PRINTING	Category/Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

SUBTOTAL of Disbursements This Page (optional)	▶	2059.05
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) JORDAN KAREM	Transaction ID: SB23.114 Date of Disbursement
	Mailing Address 211 10TH ST NE	<input type="text" value="02"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="3287.83"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) RHONDA KING	Transaction ID: SB23.248993 Date of Disbursement
	Mailing Address 9901 S. SAN MARCOS CIRCLE	<input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City GOODYEAR State AZ Zip Code 85338-7125	Amount of Each Disbursement this Period
	Purpose of Disbursement IN-KIND- PRINTING	<input type="text" value="50.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) CLAYTON D LAFORGE	Transaction ID: SB23.69 Date of Disbursement
	Mailing Address 1760 OLD MEADOW RD STE 350	<input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="585.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) CLAYTON D LAFORGE	Transaction ID: SB23.81 Date of Disbursement 02 / 07 / 2008
	Mailing Address 1760 OLD MEADOW RD STE 350	Amount of Each Disbursement this Period 723.18
	City MCLEAN State VA Zip Code 22102	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) LEAH G LEVY	Transaction ID: SB23.108 Date of Disbursement 02 / 15 / 2008
	Mailing Address 1760 OLD MEADOW RD STE 350	Amount of Each Disbursement this Period 2747.39
	City MCLEAN State VA Zip Code 22102	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) LEAH G LEVY	Transaction ID: SB23.109 Date of Disbursement 02 / 29 / 2008
	Mailing Address 1760 OLD MEADOW RD STE 350	Amount of Each Disbursement this Period 2747.39
	City MCLEAN State VA Zip Code 22102	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)

6217.96

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) LEAH G LEVY	Transaction ID: SB23.39 Date of Disbursement 02 / 21 / 2008
	Mailing Address 1130 8TH AVE S	Amount of Each Disbursement this Period 270.00
	City NASHVILLE State TN Zip Code 37203	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) ANNE M LOCKE	Transaction ID: SB23.4 Date of Disbursement 02 / 07 / 2008
	Mailing Address 1130 8TH AVE S	Amount of Each Disbursement this Period 10.93
	City NASHVILLE State TN Zip Code 37203	
	Purpose of Disbursement OFFICE SUPPLIES	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) NCHOLAS F LUNA	Transaction ID: SB23.94 Date of Disbursement 02 / 27 / 2008
	Mailing Address 1760 OLD MEADOW RD STE 350	Amount of Each Disbursement this Period 1390.90
	City MCLEAN State VA Zip Code 22102	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶

1671.83

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) DAVID M MANSOURI	Transaction ID: SB23.24 Date of Disbursement 02 / 07 / 2008	
	Mailing Address 1130 8TH AVE S		
	City NASHVILLE State TN Zip Code 37203	Amount of Each Disbursement this Period	102.10
	Purpose of Disbursement EQUIPMENT MAINTENANCE		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) STEPHANIE L MCNEES	Transaction ID: SB23.70 Date of Disbursement 02 / 21 / 2008	
	Mailing Address 1760 OLD MEADOW RD STE 350		
	City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period	585.00
	Purpose of Disbursement TRAVEL		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) BOBBIE N MURPHY	Transaction ID: SB23.111 Date of Disbursement 02 / 15 / 2008	
	Mailing Address 1130 8TH AVE S		
	City NASHVILLE State TN Zip Code 37203	Amount of Each Disbursement this Period	3048.96
	Purpose of Disbursement PAYROLL		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	3736.06
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) BOBBIE N MURPHY	Transaction ID: SB23.112 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 1130 8TH AVE S		
	City NASHVILLE State TN Zip Code 37203	Amount of Each Disbursement this Period	3048.96
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) WENDY NANNEY	Transaction ID: SB23.37 Date of Disbursement 02 / 07 / 2008	
	Mailing Address 103 HERMITAGE RD		
	City GREENVILLE State SC Zip Code 29615	Amount of Each Disbursement this Period	250.00
	Purpose of Disbursement STRATEGIC CONSULTING Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) TIMOTHY R NUSSBAUM	Transaction ID: SB23.63 Date of Disbursement 02 / 07 / 2008	
	Mailing Address 1760 OLD MEADOW RD 3RD FL		
	City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period	482.04
	Purpose of Disbursement TRAVEL Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3781.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
SHANNON ROYCE

Mailing Address 419 LINCOLN AVE

City FALLS CHURCH State VA Zip Code 22046

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.118
Date of Disbursement

2^M / 7^D / 0^Y0^Y8^Y

Amount of Each Disbursement this Period

4433.33

B.

Full Name (Last, First, Middle Initial)
JEFFREY C SADOSKY

Mailing Address 1760 OLD MEADOW RD STE 350

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.46
Date of Disbursement

2^M / 1^D / 0^Y0^Y8^Y

Amount of Each Disbursement this Period

325.00

C.

Full Name (Last, First, Middle Initial)
JEFFREY C SADOSKY

Mailing Address 1760 OLD MEADOW RD STE 350

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.91
Date of Disbursement

2^M / 5^D / 0^Y0^Y8^Y

Amount of Each Disbursement this Period

1218.07

SUBTOTAL of Disbursements This Page (optional) ▶

5976.40

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) WILLIAM SALIER	Transaction ID: SB23.66
	Mailing Address 23541 260TH ST	Date of Disbursement MM / DD / YYYY 02 / 07 / 2008
	City NORA SPRINGS State IA Zip Code 50458	Amount of Each Disbursement this Period 535.77
	Purpose of Disbursement TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) THOMAS A SMITH	Transaction ID: SB23.124
	Mailing Address 4533 SHYS HILL RD	Date of Disbursement MM / DD / YYYY 02 / 07 / 2008
	City NASHVILLE State TN Zip Code 37215	Amount of Each Disbursement this Period 5900.00
	Purpose of Disbursement FINANCE CONSULTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DAVE SONNSTON	Transaction ID: SB23.61
	Mailing Address 1940 DUKE ST STE 200	Date of Disbursement MM / DD / YYYY 02 / 20 / 2008
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 436.96
	Purpose of Disbursement TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6872.73
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) TIM UNES	Transaction ID: SB23.27 Date of Disbursement MM / DD / YYYY 02 / 21 / 2008
	Mailing Address 211 N UNION ST STE 220	Amount of Each Disbursement this Period 153.00
	City ALEXANDRIA State VA Zip Code 22314	
	Purpose of Disbursement TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) CATHY VIOLA	Transaction ID: SB23.83 Date of Disbursement MM / DD / YYYY 02 / 20 / 2008
	Mailing Address 9420 BERKSHIRE CT	Amount of Each Disbursement this Period 775.00
	City BRENTWOOD State TN Zip Code 37027	
	Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) CATHY J VIOLA	Transaction ID: SB23.89 Date of Disbursement MM / DD / YYYY 02 / 07 / 2008
	Mailing Address 9420 BERKSHIRE CT	Amount of Each Disbursement this Period 1175.00
	City BRENTWOOD State TN Zip Code 37027	
	Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2103.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) ROGER J WHYTE, II	Transaction ID: SB23.158 Date of Disbursement 02 / 15 / 2008	
	Mailing Address 1760 OLD MEADOW RD STE 350		
	City: MCLEAN State: VA Zip Code: 22102	Amount of Each Disbursement this Period	-1325.88
	Purpose of Disbursement: VOID CHECK Candidate Name: _____ Category/Type: _____		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		
B.	Full Name (Last, First, Middle Initial) ROGER J WHYTE, II	Transaction ID: SB23.51 Date of Disbursement 02 / 21 / 2008	
	Mailing Address 1760 OLD MEADOW RD STE 350		
	City: MCLEAN State: VA Zip Code: 22102	Amount of Each Disbursement this Period	360.00
	Purpose of Disbursement: TRAVEL Candidate Name: _____ Category/Type: _____		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		
C.	Full Name (Last, First, Middle Initial) ROGER J WHYTE, II	Transaction ID: SB23.90 Date of Disbursement 02 / 07 / 2008	
	Mailing Address 1760 OLD MEADOW RD STE 350		
	City: MCLEAN State: VA Zip Code: 22102	Amount of Each Disbursement this Period	1203.69
	Purpose of Disbursement: TRAVEL/FOOD/BEVERAGE Candidate Name: _____ Category/Type: _____		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) ▶	237.81
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) ROGER J WHYTE, II	Transaction ID: SB23.92 Date of Disbursement 02 / 07 / 2008
	Mailing Address 1760 OLD MEADOW RD STE 350	Amount of Each Disbursement this Period 1325.88
	City MCLEAN State VA Zip Code 22102	
	Purpose of Disbursement PAYROLL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) RJ YOUNG	Transaction ID: SB23.47 Date of Disbursement 02 / 07 / 2008
	Mailing Address PO BOX 40623	Amount of Each Disbursement this Period 329.39
	City NASHVILLE State TN Zip Code 37204	
	Purpose of Disbursement EQUIPMENT RENTAL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) I-HSIANG YU	Transaction ID: SB23.101 Date of Disbursement 02 / 21 / 2008
	Mailing Address 6658 AVIGNON BLVD	Amount of Each Disbursement this Period 1900.00
	City FALLS CHURCH State VA Zip Code 22043	
	Purpose of Disbursement RENT	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	3555.27
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
ABERNATHY STRATEGIES

Transaction ID: SB23.121

Date of Disbursement

Mailing Address PO BOX 11511

02 / 07 / 2008

City CHARLESTON State WV Zip Code 25339

Amount of Each Disbursement this Period

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

5000.00

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
AIRNET

Transaction ID: SB23.96

Date of Disbursement

Mailing Address PO BOX 11181

02 / 07 / 2008

City CHATTANOOGA State TN Zip Code 37401

Amount of Each Disbursement this Period

Purpose of Disbursement
WEB SVC

1452.00

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
ALL STAR PHOTOGRAPHICS INC

Transaction ID: SB23.77

Date of Disbursement

Mailing Address 12 REDHAWK ST

02 / 07 / 2008

City IRVINE State CA Zip Code 92604

Amount of Each Disbursement this Period

Purpose of Disbursement
PHOTOGRAPHY SVC

681.19

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

7133.19

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS - COURTNEY

Mailing Address PO BOX 360001

City FT LAUDERDALE State FL Zip Code 33336-0000

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB.1000

Date of Disbursement

02 / 20 / 2008

Amount of Each Disbursement this Period

138.49

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

Mailing Address 6905 ROCKLEDGE DR

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.1

Date of Disbursement

02 / 20 / 2008

Amount of Each Disbursement this Period

6.70

[MEMO ITEM]

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

Mailing Address 6905 ROCKLEDGE DR

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.8

Date of Disbursement

02 / 20 / 2008

Amount of Each Disbursement this Period

6.93

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

138.49

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial)
HMS HOST

Mailing Address 6905 ROCKLEDGE DR

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SBD.9
Date of Disbursement: 02 / 20 / 2008

Amount of Each Disbursement this Period: 30.42

[MEMO ITEM]

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

Mailing Address 828 GERVAIS ST

City COLUMBIA State SC Zip Code 29201

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SBD.7
Date of Disbursement: 02 / 20 / 2008

Amount of Each Disbursement this Period: 54.92

[MEMO ITEM]

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

Mailing Address MCDONALDS PLZ

City OAK BROOK State IL Zip Code 60523

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SBD.6
Date of Disbursement: 02 / 20 / 2008

Amount of Each Disbursement this Period: 1.64

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ► 0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) STARBUCKS	Transaction ID: SBD.3 Date of Disbursement 02 / 20 / 2008
	Mailing Address 3706 HILLSBORO PK	Amount of Each Disbursement this Period 7.94
	City NASHVILLE State TN Zip Code 37215	
	Purpose of Disbursement FOOD/BEVERAGE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) STARBUCKS	Transaction ID: SBD.4 Date of Disbursement 02 / 20 / 2008
	Mailing Address 3706 HILLSBORO PK	Amount of Each Disbursement this Period 11.39
	City NASHVILLE State TN Zip Code 37215	
	Purpose of Disbursement FOOD/BEVERAGE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) STARBUCKS	Transaction ID: SBD.5 Date of Disbursement 02 / 20 / 2008
	Mailing Address 3706 HILLSBORO PK	Amount of Each Disbursement this Period 8.12
	City NASHVILLE State TN Zip Code 37215	
	Purpose of Disbursement FOOD/BEVERAGE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <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 3P)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) WENDYS	Transaction ID: SBD.2 Date of Disbursement 02 / 20 / 2008
	Mailing Address ONE DAVE THOMAS BLVD	Amount of Each Disbursement this Period 10.43
	City DUBLIN State OH Zip Code 43017	
	Purpose of Disbursement FOOD/BEVERAGE	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS - TRAVEL	Transaction ID: SB.1001 Date of Disbursement 02 / 26 / 2008
	Mailing Address PO BOX 360001	Amount of Each Disbursement this Period 94379.25
	City FT LAUDERDALE State FL Zip Code 33336-0000	
	Purpose of Disbursement CREDIT CARD PAYMENT	
	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:	

C.	Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SBD.151 Date of Disbursement 02 / 26 / 2008
	Mailing Address 4333 AMON CARTER BLVD	Amount of Each Disbursement this Period 696.00
	City FORT WORTH State TX Zip Code 76155	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

94379.25

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	Transaction ID: SBD.98 Date of Disbursement 02 / 26 / 2008
	Mailing Address 4333 AMON CARTER BLVD	
	City FORT WORTH State TX Zip Code 76155	Amount of Each Disbursement this Period 695.80
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	
B.	Full Name (Last, First, Middle Initial) AVIS RENT A CAR	Transaction ID: SBD.145 Date of Disbursement 02 / 26 / 2008
	Mailing Address 6 SYLVAN WAY	
	City PARSIPPANY State NJ Zip Code 07054	Amount of Each Disbursement this Period 514.86
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	
C.	Full Name (Last, First, Middle Initial) AVIS RENT A CAR	Transaction ID: SBD.160 Date of Disbursement 02 / 26 / 2008
	Mailing Address 6 SYLVAN WAY	
	City PARSIPPANY State NJ Zip Code 07054	Amount of Each Disbursement this Period 1835.20
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <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 3P)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) AVIS RENT A CAR Mailing Address 6 SYLVAN WAY City PARSIPPANY State NJ Zip Code 07054 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.161 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 6.42 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) AVIS RENT A CAR Mailing Address 6 SYLVAN WAY City PARSIPPANY State NJ Zip Code 07054 Purpose of Disbursement TRAAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.162 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 90.05 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) AVIS RENT A CAR Mailing Address 6 SYLVAN WAY City PARSIPPANY State NJ Zip Code 07054 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.163 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 2707.18 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) AVIS RENT A CAR	Transaction ID: SBD.164 Date of Disbursement 02 / 26 / 2008
	Mailing Address 6 SYLVAN WAY	Amount of Each Disbursement this Period 1011.04
	City PARSIPPANY State NJ Zip Code 07054	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) AVIS RENT A CAR	Transaction ID: SBD.165 Date of Disbursement 02 / 26 / 2008
	Mailing Address 6 SYLVAN WAY	Amount of Each Disbursement this Period 1770.04
	City PARSIPPANY State NJ Zip Code 07054	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) AVIS RENT A CAR	Transaction ID: SBD.220 Date of Disbursement 02 / 26 / 2008
	Mailing Address 6 SYLVAN WAY	Amount of Each Disbursement this Period 318.41
	City PARSIPPANY State NJ Zip Code 07054	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

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

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) AVIS RENT A CAR Mailing Address 6 SYLVAN WAY City PARSIPPANY State NJ Zip Code 07054 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.235 Date of Disbursement 02 / 26 / 2008
	Amount of Each Disbursement this Period 132.29 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) AVIS RENT A CAR Mailing Address 6 SYLVAN WAY City PARSIPPANY State NJ Zip Code 07054 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.337 Date of Disbursement 02 / 26 / 2008
	Amount of Each Disbursement this Period 1589.17 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) AVIS RENT A CAR Mailing Address 6 SYLVAN WAY City PARSIPPANY State NJ Zip Code 07054 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.368 Date of Disbursement 02 / 26 / 2008
	Amount of Each Disbursement this Period 1698.46 [MEMO ITEM]

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) AVIS RENT A CAR <hr/> Mailing Address 6 SYLVAN WAY <hr/> City PARSIPPANY State NJ Zip Code 07054 <hr/> Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SBD.369 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 1833.90 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) AVIS RENT A CAR <hr/> Mailing Address 6 SYLVAN WAY <hr/> City PARSIPPANY State NJ Zip Code 07054 <hr/> Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SBD.370 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 300.02 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) AVIS RENT A CAR <hr/> Mailing Address 6 SYLVAN WAY <hr/> City PARSIPPANY State NJ Zip Code 07054 <hr/> Purpose of Disbursement TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SBD.94 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 243.61 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) BEST WESTERN	Transaction ID: SB23C.11 Date of Disbursement
	Mailing Address 6201 N 24TH PKWY	<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City PHOENIX State AZ Zip Code 85016	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="-136.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) BEST WESTERN	Transaction ID: SBD.330 Date of Disbursement
	Mailing Address 6201 N 24TH PKWY	<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City PHOENIX State AZ Zip Code 85016	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="1336.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) BEST WESTERN	Transaction ID: SBD.331 Date of Disbursement
	Mailing Address 6201 N 24TH PKWY	<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City PHOENIX State AZ Zip Code 85016	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="136.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) BEVERLY WILSHIRE	Transaction ID: SBD.109
	Mailing Address 9500 WILSHIRE BLVD	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City BEVERLY HILLS State CA Zip Code 90211	Amount of Each Disbursement this Period 3043.99
	Purpose of Disbursement FACILITY RENTAL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) CLARION HOTELS	Transaction ID: SBD.308
	Mailing Address 10750 COLUMBIA PK	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City SILVER SPRING State MD Zip Code 20901	Amount of Each Disbursement this Period 296.37
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) CLARION HOTELS	Transaction ID: SBD.309
	Mailing Address 10750 COLUMBIA PK	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City SILVER SPRING State MD Zip Code 20901	Amount of Each Disbursement this Period 306.41
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <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 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) CLARION HOTELS	Transaction ID: SBD.310
	Mailing Address 10750 COLUMBIA PK	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City SILVER SPRING State MD Zip Code 20901	Amount of Each Disbursement this Period 296.37
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) CLARION HOTELS	Transaction ID: SBD.311
	Mailing Address 10750 COLUMBIA PK	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City SILVER SPRING State MD Zip Code 20901	Amount of Each Disbursement this Period 197.58
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) CLARION HOTELS	Transaction ID: SBD.312
	Mailing Address 10750 COLUMBIA PK	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City SILVER SPRING State MD Zip Code 20901	Amount of Each Disbursement this Period 197.58
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <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 3P) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) CLARION HOTELS Mailing Address 10750 COLUMBIA PK City SILVER SPRING State MD Zip Code 20901 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.372 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 395.16 [MEMO ITEM]
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) CLARION HOTELS Mailing Address 10750 COLUMBIA PK City SILVER SPRING State MD Zip Code 20901 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.373 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 395.16 [MEMO ITEM]
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) CLARION HOTELS Mailing Address 10750 COLUMBIA PK City SILVER SPRING State MD Zip Code 20901 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.374 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 395.16 [MEMO ITEM]
Disbursement For: 2008 <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 3P) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
CLARION HOTELS

Mailing Address 10750 COLUMBIA PK

City SILVER SPRING State MD Zip Code 20901

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SBD.375
Date of Disbursement 02 / 26 / 2008

Amount of Each Disbursement this Period 395.16

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
CLARION HOTELS

Mailing Address 10750 COLUMBIA PK

City SILVER SPRING State MD Zip Code 20901

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SBD.376
Date of Disbursement 02 / 26 / 2008

Amount of Each Disbursement this Period 395.16

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
COMFORT INNS

Mailing Address 10750 COLUMBIA PK

City SILVER SPRING State MD Zip Code 20901

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SBD.146
Date of Disbursement 02 / 26 / 2008

Amount of Each Disbursement this Period 89.60

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
COMFORT INNS

Mailing Address 10750 COLUMBIA PK

City SILVER SPRING State MD Zip Code 20901

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.147
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
DAYS INN

Mailing Address 1 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.184
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
DAYS INN

Mailing Address 1 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.243
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) DAYS INN	Transaction ID: SBD.244 Date of Disbursement 02 / 26 / 2008
	Mailing Address 1 SYLVAN WAY	Amount of Each Disbursement this Period 67.19
	City PARSIPPANY State NJ Zip Code 07054	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) DELTA AIR LINES	Transaction ID: SBD.142 Date of Disbursement 02 / 26 / 2008
	Mailing Address PO BOX 20706	Amount of Each Disbursement this Period 505.00
	City ATLANTA State GA Zip Code 30320	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) DELTA AIR LINES	Transaction ID: SBD.143 Date of Disbursement 02 / 26 / 2008
	Mailing Address PO BOX 20706	Amount of Each Disbursement this Period 505.00
	City ATLANTA State GA Zip Code 30320	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) DELTA AIR LINES	Transaction ID: SBD.248 Date of Disbursement 02 / 26 / 2008
	Mailing Address PO BOX 20706	Amount of Each Disbursement this Period 768.00
	City ATLANTA State GA Zip Code 30320	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) DELTA AIR LINES	Transaction ID: SBD.317 Date of Disbursement 02 / 26 / 2008
	Mailing Address PO BOX 20706	Amount of Each Disbursement this Period 413.00
	City ATLANTA State GA Zip Code 30320	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) DELTA AIR LINES	Transaction ID: SBD.318 Date of Disbursement 02 / 26 / 2008
	Mailing Address PO BOX 20706	Amount of Each Disbursement this Period 343.00
	City ATLANTA State GA Zip Code 30320	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) DELTA AIR LINES	Transaction ID: SBD.99 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address PO BOX 20706	Amount of Each Disbursement this Period 632.80
	City ATLANTA State GA Zip Code 30320	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) EMBASSY SUITES	Transaction ID: SBD.236 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 142.08
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) EMBASSY SUITES	Transaction ID: SBD.237 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 35.21
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM]

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

<p>A. Full Name (Last, First, Middle Initial) EMBASSY SUITES</p> <p>Mailing Address 9336 CIVIC CENTER DR</p> <p>City BEVERLY HILLS State CA Zip Code 90210</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: SBD.238 Date of Disbursement</p> <p>M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: right;">142.08</p> <p>[MEMO ITEM]</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) FAIRFIELD INNS</p> <p>Mailing Address MARRIOTT DR</p> <p>City WASHINGTON State DC Zip Code 20058</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: SBD.202 Date of Disbursement</p> <p>M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: right;">171.72</p> <p>[MEMO ITEM]</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) FAIRFIELD INNS</p> <p>Mailing Address MARRIOTT DR</p> <p>City WASHINGTON State DC Zip Code 20058</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: SBD.203 Date of Disbursement</p> <p>M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: right;">171.72</p> <p>[MEMO ITEM]</p>
--	--

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
FAIRFIELD INNS

Mailing Address MARRIOTT DR

City WASHINGTON State DC Zip Code 20058

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.204
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
FAIRFIELD INNS

Mailing Address MARRIOTT DR

City WASHINGTON State DC Zip Code 20058

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.205
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
FAIRFIELD INNS

Mailing Address MARRIOTT DR

City WASHINGTON State DC Zip Code 20058

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.206
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
FAIRFIELD INNS

Mailing Address MARRIOTT DR

City WASHINGTON State DC Zip Code 20058

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.213
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

547.56

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
FAIRFIELD INNS

Mailing Address MARRIOTT DR

City WASHINGTON State DC Zip Code 20058

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.214
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

343.44

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
FAIRFIELD INNS

Mailing Address MARRIOTT DR

City WASHINGTON State DC Zip Code 20058

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.215
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

547.56

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) FAIRFIELD INNS	Transaction ID: SBD.216 Date of Disbursement 02 / 26 / 2008
	Mailing Address MARRIOTT DR	Amount of Each Disbursement this Period 719.28
	City WASHINGTON State DC Zip Code 20058	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) FAIRFIELD INNS	Transaction ID: SBD.217 Date of Disbursement 02 / 26 / 2008
	Mailing Address MARRIOTT DR	Amount of Each Disbursement this Period 432.34
	City WASHINGTON State DC Zip Code 20058	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) FAIRFIELD INNS	Transaction ID: SBD.218 Date of Disbursement 02 / 26 / 2008
	Mailing Address MARRIOTT DR	Amount of Each Disbursement this Period 343.44
	City WASHINGTON State DC Zip Code 20058	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) HAMPTON INN	Transaction ID: SBD.139 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 93.40
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) HAMPTON INN	Transaction ID: SBD.140 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 93.40
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) HAMPTON INN	Transaction ID: SBD.270 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 121.54
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <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 3P)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) HAMPTON INN	Transaction ID: SBD.271 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 121.54
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) HAMPTON INN	Transaction ID: SBD.315 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 1424.56
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) HAMPTON INN	Transaction ID: SBD.333 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 81.65
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) HAMPTON INN	Transaction ID: SBD.334 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 79.92
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) HAMPTON INN	Transaction ID: SBD.338 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 101.90
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) HAMPTON INN	Transaction ID: SBD.339 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 102.30
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) HAMPTON INN	Transaction ID: SBD.340 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 102.30
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) HAMPTON INN	Transaction ID: SBD.380 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 399.84
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) HERTZ CAR RENTAL	Transaction ID: SBD.148 Date of Disbursement 02 / 26 / 2008
	Mailing Address 225 BRAE BLVD	Amount of Each Disbursement this Period 633.72
	City PARK RIDGE State NJ Zip Code 07656	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) HERTZ CAR RENTAL	Transaction ID: SBD.149
	Mailing Address 225 BRAE BLVD	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City PARK RIDGE State NJ Zip Code 07656	Amount of Each Disbursement this Period 1663.17
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) HERTZ CAR RENTAL	Transaction ID: SBD.307
	Mailing Address 225 BRAE BLVD	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City PARK RIDGE State NJ Zip Code 07656	Amount of Each Disbursement this Period 338.61
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) HERTZ CAR RENTAL	Transaction ID: SBD.359
	Mailing Address 225 BRAE BLVD	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City PARK RIDGE State NJ Zip Code 07656	Amount of Each Disbursement this Period 614.97
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <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 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
HERTZ CAR RENTAL

Mailing Address 225 BRAE BLVD

City State Zip Code
PARK RIDGE NJ 07656

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.360
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
HERTZ CAR RENTAL

Mailing Address 225 BRAE BLVD

City State Zip Code
PARK RIDGE NJ 07656

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.371
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
HILTON INNS

Mailing Address 9336 CIVIC CENTER DR

City State Zip Code
BEVERLY HILLS CA 90210

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23C.9
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) HILTON INNS	Transaction ID: SBD.166 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 5996.55
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) HILTON INNS	Transaction ID: SBD.167 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 30.21
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) HILTON INNS	Transaction ID: SBD.168 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 232.96
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) HILTON INNS	Transaction ID: SBD.169 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 116.48
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) HILTON INNS	Transaction ID: SBD.170 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 118.48
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) HILTON INNS	Transaction ID: SBD.171 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 135.45
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <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 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
HILTON INNS

Mailing Address 9336 CIVIC CENTER DR

City BEVERLY HILLS State CA Zip Code 90210

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SBD.172
Date of Disbursement 02 / 26 / 2008

Amount of Each Disbursement this Period 109.20

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
HILTON INNS

Mailing Address 9336 CIVIC CENTER DR

City BEVERLY HILLS State CA Zip Code 90210

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SBD.173
Date of Disbursement 02 / 26 / 2008

Amount of Each Disbursement this Period 916.34

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
HILTON INNS

Mailing Address 9336 CIVIC CENTER DR

City BEVERLY HILLS State CA Zip Code 90210

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SBD.301
Date of Disbursement 02 / 26 / 2008

Amount of Each Disbursement this Period 167.96

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) HILTON INNS	Transaction ID: SBD.316 Date of Disbursement 02 / 26 / 2008
	Mailing Address 9336 CIVIC CENTER DR	Amount of Each Disbursement this Period 132.09
	City BEVERLY HILLS State CA Zip Code 90210	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) HOLIDAY INNS	Transaction ID: SBD.108 Date of Disbursement 02 / 26 / 2008
	Mailing Address 3 RAVINIA DR STE 100	Amount of Each Disbursement this Period 1648.81
	City ATLANTA State GA Zip Code 30346	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) HOLIDAY INNS	Transaction ID: SBD.254 Date of Disbursement 02 / 26 / 2008
	Mailing Address 3 RAVINIA DR STE 100	Amount of Each Disbursement this Period 188.70
	City ATLANTA State GA Zip Code 30346	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) HOLIDAY INNS	Transaction ID: SBD.255 Date of Disbursement 02 / 26 / 2008
	Mailing Address 3 RAVINIA DR STE 100	Amount of Each Disbursement this Period 188.70
	City ATLANTA State GA Zip Code 30346	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) HOLIDAY INNS	Transaction ID: SBD.332 Date of Disbursement 02 / 26 / 2008
	Mailing Address 3 RAVINIA DR STE 100	Amount of Each Disbursement this Period 349.50
	City ATLANTA State GA Zip Code 30346	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) HOLIDAY INNS	Transaction ID: SBD.336 Date of Disbursement 02 / 26 / 2008
	Mailing Address 3 RAVINIA DR STE 100	Amount of Each Disbursement this Period 699.00
	City ATLANTA State GA Zip Code 30346	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) HOLIDAY INNS Mailing Address 3 RAVINIA DR STE 100 City ATLANTA State GA Zip Code 30346 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.367 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 233.00 [MEMO ITEM]
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) HYATT REGENCY Mailing Address 71 S WACKER DR City CHICAGO State IL Zip Code 60606 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23C.3 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period -0.10 [MEMO ITEM]
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) HYATT REGENCY Mailing Address 71 S WACKER DR City CHICAGO State IL Zip Code 60606 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB23C.4 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period -0.10 [MEMO ITEM]
Disbursement For: 2008 <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 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) HYATT REGENCY	Transaction ID: SB23C.5
	Mailing Address 71 S WACKER DR	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City CHICAGO State IL Zip Code 60606	Amount of Each Disbursement this Period -0.10
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) HYATT REGENCY	Transaction ID: SB23C.6
	Mailing Address 71 S WACKER DR	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City CHICAGO State IL Zip Code 60606	Amount of Each Disbursement this Period -0.10
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) HYATT REGENCY	Transaction ID: SB23C.7
	Mailing Address 71 S WACKER DR	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City CHICAGO State IL Zip Code 60606	Amount of Each Disbursement this Period -0.10
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <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 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) HYATT REGENCY	Transaction ID: SB23C.8 Date of Disbursement 02 / 26 / 2008
	Mailing Address 71 S WACKER DR	Amount of Each Disbursement this Period -0.10
	City CHICAGO State IL Zip Code 60606	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) HYATT REGENCY	Transaction ID: SBD.219 Date of Disbursement 02 / 26 / 2008
	Mailing Address 71 S WACKER DR	Amount of Each Disbursement this Period 130.90
	City CHICAGO State IL Zip Code 60606	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) HYATT REGENCY	Transaction ID: SBD.227 Date of Disbursement 02 / 26 / 2008
	Mailing Address 71 S WACKER DR	Amount of Each Disbursement this Period 131.00
	City CHICAGO State IL Zip Code 60606	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
HYATT REGENCY

Mailing Address 71 S WACKER DR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SBD.228
Date of Disbursement 02 / 26 / 2008

Amount of Each Disbursement this Period 131.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
HYATT REGENCY

Mailing Address 71 S WACKER DR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SBD.229
Date of Disbursement 02 / 26 / 2008

Amount of Each Disbursement this Period 131.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
HYATT REGENCY

Mailing Address 71 S WACKER DR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SBD.230
Date of Disbursement 02 / 26 / 2008

Amount of Each Disbursement this Period 131.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ► 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) HYATT REGENCY	Transaction ID: SBD.231 Date of Disbursement 02 / 26 / 2008
	Mailing Address 71 S WACKER DR	Amount of Each Disbursement this Period 131.00
	City CHICAGO State IL Zip Code 60606	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) HYATT REGENCY	Transaction ID: SBD.232 Date of Disbursement 02 / 26 / 2008
	Mailing Address 71 S WACKER DR	Amount of Each Disbursement this Period 131.00
	City CHICAGO State IL Zip Code 60606	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) HYATT REGENCY	Transaction ID: SBD.233 Date of Disbursement 02 / 26 / 2008
	Mailing Address 71 S WACKER DR	Amount of Each Disbursement this Period 131.00
	City CHICAGO State IL Zip Code 60606	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
HYATT REGENCY

Mailing Address 71 S WACKER DR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.234
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
HYATT REGENCY

Mailing Address 71 S WACKER DR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.239
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
HYATT REGENCY

Mailing Address 71 S WACKER DR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement
CATERING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.240
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) HYATT REGENCY	Transaction ID: SBD.241 Date of Disbursement 02 / 26 / 2008
	Mailing Address 71 S WACKER DR	Amount of Each Disbursement this Period 376.28
	City CHICAGO State IL Zip Code 60606	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) INTERCONTINENTAL HOTELS GROUP	Transaction ID: SBD.273 Date of Disbursement 02 / 26 / 2008
	Mailing Address 3 RAVINIA DR STE 100	Amount of Each Disbursement this Period 111.38
	City ATLANTA State GA Zip Code 30346	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) INTERCONTINENTAL HOTELS GROUP	Transaction ID: SBD.274 Date of Disbursement 02 / 26 / 2008
	Mailing Address 3 RAVINIA DR STE 100	Amount of Each Disbursement this Period 111.38
	City ATLANTA State GA Zip Code 30346	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) INTERCONTINENTAL HOTELS GROUP	Transaction ID: SBD.275 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 3 RAVINIA DR STE 100	Amount of Each Disbursement this Period 167.63
	City ATLANTA State GA Zip Code 30346	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) INTERCONTINENTAL HOTELS GROUP	Transaction ID: SBD.276 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 3 RAVINIA DR STE 100	Amount of Each Disbursement this Period 111.38
	City ATLANTA State GA Zip Code 30346	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) INTERCONTINENTAL HOTELS GROUP	Transaction ID: SBD.277 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 3 RAVINIA DR STE 100	Amount of Each Disbursement this Period 111.38
	City ATLANTA State GA Zip Code 30346	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.278

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2008

Amount of Each Disbursement this Period

111.38

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.279

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2008

Amount of Each Disbursement this Period

111.38

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.280

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2008

Amount of Each Disbursement this Period

111.38

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Transaction ID: SBD.281

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

Mailing Address 3 RAVINIA DR STE 100

Amount of Each Disbursement this Period

111.38

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

B.

Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Transaction ID: SBD.282

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

Mailing Address 3 RAVINIA DR STE 100

Amount of Each Disbursement this Period

111.38

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

C.

Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Transaction ID: SBD.283

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

Mailing Address 3 RAVINIA DR STE 100

Amount of Each Disbursement this Period

111.38

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 156 / 320

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.341

Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

106.40

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.342

Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

106.40

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Mailing Address 3 RAVINIA DR STE 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.343

Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

95.20

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) INTERCONTINENTAL HOTELS GROUP	Transaction ID: SBD.344 Date of Disbursement
	Mailing Address 3 RAVINIA DR STE 100	<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City ATLANTA State GA Zip Code 30346	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="106.40"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) INTERCONTINENTAL HOTELS GROUP	Transaction ID: SBD.345 Date of Disbursement
	Mailing Address 3 RAVINIA DR STE 100	<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City ATLANTA State GA Zip Code 30346	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="95.20"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) INTERCONTINENTAL HOTELS GROUP	Transaction ID: SBD.346 Date of Disbursement
	Mailing Address 3 RAVINIA DR STE 100	<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City ATLANTA State GA Zip Code 30346	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="95.20"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Transaction ID: SBD.347

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

Mailing Address 3 RAVINIA DR STE 100

Amount of Each Disbursement this Period

95.20

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Transaction ID: SBD.348

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

Mailing Address 3 RAVINIA DR STE 100

Amount of Each Disbursement this Period

106.40

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Transaction ID: SBD.349

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

Mailing Address 3 RAVINIA DR STE 100

Amount of Each Disbursement this Period

95.20

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Transaction ID: SBD.350

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

Mailing Address 3 RAVINIA DR STE 100

Amount of Each Disbursement this Period

95.20

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

B.

Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Transaction ID: SBD.351

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

Mailing Address 3 RAVINIA DR STE 100

Amount of Each Disbursement this Period

95.20

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

C.

Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Transaction ID: SBD.352

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

Mailing Address 3 RAVINIA DR STE 100

Amount of Each Disbursement this Period

95.20

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Transaction ID: SBD.353

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

Mailing Address 3 RAVINIA DR STE 100

Amount of Each Disbursement this Period

95.20

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

B.

Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Transaction ID: SBD.354

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

Mailing Address 3 RAVINIA DR STE 100

Amount of Each Disbursement this Period

112.96

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

C.

Full Name (Last, First, Middle Initial)
INTERCONTINENTAL HOTELS GROUP

Transaction ID: SBD.355

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

Mailing Address 3 RAVINIA DR STE 100

Amount of Each Disbursement this Period

95.20

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) INTERCONTINENTAL HOTELS GROUP	Transaction ID: SBD.356 Date of Disbursement 02 / 26 / 2008
	Mailing Address 3 RAVINIA DR STE 100	Amount of Each Disbursement this Period 95.20
	City ATLANTA State GA Zip Code 30346	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) INTERCONTINENTAL HOTELS GROUP	Transaction ID: SBD.357 Date of Disbursement 02 / 26 / 2008
	Mailing Address 3 RAVINIA DR STE 100	Amount of Each Disbursement this Period 95.20
	City ATLANTA State GA Zip Code 30346	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) INTERCONTINENTAL HOTELS GROUP	Transaction ID: SBD.358 Date of Disbursement 02 / 26 / 2008
	Mailing Address 3 RAVINIA DR STE 100	Amount of Each Disbursement this Period 95.20
	City ATLANTA State GA Zip Code 30346	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) LOEWS VANDERBILT	Transaction ID: SBD.377 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 2100 WEST END AVE	Amount of Each Disbursement this Period 337.79
	City NASHVILLE State TN Zip Code 37203	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) LOEWS VANDERBILT	Transaction ID: SBD.378 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 2100 WEST END AVE	Amount of Each Disbursement this Period 603.70
	City NASHVILLE State TN Zip Code 37203	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) MARRIOTT DES MOINES	Transaction ID: SBD.150 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 700 GRAND AVE	Amount of Each Disbursement this Period 3018.88
	City DES MOINES State IA Zip Code 50309	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) MARRIOTT HOTELS</p> <p>Mailing Address MARRIOTT DR</p> <p>City WASHINGTON State DC Zip Code 20058</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23C.10</p> <p>Date of Disbursement 02 / 26 / 2008</p> <p>Amount of Each Disbursement this Period -106.40</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) MARRIOTT HOTELS</p> <p>Mailing Address MARRIOTT DR</p> <p>City WASHINGTON State DC Zip Code 20058</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SBD.174</p> <p>Date of Disbursement 02 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 211.68</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) MARRIOTT HOTELS</p> <p>Mailing Address MARRIOTT DR</p> <p>City WASHINGTON State DC Zip Code 20058</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SBD.175</p> <p>Date of Disbursement 02 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 211.68</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MARRIOTT HOTELS	Transaction ID: SBD.176 Date of Disbursement 02 / 26 / 2008
	Mailing Address MARRIOTT DR	Amount of Each Disbursement this Period 211.68
	City WASHINGTON State DC Zip Code 20058	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) MARRIOTT HOTELS	Transaction ID: SBD.177 Date of Disbursement 02 / 26 / 2008
	Mailing Address MARRIOTT DR	Amount of Each Disbursement this Period 211.68
	City WASHINGTON State DC Zip Code 20058	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) MARRIOTT HOTELS	Transaction ID: SBD.178 Date of Disbursement 02 / 26 / 2008
	Mailing Address MARRIOTT DR	Amount of Each Disbursement this Period 211.68
	City WASHINGTON State DC Zip Code 20058	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
MARRIOTT HOTELS

Transaction ID: SBD.179
Date of Disbursement

Mailing Address MARRIOTT DR

/ /

City WASHINGTON State DC Zip Code 20058

Amount of Each Disbursement this Period

Purpose of Disbursement
TRAVEL

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

B.

Full Name (Last, First, Middle Initial)
MARRIOTT HOTELS

Transaction ID: SBD.180
Date of Disbursement

Mailing Address MARRIOTT DR

/ /

City WASHINGTON State DC Zip Code 20058

Amount of Each Disbursement this Period

Purpose of Disbursement
TRAVEL

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

C.

Full Name (Last, First, Middle Initial)
MARRIOTT HOTELS

Transaction ID: SBD.181
Date of Disbursement

Mailing Address MARRIOTT DR

/ /

City WASHINGTON State DC Zip Code 20058

Amount of Each Disbursement this Period

Purpose of Disbursement
TRAVEL

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MARRIOTT HOTELS	Transaction ID: SBD.335
	Mailing Address MARRIOTT DR	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City WASHINGTON State DC Zip Code 20058	Amount of Each Disbursement this Period 2746.09
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) MIDWEST AIRLINES	Transaction ID: SBD.103
	Mailing Address 6744 S HOWELL AVE	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City OAK CREEK State WI Zip Code 53154	Amount of Each Disbursement this Period 415.90
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) NORTHWEST AIRLINES	Transaction ID: SBD.100
	Mailing Address 7500 AIRLINE DR	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City MINNEAPOLIS State MN Zip Code 55450	Amount of Each Disbursement this Period 685.40
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <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 3P)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) NORTHWEST AIRLINES Mailing Address 7500 AIRLINE DR City MINNEAPOLIS State MN Zip Code 55450 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.90 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 757.40 [MEMO ITEM]
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) NORTHWEST AIRLINES Mailing Address 7500 AIRLINE DR City MINNEAPOLIS State MN Zip Code 55450 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.91 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 757.40 [MEMO ITEM]
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) ORBITZ.COM Mailing Address 500 W MADISON ST STE 1000 City CHICAGO State IL Zip Code 60661 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.124 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 64.53 [MEMO ITEM]
Disbursement For: 2008 <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 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) ORBITZ.COM <hr/> Mailing Address 500 W MADISON ST STE 1000 <hr/> City CHICAGO State IL Zip Code 60661 <hr/> Purpose of Disbursement TRAVEL Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SBD.141 Date of Disbursement 02 / 26 / 2008	Amount of Each Disbursement this Period 105.63 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) ORBITZ.COM <hr/> Mailing Address 500 W MADISON ST STE 1000 <hr/> City CHICAGO State IL Zip Code 60661 <hr/> Purpose of Disbursement TRAVEL Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SBD.209 Date of Disbursement 02 / 26 / 2008	Amount of Each Disbursement this Period 94.03 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) ORBITZ.COM <hr/> Mailing Address 500 W MADISON ST STE 1000 <hr/> City CHICAGO State IL Zip Code 60661 <hr/> Purpose of Disbursement TRAVEL Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SBD.210 Date of Disbursement 02 / 26 / 2008	Amount of Each Disbursement this Period 58.96 [MEMO ITEM]

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
ORBITZ.COM

Mailing Address 500 W MADISON ST STE 1000

City CHICAGO State IL Zip Code 60661

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.221
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

66.37

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
ORBITZ.COM

Mailing Address 500 W MADISON ST STE 1000

City CHICAGO State IL Zip Code 60661

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.222
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

93.39

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
ORBITZ.COM

Mailing Address 500 W MADISON ST STE 1000

City CHICAGO State IL Zip Code 60661

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.223
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

175.97

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.224 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 61.35
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.284 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 101.60
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.285 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 101.60
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM]

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.286 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 94.67
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.287 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 94.03
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.288 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 77.72
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <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 3P)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.289 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 77.72
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.294 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 125.79
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.295 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 84.80
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.296 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 169.60
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.297 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 165.17
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.298 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 94.67
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <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 3P)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.302 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 94.67
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.303 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 73.81
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.304 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 70.60
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.305 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 156.45
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.306 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 79.53
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.88 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 83.71
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.89 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 70.94
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.95 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 105.63
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) ORBITZ.COM	Transaction ID: SBD.96 Date of Disbursement 02 / 26 / 2008
	Mailing Address 500 W MADISON ST STE 1000	Amount of Each Disbursement this Period 64.53
	City CHICAGO State IL Zip Code 60661	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) ORBITZ.COM <hr/> Mailing Address 500 W MADISON ST STE 1000 <hr/> City CHICAGO State IL Zip Code 60661 <hr/> Purpose of Disbursement TRAVEL Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SBD.97 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 161.84 <hr/> [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) QUALITY INN & SUITES <hr/> Mailing Address 3537 W BROADWAY <hr/> City COUNCIL BLUFFS State IA Zip Code 51501 <hr/> Purpose of Disbursement TRAVEL Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SBD.125 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 72.75 <hr/> [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) QUALITY INN & SUITES <hr/> Mailing Address 3537 W BROADWAY <hr/> City COUNCIL BLUFFS State IA Zip Code 51501 <hr/> Purpose of Disbursement TRAVEL Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SBD.126 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 72.75 <hr/> [MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) QUALITY INN & SUITES Mailing Address 3537 W BROADWAY City COUNCIL BLUFFS State IA Zip Code 51501 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.127 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 72.75 [MEMO ITEM]
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) QUALITY INN & SUITES Mailing Address 3537 W BROADWAY City COUNCIL BLUFFS State IA Zip Code 51501 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.128 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 83.95 [MEMO ITEM]
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) QUALITY INN & SUITES Mailing Address 3537 W BROADWAY City COUNCIL BLUFFS State IA Zip Code 51501 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.129 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 72.75 [MEMO ITEM]
Disbursement For: 2008 <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 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
QUALITY INN & SUITES

Mailing Address 3537 W BROADWAY

City COUNCIL BLUFFS State IA Zip Code 51501

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.130
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
QUALITY INN & SUITES

Mailing Address 3537 W BROADWAY

City COUNCIL BLUFFS State IA Zip Code 51501

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.131
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
QUALITY INN & SUITES

Mailing Address 3537 W BROADWAY

City COUNCIL BLUFFS State IA Zip Code 51501

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.132
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
QUALITY INN & SUITES

Mailing Address 3537 W BROADWAY

City COUNCIL BLUFFS State IA Zip Code 51501

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.133
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

72.75

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
QUALITY INN & SUITES

Mailing Address 3537 W BROADWAY

City COUNCIL BLUFFS State IA Zip Code 51501

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.134
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

72.75

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
QUALITY INN & SUITES

Mailing Address 3537 W BROADWAY

City COUNCIL BLUFFS State IA Zip Code 51501

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.135
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

72.75

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
QUALITY INN & SUITES

Mailing Address 3537 W BROADWAY

City COUNCIL BLUFFS State IA Zip Code 51501

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.136
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

72.75

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
QUALITY INN & SUITES

Mailing Address 3537 W BROADWAY

City COUNCIL BLUFFS State IA Zip Code 51501

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.137
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

72.75

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
QUALITY INN & SUITES

Mailing Address 3537 W BROADWAY

City COUNCIL BLUFFS State IA Zip Code 51501

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.138
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

72.75

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
RODEWAY INN

Mailing Address 10750 COLUMBIA PK

City SILVER SPRING State MD Zip Code 20901

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.313
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
SAILAIR TRAVEL INC

Mailing Address 4515 HARDING PK

City NASHVILLE State TN Zip Code 37205

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.242
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
SAILAIR TRAVEL INC

Mailing Address 4515 HARDING PK

City NASHVILLE State TN Zip Code 37205

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.251
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.104
	Mailing Address PO BOX 22449	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City NASHVILLE State TN Zip Code 37202	Amount of Each Disbursement this Period 25.00
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.105
	Mailing Address PO BOX 22449	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City NASHVILLE State TN Zip Code 37202	Amount of Each Disbursement this Period 25.00
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.106
	Mailing Address PO BOX 22449	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City NASHVILLE State TN Zip Code 37202	Amount of Each Disbursement this Period 25.00
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <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 3P)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.107 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 25.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.144 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 25.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.154 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 25.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.155 Date of Disbursement 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 25.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.156 Date of Disbursement 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 25.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.157 Date of Disbursement 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 35.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.183 Date of Disbursement 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 25.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.194 Date of Disbursement 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 25.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.195 Date of Disbursement 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 25.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS Mailing Address PO BOX 22449	Transaction ID: SBD.196 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Amount of Each Disbursement this Period 50.00 [MEMO ITEM]
City NASHVILLE State TN Zip Code 37202 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type

B. Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS Mailing Address PO BOX 22449	Transaction ID: SBD.197 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Amount of Each Disbursement this Period 25.00 [MEMO ITEM]
City NASHVILLE State TN Zip Code 37202 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type

C. Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS Mailing Address PO BOX 22449	Transaction ID: SBD.198 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Amount of Each Disbursement this Period 25.00 [MEMO ITEM]
City NASHVILLE State TN Zip Code 37202 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
SENTIMENTAL JOURNEYS

Mailing Address PO BOX 22449

City NASHVILLE State TN Zip Code 37202

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.199

Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
SENTIMENTAL JOURNEYS

Mailing Address PO BOX 22449

City NASHVILLE State TN Zip Code 37202

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.200

Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
SENTIMENTAL JOURNEYS

Mailing Address PO BOX 22449

City NASHVILLE State TN Zip Code 37202

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.201

Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.212 Date of Disbursement 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 25.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.226 Date of Disbursement 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 25.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.252 Date of Disbursement 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 25.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.257
	Mailing Address PO BOX 22449	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City NASHVILLE State TN Zip Code 37202	Amount of Each Disbursement this Period 25.00
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.292
	Mailing Address PO BOX 22449	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City NASHVILLE State TN Zip Code 37202	Amount of Each Disbursement this Period 25.00
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.293
	Mailing Address PO BOX 22449	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City NASHVILLE State TN Zip Code 37202	Amount of Each Disbursement this Period 25.00
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <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 3P)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.300 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 25.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.324 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 25.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.325 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 50.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
SENTIMENTAL JOURNEYS

Mailing Address **PO BOX 22449**

City **NASHVILLE** State **TN** Zip Code **37202**

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: **SBD.326**
Date of Disbursement
MM / DD / YYYY
02 / 26 / 2008

Amount of Each Disbursement this Period
25.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
SENTIMENTAL JOURNEYS

Mailing Address **PO BOX 22449**

City **NASHVILLE** State **TN** Zip Code **37202**

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: **SBD.327**
Date of Disbursement
MM / DD / YYYY
02 / 26 / 2008

Amount of Each Disbursement this Period
25.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
SENTIMENTAL JOURNEYS

Mailing Address **PO BOX 22449**

City **NASHVILLE** State **TN** Zip Code **37202**

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: **SBD.328**
Date of Disbursement
MM / DD / YYYY
02 / 26 / 2008

Amount of Each Disbursement this Period
25.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ► **0.00**

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.329 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 25.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.365 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 25.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.366 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 25.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
SENTIMENTAL JOURNEYS

Mailing Address PO BOX 22449

City NASHVILLE State TN Zip Code 37202

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.92
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
SHERATON HOTELS

Mailing Address 1111 WESTCHESTER AVE

City WHITE PLAINS State NY Zip Code 10604

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.253
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
SHERATON HOTELS

Mailing Address 1111 WESTCHESTER AVE

City WHITE PLAINS State NY Zip Code 10604

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.258
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
SHERATON HOTELS

Transaction ID: SBD.259
Date of Disbursement

Mailing Address 1111 WESTCHESTER AVE

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

City State Zip Code
WHITE PLAINS NY 10604

Amount of Each Disbursement this Period

71.36

Purpose of Disbursement
TRAVEL

Category/ Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
SHERATON HOTELS

Transaction ID: SBD.260
Date of Disbursement

Mailing Address 1111 WESTCHESTER AVE

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

City State Zip Code
WHITE PLAINS NY 10604

Amount of Each Disbursement this Period

271.76

Purpose of Disbursement
TRAVEL

Category/ Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
SHERATON HOTELS

Transaction ID: SBD.261
Date of Disbursement

Mailing Address 1111 WESTCHESTER AVE

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

City State Zip Code
WHITE PLAINS NY 10604

Amount of Each Disbursement this Period

271.76

Purpose of Disbursement
TRAVEL

Category/ Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
SHERATON HOTELS

Mailing Address 1111 WESTCHESTER AVE

City State Zip Code
WHITE PLAINS NY 10604

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.262
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
SHERATON HOTELS

Mailing Address 1111 WESTCHESTER AVE

City State Zip Code
WHITE PLAINS NY 10604

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.263
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
SHERATON HOTELS

Mailing Address 1111 WESTCHESTER AVE

City State Zip Code
WHITE PLAINS NY 10604

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.264
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
SHERATON HOTELS

Transaction ID: SBD.265
Date of Disbursement

Mailing Address 1111 WESTCHESTER AVE

/ /

City State Zip Code
WHITE PLAINS NY 10604

Amount of Each Disbursement this Period

Purpose of Disbursement
TRAVEL

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

B.

Full Name (Last, First, Middle Initial)
SHERATON HOTELS

Transaction ID: SBD.266
Date of Disbursement

Mailing Address 1111 WESTCHESTER AVE

/ /

City State Zip Code
WHITE PLAINS NY 10604

Amount of Each Disbursement this Period

Purpose of Disbursement
TRAVEL

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

C.

Full Name (Last, First, Middle Initial)
SHERATON HOTELS

Transaction ID: SBD.267
Date of Disbursement

Mailing Address 1111 WESTCHESTER AVE

/ /

City State Zip Code
WHITE PLAINS NY 10604

Amount of Each Disbursement this Period

Purpose of Disbursement
TRAVEL

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) SHERATON HOTELS	Transaction ID: SBD.268 Date of Disbursement 02 / 26 / 2008
	Mailing Address 1111 WESTCHESTER AVE	Amount of Each Disbursement this Period 582.58
	City WHITE PLAINS State NY Zip Code 10604	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) SHERATON HOTELS	Transaction ID: SBD.269 Date of Disbursement 02 / 26 / 2008
	Mailing Address 1111 WESTCHESTER AVE	Amount of Each Disbursement this Period 683.90
	City WHITE PLAINS State NY Zip Code 10604	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) SHERATON HOTELS	Transaction ID: SBD.379 Date of Disbursement 02 / 26 / 2008
	Mailing Address 1111 WESTCHESTER AVE	Amount of Each Disbursement this Period 135.85
	City WHITE PLAINS State NY Zip Code 10604	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SBD.158 Date of Disbursement 02 / 26 / 2008
	Mailing Address 2702 LOVE FIELD DR	Amount of Each Disbursement this Period 490.50
	City DALLAS State TX Zip Code 75235	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SBD.314 Date of Disbursement 02 / 26 / 2008
	Mailing Address 2702 LOVE FIELD DR	Amount of Each Disbursement this Period 185.50
	City DALLAS State TX Zip Code 75235	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) SUPER 8 MOTELS	Transaction ID: SBD.110 Date of Disbursement 02 / 26 / 2008
	Mailing Address ONE SYLVAN WAY	Amount of Each Disbursement this Period 63.27
	City PARSIPPANY State NJ Zip Code 07054	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
SUPER 8 MOTELS

Transaction ID: SBD.111
Date of Disbursement

Mailing Address ONE SYLVAN WAY

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

City PARSIPPANY State NJ Zip Code 07054

Amount of Each Disbursement this Period

Purpose of Disbursement
TRAVEL

63.27

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

B.

Full Name (Last, First, Middle Initial)
SUPER 8 MOTELS

Transaction ID: SBD.112
Date of Disbursement

Mailing Address ONE SYLVAN WAY

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

City PARSIPPANY State NJ Zip Code 07054

Amount of Each Disbursement this Period

Purpose of Disbursement
TRAVEL

63.27

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

C.

Full Name (Last, First, Middle Initial)
SUPER 8 MOTELS

Transaction ID: SBD.113
Date of Disbursement

Mailing Address ONE SYLVAN WAY

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

City PARSIPPANY State NJ Zip Code 07054

Amount of Each Disbursement this Period

Purpose of Disbursement
TRAVEL

132.14

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) SUPER 8 MOTELS	Transaction ID: SBD.114 Date of Disbursement 02 / 26 / 2008
	Mailing Address ONE SYLVAN WAY	Amount of Each Disbursement this Period 63.27
	City PARSIPPANY State NJ Zip Code 07054	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) SUPER 8 MOTELS	Transaction ID: SBD.115 Date of Disbursement 02 / 26 / 2008
	Mailing Address ONE SYLVAN WAY	Amount of Each Disbursement this Period 63.27
	City PARSIPPANY State NJ Zip Code 07054	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) SUPER 8 MOTELS	Transaction ID: SBD.116 Date of Disbursement 02 / 26 / 2008
	Mailing Address ONE SYLVAN WAY	Amount of Each Disbursement this Period 63.27
	City PARSIPPANY State NJ Zip Code 07054	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
SUPER 8 MOTELS

Mailing Address **ONE SYLVAN WAY**

City **PARSIPPANY** State **NJ** Zip Code **07054**

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: **SBD.117**
Date of Disbursement
MM / DD / YYYY
02 / 26 / 2008

Amount of Each Disbursement this Period
63.27

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
SUPER 8 MOTELS

Mailing Address **ONE SYLVAN WAY**

City **PARSIPPANY** State **NJ** Zip Code **07054**

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: **SBD.118**
Date of Disbursement
MM / DD / YYYY
02 / 26 / 2008

Amount of Each Disbursement this Period
63.27

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
SUPER 8 MOTELS

Mailing Address **ONE SYLVAN WAY**

City **PARSIPPANY** State **NJ** Zip Code **07054**

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: **SBD.119**
Date of Disbursement
MM / DD / YYYY
02 / 26 / 2008

Amount of Each Disbursement this Period
63.27

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ► **0.00**

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) SUPER 8 MOTELS	Transaction ID: SBD.120 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address ONE SYLVAN WAY	Amount of Each Disbursement this Period 80.07
	City PARSIPPANY	State NJ
	Zip Code 07054	
	Purpose of Disbursement TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) SUPER 8 MOTELS	Transaction ID: SBD.121 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address ONE SYLVAN WAY	Amount of Each Disbursement this Period 63.27
	City PARSIPPANY	State NJ
	Zip Code 07054	
	Purpose of Disbursement TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) SUPER 8 MOTELS	Transaction ID: SBD.122 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address ONE SYLVAN WAY	Amount of Each Disbursement this Period 63.27
	City PARSIPPANY	State NJ
	Zip Code 07054	
	Purpose of Disbursement TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) SUPER 8 MOTELS Mailing Address ONE SYLVAN WAY City PARSIPPANY State NJ Zip Code 07054 Purpose of Disbursement TRAVEL Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SBD.123 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8	Amount of Each Disbursement this Period 80.07 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) SUPER 8 MOTELS Mailing Address ONE SYLVAN WAY City PARSIPPANY State NJ Zip Code 07054 Purpose of Disbursement TRAVEL Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SBD.159 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8	Amount of Each Disbursement this Period 125.16 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) SUPER 8 MOTELS Mailing Address ONE SYLVAN WAY City PARSIPPANY State NJ Zip Code 07054 Purpose of Disbursement TRAVEL Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SBD.93 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8	Amount of Each Disbursement this Period 61.95 [MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) TRAVELOCITY	Transaction ID: SBD.247
	Mailing Address 3150 SABRE DR	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City SOUTHLAKE State TX Zip Code 76092	Amount of Each Disbursement this Period 753.55
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) TRAVELOCITY	Transaction ID: SBD.272
	Mailing Address 3150 SABRE DR	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City SOUTHLAKE State TX Zip Code 76092	Amount of Each Disbursement this Period 489.36
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) UNITED AIRLINES	Transaction ID: SBD.101
	Mailing Address 77 W WACKER DR	Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	City CHICAGO State IL Zip Code 60601	Amount of Each Disbursement this Period 581.80
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <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 3P)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) UNITED AIRLINES	Transaction ID: SBD.152 Date of Disbursement 02 / 26 / 2008
	Mailing Address 77 W WACKER DR	Amount of Each Disbursement this Period 342.00
	City CHICAGO State IL Zip Code 60601	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) UNITED AIRLINES	Transaction ID: SBD.185 Date of Disbursement 02 / 26 / 2008
	Mailing Address 77 W WACKER DR	Amount of Each Disbursement this Period 290.00
	City CHICAGO State IL Zip Code 60601	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) UNITED AIRLINES	Transaction ID: SBD.256 Date of Disbursement 02 / 26 / 2008
	Mailing Address 77 W WACKER DR	Amount of Each Disbursement this Period 186.50
	City CHICAGO State IL Zip Code 60601	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) UNITED AIRLINES	Transaction ID: SBD.319 Date of Disbursement 02 / 26 / 2008
	Mailing Address 77 W WACKER DR	Amount of Each Disbursement this Period 312.00
	City CHICAGO State IL Zip Code 60601	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) UNITED AIRLINES	Transaction ID: SBD.361 Date of Disbursement 02 / 26 / 2008
	Mailing Address 77 W WACKER DR	Amount of Each Disbursement this Period 813.00
	City CHICAGO State IL Zip Code 60601	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.102 Date of Disbursement 02 / 26 / 2008
	Mailing Address 4000 E SKY HARBOR BLVD	Amount of Each Disbursement this Period 487.40
	City PHOENIX State AZ Zip Code 85034	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.153 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 4000 E SKY HARBOR BLVD	Amount of Each Disbursement this Period 487.50
	City PHOENIX State AZ Zip Code 85034	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.182 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 4000 E SKY HARBOR BLVD	Amount of Each Disbursement this Period 423.00
	City PHOENIX State AZ Zip Code 85034	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.186 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 4000 E SKY HARBOR BLVD	Amount of Each Disbursement this Period 423.00
	City PHOENIX State AZ Zip Code 85034	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.187 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 4000 E SKY HARBOR BLVD	Amount of Each Disbursement this Period 423.00
	City PHOENIX State AZ Zip Code 85034	
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.188 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 4000 E SKY HARBOR BLVD	Amount of Each Disbursement this Period 376.50
	City PHOENIX State AZ Zip Code 85034	
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.189 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 4000 E SKY HARBOR BLVD	Amount of Each Disbursement this Period 376.50
	City PHOENIX State AZ Zip Code 85034	
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <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 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.190 Date of Disbursement
	Mailing Address 4000 E SKY HARBOR BLVD	<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City PHOENIX State AZ Zip Code 85034	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="542.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.191 Date of Disbursement
	Mailing Address 4000 E SKY HARBOR BLVD	<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City PHOENIX State AZ Zip Code 85034	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="771.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.192 Date of Disbursement
	Mailing Address 4000 E SKY HARBOR BLVD	<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City PHOENIX State AZ Zip Code 85034	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="155.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.193
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

497.50

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.207
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

60.10

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.208
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.211 Date of Disbursement
	Mailing Address 4000 E SKY HARBOR BLVD	<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City PHOENIX State AZ Zip Code 85034	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="492.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.225 Date of Disbursement
	Mailing Address 4000 E SKY HARBOR BLVD	<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City PHOENIX State AZ Zip Code 85034	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="819.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.245 Date of Disbursement
	Mailing Address 4000 E SKY HARBOR BLVD	<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City PHOENIX State AZ Zip Code 85034	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="802.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) US AIRWAYS Mailing Address 4000 E SKY HARBOR BLVD City PHOENIX State AZ Zip Code 85034 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SBD.246 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Category/ Type	Amount of Each Disbursement this Period 289.00
	[MEMO ITEM]	

B. Full Name (Last, First, Middle Initial) US AIRWAYS Mailing Address 4000 E SKY HARBOR BLVD City PHOENIX State AZ Zip Code 85034 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SBD.249 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Category/ Type	Amount of Each Disbursement this Period 331.00
	[MEMO ITEM]	

C. Full Name (Last, First, Middle Initial) US AIRWAYS Mailing Address 4000 E SKY HARBOR BLVD City PHOENIX State AZ Zip Code 85034 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SBD.250 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Category/ Type	Amount of Each Disbursement this Period 609.00
	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.290 Date of Disbursement 02 / 26 / 2008
	Mailing Address 4000 E SKY HARBOR BLVD	Amount of Each Disbursement this Period 554.00
	City PHOENIX State AZ Zip Code 85034	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.291 Date of Disbursement 02 / 26 / 2008
	Mailing Address 4000 E SKY HARBOR BLVD	Amount of Each Disbursement this Period 1097.00
	City PHOENIX State AZ Zip Code 85034	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.299 Date of Disbursement 02 / 26 / 2008
	Mailing Address 4000 E SKY HARBOR BLVD	Amount of Each Disbursement this Period 801.50
	City PHOENIX State AZ Zip Code 85034	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.320
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

411.50

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.321
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

411.50

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.322
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

411.50

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.323 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 4000 E SKY HARBOR BLVD	Amount of Each Disbursement this Period 411.50
	City PHOENIX State AZ Zip Code 85034	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.362 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 4000 E SKY HARBOR BLVD	Amount of Each Disbursement this Period 396.50
	City PHOENIX State AZ Zip Code 85034	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.363 Date of Disbursement MM / DD / YYYY 02 / 26 / 2008
	Mailing Address 4000 E SKY HARBOR BLVD	Amount of Each Disbursement this Period 386.50
	City PHOENIX State AZ Zip Code 85034	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: SBD.364 Date of Disbursement 02 / 26 / 2008
	Mailing Address 4000 E SKY HARBOR BLVD	Amount of Each Disbursement this Period 386.50
	City PHOENIX State AZ Zip Code 85034	
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS CREDIT CARD - CORPORATE	Transaction ID: SB.1002 Date of Disbursement 02 / 25 / 2008
	Mailing Address PO BOX 360001	Amount of Each Disbursement this Period 91453.06
	City FT LAUDERDALE State FL Zip Code 33336-0000	
	Purpose of Disbursement CREDIT CARD PAYMENT	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) AARON RENTS	Transaction ID: SBD.42 Date of Disbursement 02 / 25 / 2008
	Mailing Address 1105 12TH ST	Amount of Each Disbursement this Period 220.04
	City CAYCE State SC Zip Code 29033	
	Purpose of Disbursement EQUIPMENT RENTAL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

91453.06

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) ABOVE & BEYOND LIMO	Transaction ID: SBD.47 Date of Disbursement 02 / 25 / 2008
	Mailing Address PO BOX 2711	Amount of Each Disbursement this Period 4387.50
	City SUMMERVILLE State SC Zip Code 29484	
	Purpose of Disbursement TRANSPORTATION SVC Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) ABOVE & BEYOND LIMO	Transaction ID: SBD.57 Date of Disbursement 02 / 25 / 2008
	Mailing Address PO BOX 2711	Amount of Each Disbursement this Period 5421.00
	City SUMMERVILLE State SC Zip Code 29484	
	Purpose of Disbursement TRANSPORTATION SVC Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) ABOVE & BEYOND LIMO	Transaction ID: SBD.59 Date of Disbursement 02 / 25 / 2008
	Mailing Address PO BOX 2711	Amount of Each Disbursement this Period 1501.50
	City SUMMERVILLE State SC Zip Code 29484	
	Purpose of Disbursement TRANSPORTATION SVC Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) AIKEN LIMOUSINE	Transaction ID: SBD.60 Date of Disbursement 02 / 25 / 2008
	Mailing Address 153 PENDLETON ST NW	Amount of Each Disbursement this Period 250.00
	City AIKEN State SC Zip Code 29801	
	Purpose of Disbursement TRANSPORTATION SVC	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) AIKEN LIMOUSINE	Transaction ID: SBD.75 Date of Disbursement 02 / 25 / 2008
	Mailing Address 153 PENDLETON ST NW	Amount of Each Disbursement this Period 125.00
	City AIKEN State SC Zip Code 29801	
	Purpose of Disbursement TRANSPORTATION SVC	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) BECKS SPORTS	Transaction ID: SBD.11 Date of Disbursement 02 / 25 / 2008
	Mailing Address 3295 UNIVERSITY AVE	Amount of Each Disbursement this Period 100.00
	City WATERLOO State IA Zip Code 50701	
	Purpose of Disbursement FACILITY RENTAL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) BUDGET CAR RENTAL	Transaction ID: SBD.65
	Mailing Address 6 SYLVAN WAY	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City PARSIPPANY State NJ Zip Code 07054	Amount of Each Disbursement this Period 1013.24
	Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type [MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) CAROLINA RETAIL PACKAGING	Transaction ID: SBD.46
	Mailing Address 138 ZENKER RD	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City LEXINGTON State SC Zip Code 29072	Amount of Each Disbursement this Period 531.25
	Purpose of Disbursement DECORATIONS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type [MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) CDYNE CORPORATION	Transaction ID: SBD.21
	Mailing Address 2125 SMITH AVE STE 200	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City CHESAPEAKE State VA Zip Code 23320	Amount of Each Disbursement this Period 34.99
	Purpose of Disbursement LIST MANAGEMENT SVC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type [MEMO ITEM]

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) CLARION HOTELS	Transaction ID: SBD.49 Date of Disbursement 02 / 25 / 2008
	Mailing Address 10750 COLUMBIA PK	Amount of Each Disbursement this Period 1086.69
	City SILVER SPRING State MD Zip Code 20901	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) CLARION HOTELS	Transaction ID: SBD.50 Date of Disbursement 02 / 25 / 2008
	Mailing Address 10750 COLUMBIA PK	Amount of Each Disbursement this Period 1605.00
	City SILVER SPRING State MD Zip Code 20901	
	Purpose of Disbursement FACILITY RENTAL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) CLARION HOTELS	Transaction ID: SBD.58 Date of Disbursement 02 / 25 / 2008
	Mailing Address 10750 COLUMBIA PK	Amount of Each Disbursement this Period 70.42
	City SILVER SPRING State MD Zip Code 20901	
	Purpose of Disbursement CATERING	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <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 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
CLARION HOTELS

Mailing Address 10750 COLUMBIA PK

City SILVER SPRING State MD Zip Code 20901

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.69
Date of Disbursement

02 / 25 / 2008

Amount of Each Disbursement this Period

395.16

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
CLARION HOTELS

Mailing Address 10750 COLUMBIA PK

City SILVER SPRING State MD Zip Code 20901

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.71
Date of Disbursement

02 / 25 / 2008

Amount of Each Disbursement this Period

1580.64

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
CLARION HOTELS

Mailing Address 10750 COLUMBIA PK

City SILVER SPRING State MD Zip Code 20901

Purpose of Disbursement
FACILITY RENTAL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.72
Date of Disbursement

02 / 25 / 2008

Amount of Each Disbursement this Period

701.14

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) CLARION HOTELS	Transaction ID: SBD.76 Date of Disbursement 02 / 25 / 2008
	Mailing Address 10750 COLUMBIA PK	Amount of Each Disbursement this Period 160.50
	City SILVER SPRING State MD Zip Code 20901	
	Purpose of Disbursement STAGING	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) COMFORT INNS	Transaction ID: SBD.22 Date of Disbursement 02 / 25 / 2008
	Mailing Address 10750 COLUMBIA PK	Amount of Each Disbursement this Period 99.89
	City SILVER SPRING State MD Zip Code 20901	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) COMFORT INNS	Transaction ID: SBD.23 Date of Disbursement 02 / 25 / 2008
	Mailing Address 10750 COLUMBIA PK	Amount of Each Disbursement this Period 99.89
	City SILVER SPRING State MD Zip Code 20901	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) COMFORT INNS	Transaction ID: SBD.24 Date of Disbursement 02 / 25 / 2008
	Mailing Address 10750 COLUMBIA PK	Amount of Each Disbursement this Period 99.89
	City SILVER SPRING State MD Zip Code 20901	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) COMFORT INNS	Transaction ID: SBD.25 Date of Disbursement 02 / 25 / 2008
	Mailing Address 10750 COLUMBIA PK	Amount of Each Disbursement this Period 99.89
	City SILVER SPRING State MD Zip Code 20901	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) COMFORT SUITES	Transaction ID: SBD.26 Date of Disbursement 02 / 25 / 2008
	Mailing Address 10750 COLUMBIA PK	Amount of Each Disbursement this Period 99.89
	City SILVER SPRING State MD Zip Code 20901	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <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 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) COMFORT SUITES	Transaction ID: SBD.27 Date of Disbursement 02 / 25 / 2008
	Mailing Address 10750 COLUMBIA PK	Amount of Each Disbursement this Period 99.89
	City SILVER SPRING State MD Zip Code 20901	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) COMFORT SUITES	Transaction ID: SBD.28 Date of Disbursement 02 / 25 / 2008
	Mailing Address 10750 COLUMBIA PK	Amount of Each Disbursement this Period 99.89
	City SILVER SPRING State MD Zip Code 20901	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) COMFORT SUITES	Transaction ID: SBD.29 Date of Disbursement 02 / 25 / 2008
	Mailing Address 10750 COLUMBIA PK	Amount of Each Disbursement this Period 99.89
	City SILVER SPRING State MD Zip Code 20901	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <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 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) COMFORT SUITES Mailing Address 10750 COLUMBIA PK City SILVER SPRING State MD Zip Code 20901 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SBD.30 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8 Amount of Each Disbursement this Period 99.89 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) COMFORT SUITES Mailing Address 10750 COLUMBIA PK City SILVER SPRING State MD Zip Code 20901 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SBD.31 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8 Amount of Each Disbursement this Period 99.89 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) COMFORT SUITES Mailing Address 10750 COLUMBIA PK City SILVER SPRING State MD Zip Code 20901 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SBD.32 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8 Amount of Each Disbursement this Period 99.89 [MEMO ITEM]

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) COMFORT SUITES	Transaction ID: SBD.33 Date of Disbursement 02 / 25 / 2008
	Mailing Address 10750 COLUMBIA PK	Amount of Each Disbursement this Period 99.89
	City SILVER SPRING State MD Zip Code 20901	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) COMFORT SUITES	Transaction ID: SBD.61 Date of Disbursement 02 / 25 / 2008
	Mailing Address 10750 COLUMBIA PK	Amount of Each Disbursement this Period 584.35
	City SILVER SPRING State MD Zip Code 20901	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) CONLON TRANSPORTATION	Transaction ID: SBD.35 Date of Disbursement 02 / 25 / 2008
	Mailing Address 647 HALL ST	Amount of Each Disbursement this Period 2229.00
	City MANCHESTER State NH Zip Code 03104	
	Purpose of Disbursement TRANSPORTATION SVC	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <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 3P)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) COURTYARD HOTELS	Transaction ID: SBD.62
	Mailing Address 10400 FERNWOOD RD	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City BETHESDA State MD Zip Code 20817	Amount of Each Disbursement this Period 432.84
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) CSI AVIATION	Transaction ID: SBD.40
	Mailing Address 3700 RIO GRANDE BLD NW	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City ALBUQUERQUE State NM Zip Code 87107	Amount of Each Disbursement this Period 50.40
	Purpose of Disbursement FOOD/BEVERAGE	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) CSI AVIATION	Transaction ID: SBD.41
	Mailing Address 3700 RIO GRANDE BLD NW	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City ALBUQUERQUE State NM Zip Code 87107	Amount of Each Disbursement this Period 9836.58
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <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 3P)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) CSI AVIATION	Transaction ID: SBD.51 Date of Disbursement 02 / 25 / 2008
	Mailing Address 3700 RIO GRANDE BLD NW	Amount of Each Disbursement this Period 1294.37
	City ALBUQUERQUE State NM Zip Code 87107	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) DAYS INN	Transaction ID: SBD.10 Date of Disbursement 02 / 25 / 2008
	Mailing Address 1 SYLVAN WAY	Amount of Each Disbursement this Period 1003.20
	City PARSIPPANY State NJ Zip Code 07054	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) DAYS INN	Transaction ID: SBD.15 Date of Disbursement 02 / 25 / 2008
	Mailing Address 1 SYLVAN WAY	Amount of Each Disbursement this Period 463.68
	City PARSIPPANY State NJ Zip Code 07054	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) DELIGHTFUL DELIVERIES	Transaction ID: SBD.73 Date of Disbursement 02 / 25 / 2008
	Mailing Address 79 MAIN ST STE 314	Amount of Each Disbursement this Period 90.97
	City PORT WASHINGTON State NY Zip Code 11050	
	Purpose of Disbursement FLORAL EXPENSE	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) DIVA LIMOUSINE LTD	Transaction ID: SBD.36 Date of Disbursement 02 / 25 / 2008
	Mailing Address 1670 N SYCAMORE AVE	Amount of Each Disbursement this Period 303.75
	City LOS ANGELES State CA Zip Code 90028	
	Purpose of Disbursement TRANSPORTATION SVC	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) DIVA LIMOUSINE LTD	Transaction ID: SBD.37 Date of Disbursement 02 / 25 / 2008
	Mailing Address 1670 N SYCAMORE AVE	Amount of Each Disbursement this Period 1026.00
	City LOS ANGELES State CA Zip Code 90028	
	Purpose of Disbursement TRANSPORTATION SVC	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) DIVA LIMOUSINE LTD	Transaction ID: SBD.38
	Mailing Address 1670 N SYCAMORE AVE	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City LOS ANGELES State CA Zip Code 90028	Amount of Each Disbursement this Period 648.00
	Purpose of Disbursement TRANSPORTATION SVC Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) EMBASSY SUITES	Transaction ID: SBD.70
	Mailing Address 9336 CIVIC CENTER DR	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City BEVERLY HILLS State CA Zip Code 90210	Amount of Each Disbursement this Period 1442.64
	Purpose of Disbursement TRAVEL Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) EXECUTIVE STAR LIMO	Transaction ID: SB23C.2
	Mailing Address 7180 DEAN MARTIN DR	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City LAS VEGAS State NV Zip Code 89118	Amount of Each Disbursement this Period -534.60
	Purpose of Disbursement TRANSPORTATION SVC Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <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 3P)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) HOLIDAY INNS Mailing Address 3 RAVINIA DR STE 100 City ATLANTA State GA Zip Code 30346 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.34 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 110.98 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) HOLIDAY INNS Mailing Address 3 RAVINIA DR STE 100 City ATLANTA State GA Zip Code 30346 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.39 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1336.64 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) HOLIDAY INNS Mailing Address 3 RAVINIA DR STE 100 City ATLANTA State GA Zip Code 30346 Purpose of Disbursement TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SBD.48 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 501.24 [MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) HOTELS.COM	Transaction ID: SB23C.1 Date of Disbursement 02 / 25 / 2008
	Mailing Address 10440 N CENTRAL EXPY # 400	Amount of Each Disbursement this Period -592.76
	City DALLAS State TX Zip Code 75231	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) HOTELS.COM	Transaction ID: SBD.43 Date of Disbursement 02 / 25 / 2008
	Mailing Address 10440 N CENTRAL EXPY # 400	Amount of Each Disbursement this Period 687.22
	City DALLAS State TX Zip Code 75231	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) INTUIT SOFTWARE	Transaction ID: SBD.79 Date of Disbursement 02 / 25 / 2008
	Mailing Address 2933 MILLER RD	Amount of Each Disbursement this Period 127.80
	City DECATUR State GA Zip Code 30035	
	Purpose of Disbursement OFFICE SUPPLIES	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) LA QUINTA INN	Transaction ID: SBD.56 Date of Disbursement 02 / 25 / 2008
	Mailing Address 909 HIDDEN RIDGE STE 600	Amount of Each Disbursement this Period 64.90
	City IRVING State TX Zip Code 75038	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) LIMOUSINE CONNECTION	Transaction ID: SBD.20 Date of Disbursement 02 / 25 / 2008
	Mailing Address PO BOX 411	Amount of Each Disbursement this Period 94.23
	City FAIRFAX State VA Zip Code 22038	
	Purpose of Disbursement TRANSPORTATION SVC	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) LIMOUSINE CONNECTION	Transaction ID: SBD.44 Date of Disbursement 02 / 25 / 2008
	Mailing Address PO BOX 411	Amount of Each Disbursement this Period 121.65
	City FAIRFAX State VA Zip Code 22038	
	Purpose of Disbursement TRANSPORTATION SVC	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
LIMOUSINE CONNECTION

Transaction ID: SBD.52

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	0	8

Mailing Address PO BOX 411

Amount of Each Disbursement this Period

324.40

City FAIRFAX State VA Zip Code 22038

Purpose of Disbursement
TRANSPORTATION SVC

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

B.

Full Name (Last, First, Middle Initial)
LIMOUSINE CONNECTION

Transaction ID: SBD.66

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	0	8

Mailing Address PO BOX 411

Amount of Each Disbursement this Period

199.90

City FAIRFAX State VA Zip Code 22038

Purpose of Disbursement
TRANSPORTATION SVC

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

C.

Full Name (Last, First, Middle Initial)
LITCHFIELD BEACH

Transaction ID: SBD.53

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	0	8

Mailing Address PO BOX 320

Amount of Each Disbursement this Period

97.60

City PAWLEYS ISLAND State SC Zip Code 29585

Purpose of Disbursement
TRAVEL

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MAJESTIC LIMOUSINE	Transaction ID: SBD.17
	Mailing Address 5094 NW 111TH DR STE C	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City GRIMES State IA Zip Code 50111	Amount of Each Disbursement this Period 1166.00
	Purpose of Disbursement TRANSPORTATION SVC	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) MAJESTIC LIMOUSINE	Transaction ID: SBD.19
	Mailing Address 5094 NW 111TH DR STE C	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City GRIMES State IA Zip Code 50111	Amount of Each Disbursement this Period 14863.06
	Purpose of Disbursement TRANSPORTATION SVC	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) MARRIOTT DES MOINES	Transaction ID: SBD.12
	Mailing Address 700 GRAND AVE	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City DES MOINES State IA Zip Code 50309	Amount of Each Disbursement this Period 7024.94
	Purpose of Disbursement CATERING	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <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 3P) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MARRIOTT DES MOINES	Transaction ID: SBD.18 Date of Disbursement 02 / 25 / 2008
	Mailing Address 700 GRAND AVE	Amount of Each Disbursement this Period 1813.71
	City DES MOINES State IA Zip Code 50309	
	Purpose of Disbursement STAGING	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) MARRIOTT HOTELS	Transaction ID: SBD.54 Date of Disbursement 02 / 25 / 2008
	Mailing Address MARRIOTT DR	Amount of Each Disbursement this Period 517.28
	City WASHINGTON State DC Zip Code 20058	
	Purpose of Disbursement FACILITY RENTAL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) MARRIOTT HOTELS	Transaction ID: SBD.55 Date of Disbursement 02 / 25 / 2008
	Mailing Address MARRIOTT DR	Amount of Each Disbursement this Period 741.61
	City WASHINGTON State DC Zip Code 20058	
	Purpose of Disbursement CATERING	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <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 3P)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MARRIOTT HOTELS	Transaction ID: SBD.67 Date of Disbursement 02 / 25 / 2008
	Mailing Address MARRIOTT DR	Amount of Each Disbursement this Period 133.19
	City WASHINGTON State DC Zip Code 20058	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) MARRIOTT HOTELS	Transaction ID: SBD.68 Date of Disbursement 02 / 25 / 2008
	Mailing Address MARRIOTT DR	Amount of Each Disbursement this Period 133.19
	City WASHINGTON State DC Zip Code 20058	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) MARRIOTT HOTELS	Transaction ID: SBD.77 Date of Disbursement 02 / 25 / 2008
	Mailing Address MARRIOTT DR	Amount of Each Disbursement this Period 2105.82
	City WASHINGTON State DC Zip Code 20058	
	Purpose of Disbursement TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <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 3P)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MARRIOTT HOTELS	Transaction ID: SBD.78
	Mailing Address MARRIOTT DR	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City WASHINGTON State DC Zip Code 20058	Amount of Each Disbursement this Period 5495.44
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) PHOENIX INN	Transaction ID: SBD.63
	Mailing Address 246 N PLEASANTBURG DR	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City GREENVILLE State SC Zip Code 29607	Amount of Each Disbursement this Period 716.10
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) PHOENIX INN	Transaction ID: SBD.64
	Mailing Address 246 N PLEASANTBURG DR	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City GREENVILLE State SC Zip Code 29607	Amount of Each Disbursement this Period 716.10
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <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 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) QUALITY INN & SUITES	Transaction ID: SBD.16 Date of Disbursement 02 / 25 / 2008
	Mailing Address 3537 W BROADWAY	Amount of Each Disbursement this Period 160.50
	City COUNCIL BLUFFS State IA Zip Code 51501	[MEMO ITEM]
	Purpose of Disbursement FACILITY RENTAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) RIVERCENTER	Transaction ID: SBD.13 Date of Disbursement 02 / 25 / 2008
	Mailing Address 176 E THIRD ST	Amount of Each Disbursement this Period 300.00
	City DAVENPORT State IA Zip Code 52801	[MEMO ITEM]
	Purpose of Disbursement FACILITY RENTAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) SCHERMERHORN SYMPHONY CENTER	Transaction ID: SBD.45 Date of Disbursement 02 / 25 / 2008
	Mailing Address ONE SYMPHONY PLACE	Amount of Each Disbursement this Period 12793.89
	City NASHVILLE State TN Zip Code 37201	[MEMO ITEM]
	Purpose of Disbursement FACILITY RENTAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <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 3P)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SBD.74 Date of Disbursement 02 / 25 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 250.00
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement TRANSPORTATION SVC	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SBD.14 Date of Disbursement 02 / 25 / 2008
	Mailing Address 2702 LOVE FIELD DR	Amount of Each Disbursement this Period 194.50
	City DALLAS State TX Zip Code 75235	
	Purpose of Disbursement TRAVEL	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS CREDIT CARD - RICHARD	Transaction ID: SB.1003 Date of Disbursement 02 / 24 / 2008
	Mailing Address PO BOX 360001	Amount of Each Disbursement this Period 2359.55
	City FT LAUDERDALE State FL Zip Code 33336-0000	
	Purpose of Disbursement CREDIT CARD PAYMENT	[MEMO ITEM]
	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)	2359.55
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
DOMINOS PIZZA

Mailing Address 1420 CHAIN BRIDGE RD

City State Zip Code
MCLEAN VA 22101

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.87

Date of Disbursement

02 / 24 / 2008

Amount of Each Disbursement this Period

78.16

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
DR CAR WASH

Mailing Address 13663 LEE JACKSON MEMORIAL HWY

City State Zip Code
CHANTILLY VA 20151

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.81

Date of Disbursement

02 / 24 / 2008

Amount of Each Disbursement this Period

14.45

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
EXXON/MOBILE

Mailing Address 5959 LAS COLINAS BLVD

City State Zip Code
IRVING TX 75039

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.85

Date of Disbursement

02 / 24 / 2008

Amount of Each Disbursement this Period

625.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
QWEST COMMUNICATIONS

Mailing Address 1801 CALIFORNIA ST

City DENVER State CO Zip Code 80202

Purpose of Disbursement
PHONE SVC

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.80
Date of Disbursement

02 / 24 / 2008

Amount of Each Disbursement this Period

765.87

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
RADIOSHACK

Mailing Address 1961 CHAIN BRIDGE RD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.84
Date of Disbursement

02 / 24 / 2008

Amount of Each Disbursement this Period

209.98

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
SUNOCO

Mailing Address 4475 CHANTILLY SHOPPING CNTR

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.82
Date of Disbursement

02 / 24 / 2008

Amount of Each Disbursement this Period

2.03

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
SUNOCO

Mailing Address 4475 CHANTILLY SHOPPING CNTR

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.83
Date of Disbursement

02 / 24 / 2008

Amount of Each Disbursement this Period

39.06

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
SUNOCO

Mailing Address 4475 CHANTILLY SHOPPING CNTR

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SBD.86
Date of Disbursement

02 / 24 / 2008

Amount of Each Disbursement this Period

625.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS

Mailing Address PO BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.130
Date of Disbursement

02 / 05 / 2008

Amount of Each Disbursement this Period

7937.70

SUBTOTAL of Disbursements This Page (optional)

7937.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS

Mailing Address PO BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.2

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS

Mailing Address PO BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.28

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS

Mailing Address PO BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.3

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 246 / 320

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: SB23.9
	Mailing Address PO BOX 53852	Date of Disbursement MM / DD / YYYY 02 / 11 / 2008
	City PHOENIX State AZ Zip Code 85072	Amount of Each Disbursement this Period 38.50
	Purpose of Disbursement CREDIT CARD FEE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AT&T MOBILITY	Transaction ID: SB23.136
	Mailing Address PO BOX 78405	Date of Disbursement MM / DD / YYYY 02 / 20 / 2008
	City PHOENIX State AZ Zip Code 85062	Amount of Each Disbursement this Period 10326.88
	Purpose of Disbursement PHONE SVC	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BANKCARD USA MERCHANT SERVICES	Transaction ID: SB23.1
	Mailing Address 5701 LINDERO CANYON RD BLDG 3	Date of Disbursement MM / DD / YYYY 02 / 19 / 2008
	City WESTLAKE VILLAGE State CA Zip Code 91362	Amount of Each Disbursement this Period 0.37
	Purpose of Disbursement CREDIT CARD FEE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	10365.75
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) BANKCARD USA MERCHANT SERVICES	Transaction ID: SB23.12
	Mailing Address 5701 LINDERO CANYON RD BLDG 3	Date of Disbursement MM / DD / YYYY 02 / 04 / 2008
	City WESTLAKE VILLAGE State CA Zip Code 91362	Amount of Each Disbursement this Period <input type="text" value="50.14"/>
	Purpose of Disbursement CREDIT CARD FEE Candidate Name <input type="text"/>	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

B.	Full Name (Last, First, Middle Initial) BANKCARD USA MERCHANT SERVICES	Transaction ID: SB23.14
	Mailing Address 5701 LINDERO CANYON RD BLDG 3	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City WESTLAKE VILLAGE State CA Zip Code 91362	Amount of Each Disbursement this Period <input type="text" value="60.31"/>
	Purpose of Disbursement CREDIT CARD FEE Candidate Name <input type="text"/>	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

C.	Full Name (Last, First, Middle Initial) BANKCARD USA MERCHANT SERVICES	Transaction ID: SB23.18
	Mailing Address 5701 LINDERO CANYON RD BLDG 3	Date of Disbursement MM / DD / YYYY 02 / 12 / 2008
	City WESTLAKE VILLAGE State CA Zip Code 91362	Amount of Each Disbursement this Period <input type="text" value="79.78"/>
	Purpose of Disbursement CREDIT CARD FEE Candidate Name <input type="text"/>	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="190.23"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) BANKCARD USA MERCHANT SERVICES	Transaction ID: SB23.20
	Mailing Address 5701 LINDERO CANYON RD BLDG 3	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City WESTLAKE VILLAGE State CA Zip Code 91362	Amount of Each Disbursement this Period 93.74
	Purpose of Disbursement CREDIT CARD FEE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BANKCARD USA MERCHANT SERVICES	Transaction ID: SB23.6
	Mailing Address 5701 LINDERO CANYON RD BLDG 3	Date of Disbursement MM / DD / YYYY 02 / 11 / 2008
	City WESTLAKE VILLAGE State CA Zip Code 91362	Amount of Each Disbursement this Period 18.92
	Purpose of Disbursement CREDIT CARD FEE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BARRINGTON WORLDWIDE	Transaction ID: SB23.140B
	Mailing Address PO BOX 19057	Date of Disbursement MM / DD / YYYY 02 / 07 / 2008
	City ALEXANDRIA State VA Zip Code 22320	Amount of Each Disbursement this Period 12500.00
	Purpose of Disbursement MEDIA	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	12612.66
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) BCN TELECOM INC	Transaction ID: SB23.41 Date of Disbursement 02 / 20 / 2008
	Mailing Address PO BOX 52245	Amount of Each Disbursement this Period 272.92
	City NEWARK State NH Zip Code 07101	
	Purpose of Disbursement PHONE SVC Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BRYAN CAVE LLP	Transaction ID: SB23.146 Date of Disbursement 02 / 27 / 2008
	Mailing Address PO BOX 503089	Amount of Each Disbursement this Period 20080.33
	City ST LOUIS State MO Zip Code 63150	
	Purpose of Disbursement LEGAL CONSULTING Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CAC DIRECT MARKETING SERVICES	Transaction ID: SB23.129 Date of Disbursement 02 / 07 / 2008
	Mailing Address 99 RAY RD	Amount of Each Disbursement this Period 7923.46
	City BALTIMORE State MD Zip Code 21227	
	Purpose of Disbursement PRINTING Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	28276.71
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) CAPITOL GAINS CORP	Transaction ID: SB23.128
	Mailing Address 150 ALHAMBRA CR STE 1220	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City CORAL GABLES State FL Zip Code 33134	Amount of Each Disbursement this Period 7500.00
	Purpose of Disbursement STRATEGIC CONSULTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) CIRCULAR ADVERTISING	Transaction ID: SB23.156
	Mailing Address 99 RAY RD	Date of Disbursement MM / DD / YYYY 02 / 07 / 2008
	City BALTIMORE State MD Zip Code 21227	Amount of Each Disbursement this Period -54208.70
	Purpose of Disbursement VOID CHECK	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) CITY OF COLUMBIA	Transaction ID: SB23.60
	Mailing Address PO BOX 7997	Date of Disbursement MM / DD / YYYY 02 / 20 / 2008
	City COLUMBIA State SC Zip Code 29202	Amount of Each Disbursement this Period 434.31
	Purpose of Disbursement UTILITIES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	-46274.39
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB23.122 Date of Disbursement
	Mailing Address 7704 LEESBURG PK	<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement DATA MANAGEMENT SVC	<input type="text" value="5592.30"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB23.152 Date of Disbursement
	Mailing Address 7704 LEESBURG PK	<input type="text" value="02"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement DATA MANAGEMENT SVC	<input type="text" value="50064.78"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) COMPLIANCE CONSULTING OF VIRGINIA	Transaction ID: SB23.139 Date of Disbursement
	Mailing Address PO BOX 365	<input type="text" value="02"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City MCLEAN State VA Zip Code 22101	Amount of Each Disbursement this Period
	Purpose of Disbursement COMPLIANCE CONSULTING	<input type="text" value="12000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="67657.08"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) COMPTROLLER OF MARYLAND	Transaction ID: SB23.87 Date of Disbursement 02 / 29 / 2008	
	Mailing Address REVENUE ADMINISTRATION DIVISION		
	City ANNAPOLIS State MD Zip Code 21411	Amount of Each Disbursement this Period	1027.54
	Purpose of Disbursement PAYROLL TAXES		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
B.	Full Name (Last, First, Middle Initial) DATA MART	Transaction ID: SB23.25 Date of Disbursement 02 / 07 / 2008	
	Mailing Address PO BOX 3250		
	City TUSTIN State CA Zip Code 92781	Amount of Each Disbursement this Period	115.42
	Purpose of Disbursement WEB SVC		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
C.	Full Name (Last, First, Middle Initial) DIGITAL OFFICE PRODUCTS	Transaction ID: SB23.49 Date of Disbursement 02 / 07 / 2008	
	Mailing Address 1749 OLD MEADOW RD STE 200		
	City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period	340.94
	Purpose of Disbursement OFFICE SUPPLIES		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

SUBTOTAL of Disbursements This Page (optional)	1483.90
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial) DIGITAL OFFICE PRODUCTS Mailing Address 1749 OLD MEADOW RD STE 200 City MCLEAN State VA Zip Code 22102 Purpose of Disbursement EQUIPMENT RENTAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.55 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 8
	Amount of Each Disbursement this Period 400.00

B. Full Name (Last, First, Middle Initial) DIRECT IMPRESSIONS Mailing Address 2100 TOMLYNN ST City RICHMOND State VA Zip Code 23230 Purpose of Disbursement PRINTING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.107 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 2716.50

C. Full Name (Last, First, Middle Initial) DISCOVER NETWORK Mailing Address PO BOX 52145 City PHOENIX State AZ Zip Code 85072 Purpose of Disbursement CREDIT CARD FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.103 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 0 8
	Amount of Each Disbursement this Period 2258.88

SUBTOTAL of Disbursements This Page (optional) ▶	5375.38
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. DUPLI ENVELOPES AND GRAPHICS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 11500

City SYRACUSE State NY Zip Code 13218

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.120

Date of Disbursement

02 / 07 / 2008

Amount of Each Disbursement this Period

4992.00

B. EAGLE INTERACTIVE

Full Name (Last, First, Middle Initial)

Mailing Address 1 MASSACHUSETTS AVE 6TH FL

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.125

Date of Disbursement

02 / 07 / 2008

Amount of Each Disbursement this Period

6000.00

C. EATON RIVER STRATEGIES

Full Name (Last, First, Middle Initial)

Mailing Address 28 EDWARD RD

City WEST NEWTON State MA Zip Code 02465

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING/TVL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.132

Date of Disbursement

02 / 07 / 2008

Amount of Each Disbursement this Period

9455.12

SUBTOTAL of Disbursements This Page (optional) ►

20447.12

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) ELECTION CONNECTIONS INC Mailing Address PO BOX 10866 City TALLAHASSEE State FL Zip Code 32302 Purpose of Disbursement MESSAGE PHONE CALLS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.144 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 8 Amount of Each Disbursement this Period 18089.60
B.	Full Name (Last, First, Middle Initial) ELECTION CONNECTIONS INC Mailing Address PO BOX 10866 City TALLAHASSEE State FL Zip Code 32302 Purpose of Disbursement MESSAGE PHONE CALLS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.154 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8 Amount of Each Disbursement this Period 210302.98
C.	Full Name (Last, First, Middle Initial) ENWRIGHT CONSULTING CO Mailing Address PO BOX 10362 City TALLAHASSEE State FL Zip Code 32302 Purpose of Disbursement STRATEGIC CONSULTING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.145 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8 Amount of Each Disbursement this Period 20000.00

SUBTOTAL of Disbursements This Page (optional) ▶	248392.58
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
EVENT STRATEGIES INC

Transaction ID: SB23.113

Date of Disbursement

Mailing Address 211 N UNION ST STE 220

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	0	8

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

Purpose of Disbursement
STAGING/TRAVEL

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
FEDEX

Transaction ID: SB23.11

Date of Disbursement

Mailing Address PO BOX 660481

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	0	8

City DALLAS State TX Zip Code 75266

Amount of Each Disbursement this Period

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
FEDEX

Transaction ID: SB23.22

Date of Disbursement

Mailing Address PO BOX 660481

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	0	8

City DALLAS State TX Zip Code 75266

Amount of Each Disbursement this Period

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) FEDEX	Transaction ID: SB23.38
	Mailing Address PO BOX 660481	Date of Disbursement 02 / 29 / 2008
	City DALLAS State TX Zip Code 75266	Amount of Each Disbursement this Period 251.50
	Purpose of Disbursement DELIVERY	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FEDEX	Transaction ID: SB23.42
	Mailing Address PO BOX 660481	Date of Disbursement 02 / 27 / 2008
	City DALLAS State TX Zip Code 75266	Amount of Each Disbursement this Period 275.41
	Purpose of Disbursement DELIVERY	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FEDEX	Transaction ID: SB23.44
	Mailing Address PO BOX 660481	Date of Disbursement 02 / 29 / 2008
	City DALLAS State TX Zip Code 75266	Amount of Each Disbursement this Period 297.25
	Purpose of Disbursement DELIVERY	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	824.16
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) FEDEX	Transaction ID: SB23.86
	Mailing Address PO BOX 660481	Date of Disbursement MM / DD / YYYY 02 / 20 / 2008
	City DALLAS State TX Zip Code 75266	Amount of Each Disbursement this Period 1017.60
	Purpose of Disbursement DELIVERY	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) GA DEPARTMENT OF LABOR	Transaction ID: SB23.29
	Mailing Address PO BOX 740234	Date of Disbursement MM / DD / YYYY 02 / 15 / 2008
	City ATLANTA State GA Zip Code 30374	Amount of Each Disbursement this Period 157.20
	Purpose of Disbursement PAYROLL TAXES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) GOOGLE ADWORDS	Transaction ID: SB23.10
	Mailing Address 1600 AMPHITHEATRE PKY	Date of Disbursement MM / DD / YYYY 02 / 25 / 2008
	City MOUNTAIN VIEW State CA Zip Code 94043	Amount of Each Disbursement this Period 44.01
	Purpose of Disbursement SUBSCRIPTIONS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1218.81
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
HEMPHILL BROTHERS COACH CO

Transaction ID: SB23.147

Date of Disbursement

Mailing Address 7471 OLD HICKORY BLVD

02 / 20 / 2008

City State Zip Code
WHITES CREEK TN 37189

Amount of Each Disbursement this Period

23760.14

Purpose of Disbursement
TRANSPORTATION SVC

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
I WEB STRATEGIES

Transaction ID: SB23.143

Date of Disbursement

Mailing Address 814 KING ST STE 430

02 / 20 / 2008

City State Zip Code
ALEXANDRIA VA 22314

Amount of Each Disbursement this Period

17700.00

Purpose of Disbursement
WEB SVC

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
ILLUMEN

Transaction ID: SB23.59

Date of Disbursement

Mailing Address 1000 POTOMAC ST NW STE 430

02 / 29 / 2008

City State Zip Code
WASHINGTON DC 20007

Amount of Each Disbursement this Period

416.67

Purpose of Disbursement
WEB SVC

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

41876.81

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) INFOCISION	Transaction ID: SB23.153
	Mailing Address 325 SPRINGSIDE DR	Date of Disbursement MM / DD / YYYY 02 / 07 / 2008
	City AKRON State OH Zip Code 44333	Amount of Each Disbursement this Period 93117.91
	Purpose of Disbursement FUNDRAISING PHONE CALLS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) INTERNAL REVENUE SERVICE	Transaction ID: SB23.119
	Mailing Address PO BOX 105273	Date of Disbursement MM / DD / YYYY 02 / 15 / 2008
	City ATLANTA State GA Zip Code 30348	Amount of Each Disbursement this Period 4458.21
	Purpose of Disbursement PAYROLL TAXES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) INTERNAL REVENUE SERVICE	Transaction ID: SB23.133
	Mailing Address PO BOX 105273	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City ATLANTA State GA Zip Code 30348	Amount of Each Disbursement this Period 9646.83
	Purpose of Disbursement PAYROLL TAXES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	107222.95
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
JONES LANG LASALLE AMERICAS INC

Transaction ID: SB23.71

Date of Disbursement

Mailing Address 1600 TYSON'S BLVD STE 1000

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	0	8

City State Zip Code
MCLEAN VA 22102

Amount of Each Disbursement this Period

587.65

Purpose of Disbursement
EQUIPMENT MAINTENANCE

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
KEYSPAN ENERGY DELIVERY

Transaction ID: SB23.75

Date of Disbursement

Mailing Address PO BOX 4300

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	0		2	0	0	8

City State Zip Code
WOBURN MA 01888

Amount of Each Disbursement this Period

604.98

Purpose of Disbursement
UTILITIES

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
LEXISNEXIS

Transaction ID: SB23.97

Date of Disbursement

Mailing Address PO BOX 2314

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	0	8

City State Zip Code
CAROL STREAM IL 60132

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
SUBSCRIPTIONS

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

2692.63

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
MCI COMM SERVICE

Transaction ID: SB23.5
Date of Disbursement

Mailing Address 27732 NETWORK PL

/

City CHICAGO State IL Zip Code 60673

Amount of Each Disbursement this Period

Purpose of Disbursement
PHONE SVC

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
NOVA INFORMATION SYSTEMS INC

Transaction ID: SB23.151
Date of Disbursement

Mailing Address 7300 CHAPMAN HWY

/

City KNOXVILLE State TN Zip Code 37920

Amount of Each Disbursement this Period

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
PAYCHEX

Transaction ID: SB23.30
Date of Disbursement

Mailing Address 22 CENTURY BLVE STE 150

/

City NASHVILLE State TN Zip Code 37229

Amount of Each Disbursement this Period

Purpose of Disbursement
INSURANCE

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: SB23.95
	Mailing Address 22 CENTURY BLVE STE 150	Date of Disbursement MM / DD / YYYY 02 / 11 / 2008
	City NASHVILLE State TN Zip Code 37229	Amount of Each Disbursement this Period 1397.82
	Purpose of Disbursement PAYROLL SVC	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PITNEY BOWES	Transaction ID: SB23.88
	Mailing Address PO BOX 856390	Date of Disbursement MM / DD / YYYY 02 / 07 / 2008
	City LOUISVILLE State KY Zip Code 40285	Amount of Each Disbursement this Period 1152.00
	Purpose of Disbursement EQUIPMENT RENTAL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) POTTERS BAKERY AND CAFE	Transaction ID: SB23.98
	Mailing Address 13412 HARPER PL	Date of Disbursement MM / DD / YYYY 02 / 07 / 2008
	City FONTANA State CA Zip Code 92336	Amount of Each Disbursement this Period 1556.98
	Purpose of Disbursement CATERING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

4106.80

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial)
PROJECT PERFORMANCE CORPORATION

Mailing Address 1760 OLD MEADOW RD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
RENT

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.148

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
PROJECT PERFORMANCE CORPORATION

Mailing Address 1760 OLD MEADOW RD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
RENT

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.149

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
PUBLIC SERVICE OF NH

Mailing Address PO BOX 360

City MANCHESTER State NH Zip Code 03105

Purpose of Disbursement
UTILITIES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.54

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) REGENCY PLAZA LLC	Transaction ID: SB23.157 Date of Disbursement 02 / 11 / 2008
	Mailing Address 6600 WESTOWN PKWY STE220	Amount of Each Disbursement this Period -6500.00
	City DES MOINES State IA Zip Code 50266	
	Purpose of Disbursement VOID CHECK	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) REVOLUTION MEDIA	Transaction ID: SB23.104 Date of Disbursement 02 / 07 / 2008
	Mailing Address 1090 VERMONT AVE NW STE 230	Amount of Each Disbursement this Period 2260.00
	City WASHINGTON State DC Zip Code 20005	
	Purpose of Disbursement MEDIA	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SENTIMENTAL JOURNEYS	Transaction ID: SB23.105 Date of Disbursement 02 / 21 / 2008
	Mailing Address PO BOX 22449	Amount of Each Disbursement this Period 2303.51
	City NASHVILLE State TN Zip Code 37202	
	Purpose of Disbursement EQUIPMENT MAINTENANCE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	-1936.49
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) SHRED IT DES MOINES</p> <p>Mailing Address 4428 NW URBANDALE DR</p> <p>City URBANDALE State IA Zip Code 50322</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.21</p> <p>Date of Disbursement <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>2</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>98.96</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	0	/	2	0	0	8	98.96
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	2	0	/	2	0	0	8													
98.96																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) SOUTH PUBLIC AFFAIRS CONSULTING LLC</p> <p>Mailing Address PO BOX 89298</p> <p>City ATLANTA State GA Zip Code 30312</p> <p>Purpose of Disbursement STRATEGIC CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.123</p> <p>Date of Disbursement <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>2</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>5900.00</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	0	7	/	2	0	0	8	5900.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	0	7	/	2	0	0	8													
5900.00																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) STARBOARD COMMUNICATIONS INC</p> <p>Mailing Address 1043 BARR RD</p> <p>City LEXINGTON State SC Zip Code 28072</p> <p>Purpose of Disbursement PRINTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.67</p> <p>Date of Disbursement <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>2</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>570.00</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	0	7	/	2	0	0	8	570.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	0	7	/	2	0	0	8													
570.00																						

SUBTOTAL of Disbursements This Page (optional)	6568.96
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) STATE OF TENNESSEE	Transaction ID: SB23.7 Date of Disbursement
	Mailing Address PO BOX 101	<input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City NASHVILLE State TN Zip Code 37202	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL TAXES	<input type="text" value="22.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) STATE OF TENNESSEE	Transaction ID: SB23.8 Date of Disbursement
	Mailing Address PO BOX 101	<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City NASHVILLE State TN Zip Code 37202	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL TAXES	<input type="text" value="22.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) STATE OF VIRGINIA	Transaction ID: SB23.34 Date of Disbursement
	Mailing Address PO BOX 1358	<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City RICHMOND State VA Zip Code 23218	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL TAXES	<input type="text" value="240.51"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="285.51"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) STATE OF VIRGINIA</p> <p>Mailing Address PO BOX 1358</p> <p>City RICHMOND State VA Zip Code 23218</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.48</p> <p>Date of Disbursement 02 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 334.04</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) STREAMLOGICS INC</p> <p>Mailing Address 555 RICHMOND ST W STE 400</p> <p>City TORONTO State ON Zip Code 99999</p> <p>Purpose of Disbursement WEB SVC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.84</p> <p>Date of Disbursement 02 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 900.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) THOMAS GRAPHICS</p> <p>Mailing Address PO BOX 142226</p> <p>City AUSTIN State TX Zip Code 78714</p> <p>Purpose of Disbursement PRINTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.117</p> <p>Date of Disbursement 02 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 3989.01</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5223.05

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) THOMAS GRAPHICS	Transaction ID: SB23.127
	Mailing Address PO BOX 142226	Date of Disbursement 02 / 20 / 2008
	City AUSTIN State TX Zip Code 78714	Amount of Each Disbursement this Period 7259.05
	Purpose of Disbursement PRINTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) THOMAS GRAPHICS	Transaction ID: SB23.134
	Mailing Address PO BOX 142226	Date of Disbursement 02 / 07 / 2008
	City AUSTIN State TX Zip Code 78714	Amount of Each Disbursement this Period 9953.59
	Purpose of Disbursement PRINTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) TIME WARNER SC	Transaction ID: SB23.15
	Mailing Address 3347 PLATT SPRINGS RD	Date of Disbursement 02 / 20 / 2008
	City WEST COLUMBIA State SC Zip Code 29170	Amount of Each Disbursement this Period 67.87
	Purpose of Disbursement UTILITIES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	17280.51
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) TIME WARNER SC	Transaction ID: SB23.16 Date of Disbursement 02 / 27 / 2008
	Mailing Address 3347 PLATT SPRINGS RD	Amount of Each Disbursement this Period 67.87
	City WEST COLUMBIA State SC Zip Code 29170	
	Purpose of Disbursement UTILITIES	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: SB23.13 Date of Disbursement 02 / 07 / 2008
	Mailing Address PO BOX 660108	Amount of Each Disbursement this Period 55.58
	City DALLAS State TX Zip Code 75266	
	Purpose of Disbursement PHONE SVC	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) WACHOVIA BANK	Transaction ID: SB23.141 Date of Disbursement 02 / 27 / 2008
	Mailing Address 230 FOURTH AVE N	Amount of Each Disbursement this Period 14306.90
	City NASHVILLE State TN Zip Code 37219	
	Purpose of Disbursement TAXES	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	14430.35
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) WACHOVIA BANK	Transaction ID: SB23.17 Date of Disbursement 02 / 13 / 2008
	Mailing Address 230 FOURTH AVE N	Amount of Each Disbursement this Period 70.00
	City NASHVILLE State TN Zip Code 37219	
	Purpose of Disbursement BANK FEES Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) WACHOVIA BANK	Transaction ID: SB23.35 Date of Disbursement 02 / 13 / 2008
	Mailing Address 230 FOURTH AVE N	Amount of Each Disbursement this Period 250.00
	City NASHVILLE State TN Zip Code 37219	
	Purpose of Disbursement BANK FEES Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) WADE STRATEGIC COMMUNICATIONS	Transaction ID: SB23.106 Date of Disbursement 02 / 07 / 2008
	Mailing Address 6846 MCLEAN PROVINCE CR	Amount of Each Disbursement this Period 2500.00
	City FALLS CHURCH State VA Zip Code 22043	
	Purpose of Disbursement WEB SVC Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	2820.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A. Full Name (Last, First, Middle Initial)
WALLERLANDSDEN DORTCH & DAVIS

Mailing Address PO BOX 198966

City NASHVILLE State TN Zip Code 37211

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.85

Date of Disbursement

02 / 27 / 2008

Amount of Each Disbursement this Period

1001.00

B. Full Name (Last, First, Middle Initial)
WARFIELD & WALSH INC

Mailing Address 601 S WASHINGTON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
LIST MANAGEMENT SVC

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.131

Date of Disbursement

02 / 20 / 2008

Amount of Each Disbursement this Period

8123.20

C. Full Name (Last, First, Middle Initial)
WARFIELD & COMPANY

Mailing Address 3122 ROKEBY RD

City DELAPLANE State VA Zip Code 20144

Purpose of Disbursement
MEDIA

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.135

Date of Disbursement

02 / 21 / 2008

Amount of Each Disbursement this Period

10000.00

SUBTOTAL of Disbursements This Page (optional) ►

19124.20

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) WARFIELD & COMPANY	Transaction ID: SB23.142
	Mailing Address 3122 ROKEBY RD	Date of Disbursement 02 / 20 / 2008
	City DELAPLANE State VA Zip Code 20144	Amount of Each Disbursement this Period 15837.85
	Purpose of Disbursement MEDIA	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) WILDSIDE CATERERS	Transaction ID: SB23.110
	Mailing Address 175 W KELLOG BLVD STE 503	Date of Disbursement 02 / 07 / 2008
	City ST PAUL State MN Zip Code 55102	Amount of Each Disbursement this Period 2970.96
	Purpose of Disbursement CATERING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) XO COMMUNICATIONS	Transaction ID: SB23.102
	Mailing Address 14239 COLLECTIONS CENTER DR	Date of Disbursement 02 / 27 / 2008
	City CHICAGO State IL Zip Code 60693	Amount of Each Disbursement this Period 1950.57
	Purpose of Disbursement PHONE SVC	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	20759.38
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
YUMA SOLUTIONS INC

Transaction ID: SB23.150
Date of Disbursement

Mailing Address 1876 ELDER CT STE B

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	0	8

City State Zip Code
TALLAHASSEE FL 32308

Amount of Each Disbursement this Period

34561.94

Purpose of Disbursement
EQUIPMENT RENTAL

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

34561.94

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

1014248.56

SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MARSHALL G ALLAN	Transaction ID: SB28.97 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 17 SOMERSET ST 3RD FL		
	City NEW YORK State NY Zip Code 54007 Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Amount of Each Disbursement this Period 1000.00	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) CAROLYN E AMIOT	Transaction ID: SB28.41 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 106 BONNAVENTURE PL		
	City NASHVILLE State TN Zip Code 37205 Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Amount of Each Disbursement this Period 2300.00	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) TANI D AUSTIN	Transaction ID: SB28.119 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 5334 HARBOR TOWN DR		
	City DALLAS State TX Zip Code 75287 Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Amount of Each Disbursement this Period 2300.00	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5600.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) RONALD P BARNES	Transaction ID: SB28.24 Date of Disbursement
	Mailing Address 8212 BELL MILL RD	<input type="text" value="02"/> <input type="text" value="14"/> / <input type="text" value="2008"/>
	City OOLTEWAH State TN Zip Code 37363	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION REFUND	<input type="text" value="1000.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) EUGENE BLACKWELL	Transaction ID: SB28.2 Date of Disbursement
	Mailing Address 2023 OLD HICKORY GROVE RD	<input type="text" value="02"/> <input type="text" value="01"/> / <input type="text" value="2008"/>
	City MT HOLLY State NC Zip Code 28120	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION REFUND	<input type="text" value="5.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) KENNETH BOLEN	Transaction ID: SB28.85 Date of Disbursement
	Mailing Address 152 JEFFERSON DR	<input type="text" value="02"/> <input type="text" value="29"/> / <input type="text" value="2008"/>
	City BEAVER State WV Zip Code 25813	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION REFUND	<input type="text" value="2300.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3305.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) JOHN D BOLSTAD	Transaction ID: SB28.76 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 1542 IRVINE AVE		
	City NEWPORT BEACH State CA Zip Code 92660	Amount of Each Disbursement this Period	200.00
	Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) GUY BOSTICK	Transaction ID: SB28.62 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 1300 W LAKE OTIS DR SE		
	City WINTER HAVEN State FL Zip Code 33880	Amount of Each Disbursement this Period	100.00
	Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) BONNIE BOUSMAN	Transaction ID: SB28.8 Date of Disbursement 02 / 14 / 2008	
	Mailing Address 9331 DEWEY DR		
	City GARDEN GROVE State CA Zip Code 92841	Amount of Each Disbursement this Period	600.00
	Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) FURNIE BOYCE	Transaction ID: SB28.57
	Mailing Address 4532 INTELCO LOOP SE APT 354	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City LACEY State WA Zip Code 98503	Amount of Each Disbursement this Period 1400.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) RALPH BUCKNER, JR	Transaction ID: SB28.22
	Mailing Address 400 ANATOLE LN NE	Date of Disbursement MM / DD / YYYY 02 / 14 / 2008
	City CLEVELAND State TN Zip Code 37312	Amount of Each Disbursement this Period 2300.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) SUE ANN BURCHETTE	Transaction ID: SB28.118
	Mailing Address 28060 BRICK ROW DR	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City OXFORD State MD Zip Code 21654	Amount of Each Disbursement this Period 2300.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

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

**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) WILLIAM BURCHETTE	Transaction ID: SB28.127
	Mailing Address 28060 BRICK ROW DR	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City OXFORD State MD Zip Code 21654	Amount of Each Disbursement this Period 2300.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) MARY C BURKEY	Transaction ID: SB28.28
	Mailing Address 4118 WISTON DR	Date of Disbursement MM / DD / YYYY 02 / 21 / 2008
	City GROVEPORT State OH Zip Code 43125	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) LOUIS R CAPPELLI	Transaction ID: SB28.95
	Mailing Address 115 STEVENS AVE	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City VALHALLA State NY Zip Code 10595	Amount of Each Disbursement this Period 2300.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	4620.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) LOUIS L CERUZZI, JR <hr/> Mailing Address 1099 PEQUOT AVE <hr/> City FAIRFIELD State CT Zip Code 06430 <hr/> Purpose of Disbursement CONTRIBUTION REFUND Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28.94 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2300.00
B.	Full Name (Last, First, Middle Initial) TERESE M CERUZZI <hr/> Mailing Address 1099 PEQUOT AVE <hr/> City SOUTHPORT State CT Zip Code 06890 <hr/> Purpose of Disbursement CONTRIBUTION REFUND Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28.120 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2300.00
C.	Full Name (Last, First, Middle Initial) WILLIAM CHILDS <hr/> Mailing Address 3538 EASTWIND ST <hr/> City INDIANAPOLIS State IN Zip Code 46227 <hr/> Purpose of Disbursement CONTRIBUTION REFUND Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28.128 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 249.00

SUBTOTAL of Disbursements This Page (optional) ▶	4849.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) KAREN CLARK	Transaction ID: SB28.18
	Mailing Address 3515 WATER WALK DR	Date of Disbursement MM / DD / YYYY 02 / 14 / 2008
	City WYOMING State MI Zip Code 49418	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) FRAN L CLIPPARD	Transaction ID: SB28.52
	Mailing Address 2315 ABBOTT MARTIN RD	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City NASHVILLE State TN Zip Code 37215	Amount of Each Disbursement this Period 0.50
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) HAROLD COKER	Transaction ID: SB28.65
	Mailing Address 6730 STANDIFER GAP RD	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City CHATTANOOGA State TN Zip Code 37421	Amount of Each Disbursement this Period 2300.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2350.50
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) WILLIAM T COLEMAN	Transaction ID: SB28.131
	Mailing Address 1286 BALLANTRAE FARM DR	Date of Disbursement 02 / 29 / 2008
	City MCLEAN State VA Zip Code 22101	Amount of Each Disbursement this Period 700.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SONJA KAY COOPER	Transaction ID: SB28.115
	Mailing Address 1401 BULLARD RD	Date of Disbursement 02 / 29 / 2008
	City POWDER SPRINGS State GA Zip Code 30127	Amount of Each Disbursement this Period 2300.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JACK L COPELAND	Transaction ID: SB28.69
	Mailing Address 105 E BEDFORD ST	Date of Disbursement 02 / 29 / 2008
	City DIMMITT State TX Zip Code 79027	Amount of Each Disbursement this Period 2300.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5300.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) JM COX	Transaction ID: SB28.75 Date of Disbursement 02 / 29 / 2008
	Mailing Address PO BOX 3891	Amount of Each Disbursement this Period 2300.00
	City JOHNSON CITY State TN Zip Code 37602	
	Purpose of Disbursement CONTRIBUTION REFUND	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) DANIEL F CREMINS	Transaction ID: SB28.47 Date of Disbursement 02 / 29 / 2008
	Mailing Address 77 MOUNTAIN AVE	Amount of Each Disbursement this Period 2300.00
	City LARCHMONT State NY Zip Code 10538	
	Purpose of Disbursement CONTRIBUTION REFUND	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) MARGARET CREMINS	Transaction ID: SB28.96 Date of Disbursement 02 / 29 / 2008
	Mailing Address 77 MOUNTAIN AVE	Amount of Each Disbursement this Period 2300.00
	City LARCHMONT State NY Zip Code 10538	
	Purpose of Disbursement CONTRIBUTION REFUND	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	6900.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) CHIP CRUNK	Transaction ID: SB28.45
	Mailing Address 1225 BEECH HILL RD	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City BRENTWOOD State TN Zip Code 37027	Amount of Each Disbursement this Period 2300.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) JEFFREY A DAVIDSON	Transaction ID: SB28.73
	Mailing Address 272 S WOODMONT DR	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City DOWNINGTOWN State PA Zip Code 19335	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) RICHARD A DEAN	Transaction ID: SB28.107
	Mailing Address 13631 IBBETSON	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City BELLFLOWER State CA Zip Code 90706	Amount of Each Disbursement this Period 1300.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	3650.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) CAROLE DOWD	Transaction ID: SB28.40 Date of Disbursement	<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		2	9		2	0	0	8														
	Mailing Address 1529 CROWELL RD		<table border="1"> <tr> <td colspan="10">Amount of Each Disbursement this Period</td> </tr> <tr> <td colspan="10" style="text-align: center;">2300.00</td> </tr> </table>	Amount of Each Disbursement this Period										2300.00									
Amount of Each Disbursement this Period																							
2300.00																							
	City VIENNA State VA Zip Code 22182 Purpose of Disbursement CONTRIBUTION REFUND Candidate Name		<table border="1"> <tr> <td colspan="10">Amount of Each Disbursement this Period</td> </tr> <tr> <td colspan="10" style="text-align: center;">2300.00</td> </tr> </table>	Amount of Each Disbursement this Period										2300.00									
Amount of Each Disbursement this Period																							
2300.00																							
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
B.	Full Name (Last, First, Middle Initial) JOHN M DOWD	Transaction ID: SB28.77 Date of Disbursement	<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		2	9		2	0	0	8														
	Mailing Address 1529 CROWELL RD		<table border="1"> <tr> <td colspan="10">Amount of Each Disbursement this Period</td> </tr> <tr> <td colspan="10" style="text-align: center;">2300.00</td> </tr> </table>	Amount of Each Disbursement this Period										2300.00									
Amount of Each Disbursement this Period																							
2300.00																							
	City VIENNA State VA Zip Code 22182 Purpose of Disbursement CONTRIBUTION REFUND Candidate Name		<table border="1"> <tr> <td colspan="10">Amount of Each Disbursement this Period</td> </tr> <tr> <td colspan="10" style="text-align: center;">2300.00</td> </tr> </table>	Amount of Each Disbursement this Period										2300.00									
Amount of Each Disbursement this Period																							
2300.00																							
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
C.	Full Name (Last, First, Middle Initial) STEPHEN E DYER	Transaction ID: SB28.116 Date of Disbursement	<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>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		2	9		2	0	0	8														
	Mailing Address 15871 DUQUESNE CIRCLE		<table border="1"> <tr> <td colspan="10">Amount of Each Disbursement this Period</td> </tr> <tr> <td colspan="10" style="text-align: center;">500.00</td> </tr> </table>	Amount of Each Disbursement this Period										500.00									
Amount of Each Disbursement this Period																							
500.00																							
	City BRIGHTON State CO Zip Code 80603 Purpose of Disbursement CONTRIBUTION REFUND Candidate Name		<table border="1"> <tr> <td colspan="10">Amount of Each Disbursement this Period</td> </tr> <tr> <td colspan="10" style="text-align: center;">500.00</td> </tr> </table>	Amount of Each Disbursement this Period										500.00									
Amount of Each Disbursement this Period																							
500.00																							
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional) ▶

5100.00

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

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**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) EDMUND WILLIAM EVANS	Transaction ID: SB28.50 Date of Disbursement 02 / 29 / 2008
	Mailing Address 16186 KELLOGG RD	Amount of Each Disbursement this Period 200.00
	City BOWLING GREEN State OH Zip Code 43402	
	Purpose of Disbursement CONTRIBUTION REFUND	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) WILDA D FARBER	Transaction ID: SB28.126 Date of Disbursement 02 / 29 / 2008
	Mailing Address 200 DOMINICAN DR APT 1308	Amount of Each Disbursement this Period 200.00
	City MADISON State MS Zip Code 39110	
	Purpose of Disbursement CONTRIBUTION REFUND	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) NIJAD I FARES	Transaction ID: SB28.103 Date of Disbursement 02 / 29 / 2008
	Mailing Address PO BOX 130688	Amount of Each Disbursement this Period 2300.00
	City HOUSTON State TX Zip Code 77219	
	Purpose of Disbursement CONTRIBUTION REFUND	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2700.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

<p>A. Full Name (Last, First, Middle Initial) ZENIA FARES</p> <p>Mailing Address PO BOX 130688</p> <p>City HOUSTON State TX Zip Code 77219</p> <p>Purpose of Disbursement CONTRIBUTION REFUND</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB28.133 Date of Disbursement 02 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 2300.00</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) CANDY C FAZAKERLEY</p> <p>Mailing Address P.O. BOX 2070</p> <p>City MIDDLEBURG State VA Zip Code 20118</p> <p>Purpose of Disbursement CONTRIBUTION REFUND</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB28.9 Date of Disbursement 02 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 1350.00</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) PATRICK D FITZGERALD</p> <p>Mailing Address 1718 WESTEND PL</p> <p>City ROUND ROCK State TX Zip Code 78681</p> <p>Purpose of Disbursement CONTRIBUTION REFUND</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB28.104 Date of Disbursement 02 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 2300.00</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5950.00

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

SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MAX L FULLER <hr/> Mailing Address 8569 BALATA DR <hr/> City OOLTEWAH State TN Zip Code 37363 <hr/> Purpose of Disbursement CONTRIBUTION REFUND <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB28.20 Date of Disbursement <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>2</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">2300.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	4	/	2	0	0	8	2300.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	2	/	1	4	/	2	0	0	8														
2300.00																							
B.	Full Name (Last, First, Middle Initial) JAMES E GABLE <hr/> Mailing Address PO BOX 390 <hr/> City CHATHAM State MA Zip Code 02633 <hr/> Purpose of Disbursement CONTRIBUTION REFUND <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB28.70 Date of Disbursement <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>2</td><td>/</td><td>2</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">1700.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	9	/	2	0	0	8	1700.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	2	/	2	9	/	2	0	0	8														
1700.00																							
C.	Full Name (Last, First, Middle Initial) THOMAS F GARRETT <hr/> Mailing Address 1617 KINCAID RD <hr/> City LEWISBURG State TN Zip Code 37091 <hr/> Purpose of Disbursement CONTRIBUTION REFUND <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB28.122 Date of Disbursement <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>2</td><td>/</td><td>2</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">129.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	9	/	2	0	0	8	129.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	2	/	2	9	/	2	0	0	8														
129.00																							

SUBTOTAL of Disbursements This Page (optional) ▶	<table border="1"> <tr> <td style="text-align: right;">4129.00</td> </tr> </table>	4129.00
4129.00		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td style="text-align: right;"> </td> </tr> </table>	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
JODIE GRAY

Transaction ID: SB28.16
Date of Disbursement

Mailing Address 802 GREENWICH WDS DR

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	0	8

City State Zip Code
MCLEAN VA 22102

Amount of Each Disbursement this Period

2300.00

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
KENNETH V HANDAL

Transaction ID: SB28.87
Date of Disbursement

Mailing Address 1075 PARK AVE APT 3B

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	0	8

City State Zip Code
NEW YORK NY 10128

Amount of Each Disbursement this Period

2300.00

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
LARRY L HARSEY

Transaction ID: SB28.5
Date of Disbursement

Mailing Address 280 HIGHWAY 1 S

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	0	8

City State Zip Code
CHERAW SC 29520

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

4700.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
GLENN L HEAVIN

Transaction ID: SB28.61
Date of Disbursement

Mailing Address PO BOX 708

/ /

City INGRAM State TX Zip Code 28025

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
H GARY HEAVIN

Transaction ID: SB28.64
Date of Disbursement

Mailing Address 875 CR 324

/ /

City GATESVILLE State TX Zip Code 76528

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
LISA C HENKEL

Transaction ID: SB28.6
Date of Disbursement

Mailing Address 2412 MARSHALL CT

/ /

City NAPERVILLE State IL Zip Code 60565

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

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

**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) MICHAEL HENKEL	Transaction ID: SB28.100
	Mailing Address 2412 MARSHALL CT	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City NAPERVILLE State IL Zip Code 60565	Amount of Each Disbursement this Period 2300.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) MICHEL HOLLOWAY	Transaction ID: SB28.101
	Mailing Address 1937 W PALMETTO ST	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City FLORENCE State SC Zip Code 29501	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) NATHAN HOWARD	Transaction ID: SB28.102
	Mailing Address 9191 GARLAND RD APT 817	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City DALLAS State TX Zip Code 75218	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2450.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 292 / 320

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) WALTER R HOWELL, III	Transaction ID: SB28.125 Date of Disbursement 02 / 29 / 2008
	Mailing Address 415 TIMBER BRANCH PKWY	Amount of Each Disbursement this Period 500.00
	City ALEXANDRIA State VA Zip Code 22302	
	Purpose of Disbursement CONTRIBUTION REFUND	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) WILLIAM F JENKINS	Transaction ID: SB28.26 Date of Disbursement 02 / 14 / 2008
	Mailing Address 954 WILKENSON RD NE	Amount of Each Disbursement this Period 2300.00
	City CLEVELAND State TN Zip Code 37323	
	Purpose of Disbursement CONTRIBUTION REFUND	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) BRIAN JAY JENSEN	Transaction ID: SB28.37 Date of Disbursement 02 / 29 / 2008
	Mailing Address 239 BOB WHITE TR	Amount of Each Disbursement this Period 500.00
	City SEVIERVILLE State TN Zip Code 37876	
	Purpose of Disbursement CONTRIBUTION REFUND	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	3300.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 293 / 320

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
TIMOTHY KNIGHT

Transaction ID: SB28.25
Date of Disbursement

Mailing Address 1059 BLACK RUSH CIR

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	0	8

City State Zip Code
MT PLEASANT SC 29466

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION REFUND

500.00

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
ROBERT KOWALSKI

Transaction ID: SB28.30
Date of Disbursement

Mailing Address 45573 N TERRITORIAL

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	0	8

City State Zip Code
PLYMOUTH MI 48170

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION REFUND

2300.00

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
LEIGHTA M LAITINEN

Transaction ID: SB28.89
Date of Disbursement

Mailing Address 811 FOREST AVE

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	0	8

City State Zip Code
JOHNSON CITY TN 37601

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION REFUND

2300.00

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

5100.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 294 / 320

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) H D LAMBERT	Transaction ID: SB28.63 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 1211 S HERITAGE DR		
	City MARYVILLE State TN Zip Code 37803	Amount of Each Disbursement this Period	2300.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) FRANK F LAWRENCE	Transaction ID: SB28.54 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 40 ALGIE NEELY RD		
	City JACKSON State TN Zip Code 38301	Amount of Each Disbursement this Period	2300.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) LOIS A LEAVENGOOD	Transaction ID: SB28.93 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 2690 FOXGLOVE LOOP SE		
	City ALBANY State OR Zip Code 97322	Amount of Each Disbursement this Period	100.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	4700.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 295 / 320

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
BYRON LEFLORE, JR

Transaction ID: SB28.38

Mailing Address 117 CRESCENT

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	0	8

City State Zip Code
SAN ANTONIO TX 78209

Amount of Each Disbursement this Period

2300.00

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
FRANCIS P LEHAR

Transaction ID: SB28.53

Mailing Address PO BOX 1482

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	0	8

City State Zip Code
MANCHESTER MA 01944

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
DAVID W LEVINSON

Transaction ID: SB28.48

Mailing Address 11 E 69TH ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	0	8

City State Zip Code
NEW YORK NY 10021

Amount of Each Disbursement this Period

2300.00

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

4700.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) WILLIAM LINK	Transaction ID: SB28.129 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 5953 SEDBERRY RD		
	City NASHVILLE State TN Zip Code 37205	Amount of Each Disbursement this Period	150.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
B.	Full Name (Last, First, Middle Initial) HOWARD M LORBER	Transaction ID: SB28.67 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 70 E SUNRISE HWY STE 411		
	City VALLEY STREAM State NY Zip Code 11581	Amount of Each Disbursement this Period	700.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
C.	Full Name (Last, First, Middle Initial) THEA LORBER	Transaction ID: SB28.121 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 439 HALSEY NECK LN		
	City SOUTHAMPTON State NY Zip Code 11968	Amount of Each Disbursement this Period	700.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

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

**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) JOSEPH G LUBECK	Transaction ID: SB28.79 Date of Disbursement 02 / 29 / 2008
	Mailing Address 825 PARKWAY ST	Amount of Each Disbursement this Period 1000.00
	City JUPITER State FL Zip Code 33477	
	Purpose of Disbursement CONTRIBUTION REFUND	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) GRANT H LYNN	Transaction ID: SB28.3 Date of Disbursement 02 / 01 / 2008
	Mailing Address 3201 SKYCREST CIR	Amount of Each Disbursement this Period 450.00
	City SALT LAKE CITY State UT Zip Code 84108	
	Purpose of Disbursement CONTRIBUTION REFUND	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) BRIAN H MADDEN	Transaction ID: SB28.36 Date of Disbursement 02 / 29 / 2008
	Mailing Address 97 SHARON LN	Amount of Each Disbursement this Period 2300.00
	City GREENLAWN State NY Zip Code 11740	
	Purpose of Disbursement CONTRIBUTION REFUND	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	3750.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) LESLIE EUGENE MCCLELLAND	Transaction ID: SB28.90 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 6150 MARIETTA RD		
	City LANCASTER State OH Zip Code 43130	Amount of Each Disbursement this Period	2029.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) ROBERT MCGANN	Transaction ID: SB28.111 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 606 RILEY TRAIL		
	City CEDAR PARK State TX Zip Code 78613	Amount of Each Disbursement this Period	500.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) PHILLIP MEDLEY	Transaction ID: SB23.140 Date of Disbursement 02 / 22 / 2008	
	Mailing Address 1135 BANTAS ROK RD		
	City PLEASUREVILLE State KY Zip Code 40057	Amount of Each Disbursement this Period	-200.00
	Purpose of Disbursement VOID CHECK		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2329.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) DOM MEFFE	Transaction ID: SB28.49
	Mailing Address 6010 BLAKEFORD DR	Date of Disbursement 02 / 29 / 2008
	City WINDERMERE State FL Zip Code 34786	Amount of Each Disbursement this Period 2300.00
	Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CURTIS E MEIER	Transaction ID: SB28.11
	Mailing Address 4721 ROAD 18	Date of Disbursement 02 / 14 / 2008
	City LAGRANGE State WY Zip Code 82221	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) KELLY A MELIUS	Transaction ID: SB28.84
	Mailing Address 2 WHITEWOOD CT	Date of Disbursement 02 / 29 / 2008
	City HUNTINGTON State NY Zip Code 11743	Amount of Each Disbursement this Period 2300.00
	Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4700.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) JANE KAY MILLER	Transaction ID: SB28.72 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 12275 N OGDEN POINT RD #112		
	City SYRACUSE State IN Zip Code 46567 Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Amount of Each Disbursement this Period 2300.00	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) RIP MILLER	Transaction ID: SB28.109 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 3600 BALCONES DR		
	City AUSTIN State TX Zip Code 78731 Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Amount of Each Disbursement this Period 1800.00	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) V RICHARD MILLER	Transaction ID: SB28.124 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 12275 N OGDEN POINT RD #112		
	City SYRACUSE State IN Zip Code 46567 Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Amount of Each Disbursement this Period 2300.00	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) ROBERT C MIMMS	Transaction ID: SB28.110 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 780 OLD ROSWELL PL STE 100		
	City ROSWELL State GA Zip Code 30076	Amount of Each Disbursement this Period	2300.00
	Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) JOHN T MOORE	Transaction ID: SB28.78 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 7 OLD FIELD RD		
	City STEAUKET State NY Zip Code 11733	Amount of Each Disbursement this Period	2000.00
	Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) JOHN A MULHALL	Transaction ID: SB28.4 Date of Disbursement 02 / 01 / 2008	
	Mailing Address 7 EVERGREEN LN		
	City CAZENOVIA State NY Zip Code 13035	Amount of Each Disbursement this Period	100.00
	Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) CHARLES E MUNCATCHY	Transaction ID: SB28.43 Date of Disbursement
	Mailing Address 1445 SE 21ST LN	<input type="text" value="02"/> <input type="text" value="29"/> / <input type="text" value="2008"/>
	City CAPE CORAL State FL Zip Code 33990	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION REFUND	<input type="text" value="20.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRANCIS P MURPHY	Transaction ID: SB28.27 Date of Disbursement
	Mailing Address 2720 GREEN TEE DR	<input type="text" value="02"/> <input type="text" value="21"/> / <input type="text" value="2008"/>
	City PEARLAND State TX Zip Code 77581	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION REFUND	<input type="text" value="2300.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ROBERT NAEGELE, JR	Transaction ID: SB28.23 Date of Disbursement
	Mailing Address 7993 VIA VECCHIA	<input type="text" value="02"/> <input type="text" value="14"/> / <input type="text" value="2008"/>
	City NAPLES State FL Zip Code 34108	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION REFUND	<input type="text" value="200.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2520.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) RICHARD T NASTI	Transaction ID: SB28.108 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 42 WOODLAWN AVE		
	City NEW ROCHELLE State NY Zip Code 10604	Amount of Each Disbursement this Period	2300.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
B.	Full Name (Last, First, Middle Initial) CARL ANTHONY NEFF	Transaction ID: SB28.1 Date of Disbursement 02 / 01 / 2008	
	Mailing Address 8187 STATE RTE 43		
	City STREETSBORO State OH Zip Code 44241	Amount of Each Disbursement this Period	200.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
C.	Full Name (Last, First, Middle Initial) ROBERT PASCUCI	Transaction ID: SB28.112 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 277 NORTHERN BLVD		
	City GREAT NECK State NY Zip Code 11021	Amount of Each Disbursement this Period	2300.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	4800.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) JOSEPH H PILLER	Transaction ID: SB28.80 Date of Disbursement
	Mailing Address 3801 FM 1829	<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City GATESVILLE State TX Zip Code 76528	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION REFUND	<input type="text" value="2300.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LESLIE P POPE	Transaction ID: SB28.91 Date of Disbursement
	Mailing Address PO BOX 5709	<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City JOHNSON CITY State TN Zip Code 37560	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION REFUND	<input type="text" value="2300.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRED A POTTER	Transaction ID: SB28.56 Date of Disbursement
	Mailing Address PO BOX 538	<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City ROAN MOUNTAIN State TN Zip Code 37687	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION REFUND	<input type="text" value="2300.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 305 / 320

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
MICHAEL F PUNTILLO, SR

Transaction ID: SB28.99

Date of Disbursement

Mailing Address 277 NORTHERN BLVD

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	0	8

City State Zip Code
GREAT NECK NY 11021

Amount of Each Disbursement this Period

2300.00

Purpose of Disbursement
CONTRIBUTION REFUND

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
FRANK RAVIOLA

Transaction ID: SB28.55

Date of Disbursement

Mailing Address 861 FREDERICK COMMONS

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	0	8

City State Zip Code
SAN JOSE CA 95126

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
CONTRIBUTION REFUND

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
CHARLES H RENFROE

Transaction ID: SB28.44

Date of Disbursement

Mailing Address 9 OLD PACES PLACE NW

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	0	8

City State Zip Code
ATLANTA GA 30327

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
CONTRIBUTION REFUND

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) DONNA M RIDLEY-STARKEY	Transaction ID: SB28.12
	Mailing Address 1099 OTTER CIR	Date of Disbursement MM / DD / YYYY 02 / 14 / 2008
	City BEAUFORT State SC Zip Code 29902	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) WILLIAM RITCHIE	Transaction ID: SB28.130
	Mailing Address 5302 BROOKEWAY DR	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City BETHESDA State MD Zip Code 20816	Amount of Each Disbursement this Period 950.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) KENNETH M ROBINETTE, JR	Transaction ID: SB28.86
	Mailing Address 3056 HIGHWAY 81 S	Date of Disbursement MM / DD / YYYY 02 / 29 / 2008
	City JONESBOROUGH State TN Zip Code 37659	Amount of Each Disbursement this Period 2300.00
	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3300.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
WINSTON ROBINSON

Transaction ID: SB28.132
Date of Disbursement

Mailing Address 4 LIS CT

/ /

City SAYREVILLE State NJ Zip Code 08872

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
JAMES H ROWE, III

Transaction ID: SB28.15
Date of Disbursement

Mailing Address 3915 49TH ST NW

/ /

City WASHINGTON State DC Zip Code 20016

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
EMERSON EDWARD RUSSELL, JR

Transaction ID: SB28.51
Date of Disbursement

Mailing Address 574 MILLER RD

/ /

City SIGNAL MOUNTAIN State TN Zip Code 37377

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
GINGER SAMPLES

Transaction ID: SB28.60
Date of Disbursement

Mailing Address 1551 UPPER E VALLEY RD

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	0	8

City PIKEVILLE State TN Zip Code 37367

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
BARRY F SCHWARTZ

Transaction ID: SB28.33
Date of Disbursement

Mailing Address 35 E 62ND ST

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	0	8

City NEW YORK State NY Zip Code 10065

Amount of Each Disbursement this Period

2300.00

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
PETER SHERMAN

Transaction ID: SB28.105
Date of Disbursement

Mailing Address 4038 COURTSIRE DR

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	0	8

City DALLAS State TX Zip Code 75229

Amount of Each Disbursement this Period

700.00

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

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**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) BILLIE E SHIELDS	Transaction ID: SB28.35 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 1222 OAK MEADOW BLVD		
	City JONESBORO State AR Zip Code 72401	Amount of Each Disbursement this Period	650.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) LYN SILKE	Transaction ID: SB28.7 Date of Disbursement 02 / 01 / 2008	
	Mailing Address 956 HILLCREST DR		
	City CAMBRIA State CA Zip Code 93428	Amount of Each Disbursement this Period	400.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) THOMAS W SMITH	Transaction ID: SB28.31 Date of Disbursement 02 / 21 / 2008	
	Mailing Address 5250 VIRGINIA WAY STE 100		
	City BRENTWOOD State TN Zip Code 37027	Amount of Each Disbursement this Period	2300.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	3350.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

<p>A. Full Name (Last, First, Middle Initial) MARVIN STOKLEY</p> <p>Mailing Address 455 POINTE VISTA DR</p> <p>City ELIZABETH CITY State NC Zip Code 27909</p> <p>Purpose of Disbursement CONTRIBUTION REFUND</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB28.98 Date of Disbursement 02 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 300.00</p>
<p>B. Full Name (Last, First, Middle Initial) BENJAMIN JENNINGS STONE, III</p> <p>Mailing Address 10207 E HUNTER VALLEY RD</p> <p>City VIENNA State VA Zip Code 22181</p> <p>Purpose of Disbursement CONTRIBUTION REFUND</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB28.34 Date of Disbursement 02 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 2300.00</p>
<p>C. Full Name (Last, First, Middle Initial) STUART SUBOTNICK</p> <p>Mailing Address 425 E 58TH ST #47H</p> <p>City NEW YORK State NY Zip Code 10022</p> <p>Purpose of Disbursement CONTRIBUTION REFUND</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB28.117 Date of Disbursement 02 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 2300.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4900.00

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

SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

<p>A. Full Name (Last, First, Middle Initial) JUANITA W SUMMERS</p> <p>Mailing Address PO BOX 1628</p> <p>City ELIZABETHTON State TN Zip Code 37644</p> <p>Purpose of Disbursement CONTRIBUTION REFUND</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB28.81 Date of Disbursement 02 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 2300.00</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) ROBERT T SUMMERS</p> <p>Mailing Address PO BOX 1628</p> <p>City ELIZABETHTON State TN Zip Code 37644</p> <p>Purpose of Disbursement CONTRIBUTION REFUND</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB28.113 Date of Disbursement 02 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 2300.00</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) GARY A TAYLOR</p> <p>Mailing Address 85A STONEBROOK PL</p> <p>City JACKSON State TN Zip Code 38305</p> <p>Purpose of Disbursement CONTRIBUTION REFUND</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB28.58 Date of Disbursement 02 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 2300.00</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6900.00

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

SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) JUDITH TAYLOR	Transaction ID: SB28.82 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 485 HARBORSIDE ST #100		
	City WOODBRIDGE State VA Zip Code 22191	Amount of Each Disbursement this Period	300.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) LISA H TAYLOR	Transaction ID: SB28.92 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 85A STONEBROOK PL		
	City JACKSON State TN Zip Code 38305	Amount of Each Disbursement this Period	2300.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) JEWEL L THOMAS	Transaction ID: SB28.74 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 3396 335TH ST LOT 113		
	City NEOLA State IA Zip Code 51559	Amount of Each Disbursement this Period	135.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	2735.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
DAN C TUTCHER

Transaction ID: SB28.46
Date of Disbursement

Mailing Address ONE SHADDER WAY

/ /

City HOUSTON State TX Zip Code 77019

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
KIM TUTCHER

Transaction ID: SB28.88
Date of Disbursement

Mailing Address ONE SHADDER WAY

/ /

City HOUSTON State TX Zip Code 77019

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
JULIE VANDERMOST

Transaction ID: SB28.83
Date of Disbursement

Mailing Address 27312 CALLE ARROYO

/ /

City SAN JACINTO State CA Zip Code 92675

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) CARROLL R WALKER	Transaction ID: SB28.10 Date of Disbursement 02 / 14 / 2008	
	Mailing Address 102 RUE MARSEILLE		
	City DAYTON State OH Zip Code 45429	Amount of Each Disbursement this Period	3300.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
B.	Full Name (Last, First, Middle Initial) HUGH WALL	Transaction ID: SB28.68 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 3112 COTTRELL DR		
	City FLOWER MOUND State TX Zip Code 75022	Amount of Each Disbursement this Period	2300.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
C.	Full Name (Last, First, Middle Initial) SALLY WALLACE	Transaction ID: SB28.114 Date of Disbursement 02 / 29 / 2008	
	Mailing Address 981 TURKEY CREEK LN		
	City BEECH BLUFF State TN Zip Code 38313	Amount of Each Disbursement this Period	2300.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

SUBTOTAL of Disbursements This Page (optional)	7900.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) ANNE B WALSH	Transaction ID: SB28.32 Date of Disbursement <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>2</td><td>/</td><td>2</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	9	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y												
0	2	/	2	9	/	2	0	0	8													
Mailing Address	2 GLEN CREEK LN	Amount of Each Disbursement this Period <table border="1"><tr><td>2300.00</td></tr></table>	2300.00																			
2300.00																						
City	ST LOUIS	State	MO	Zip Code	63124																	
Purpose of Disbursement	CONTRIBUTION REFUND	Category/Type																				
Candidate Name		Category/Type																				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
State:	District:																					

B.	Full Name (Last, First, Middle Initial) THOMAS M WALSH	Transaction ID: SB28.123 Date of Disbursement <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>2</td><td>/</td><td>2</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	9	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y												
0	2	/	2	9	/	2	0	0	8													
Mailing Address	2 GLEN CREEK LN	Amount of Each Disbursement this Period <table border="1"><tr><td>2300.00</td></tr></table>	2300.00																			
2300.00																						
City	ST LOUIS	State	MO	Zip Code	63124																	
Purpose of Disbursement	CONTRIBUTION REFUND	Category/Type																				
Candidate Name		Category/Type																				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
State:	District:																					

C.	Full Name (Last, First, Middle Initial) JANE COMBS WARNOCK	Transaction ID: SB28.71 Date of Disbursement <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>2</td><td>/</td><td>2</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	9	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y												
0	2	/	2	9	/	2	0	0	8													
Mailing Address	309 MIDVALE TER	Amount of Each Disbursement this Period <table border="1"><tr><td>460.00</td></tr></table>	460.00																			
460.00																						
City	SEBASTIAN	State	FL	Zip Code	32958																	
Purpose of Disbursement	CONTRIBUTION REFUND	Category/Type																				
Candidate Name		Category/Type																				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
State:	District:																					

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>5060.00</td></tr></table>	5060.00
5060.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.	Full Name (Last, First, Middle Initial) GEORGE J WERNETTE	Transaction ID: SB28.59 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
	Mailing Address 1039 MOUNTAIN AIR CT		
	City RENO State NV Zip Code 89511	Amount of Each Disbursement this Period	2300.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) JOSEPH WIESELBERG	Transaction ID: SB28.17 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 8	
	Mailing Address 16970 SW 90 AVE		
	City MIAMI State FL Zip Code 33157	Amount of Each Disbursement this Period	2300.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) C HOWARD WILKINS, JR	Transaction ID: SB28.39 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
	Mailing Address 3030 K ST NW		
	City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period	700.00
	Purpose of Disbursement CONTRIBUTION REFUND		
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	5300.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
MARK A ZIUS

Transaction ID: SB28.19
Date of Disbursement

Mailing Address PO BOX 2306

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	0	8

City CLEVELAND State TN Zip Code 37320

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

2300.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
HOOSIERS SUPPORTING BUYER FOR CONGRESS

Transaction ID: SB28.66
Date of Disbursement

Mailing Address 200 N MAIN ST

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	0	8

City MONTICELLO State IN Zip Code 47960

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

1275.02

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
IN-PLANT SPOT REFINISHING & FINESSE, LLC

Transaction ID: SB28.14
Date of Disbursement

Mailing Address 11942 LATSON RD

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	0	8

City LINDEN State MI Zip Code 48451

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

35.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

3610.02

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3P)
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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
MORGAN BROTHERS

Mailing Address PO BOX 746

City CLARKSVILLE State TN Zip Code 37041

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB28.21

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

<p>A. Full Name (Last, First, Middle Initial) RAY MEIER FOR CONGRESS INC</p> <p>Mailing Address 8600 ELMER HILL RD</p> <p>City ROME State NY Zip Code 13440</p> <p>Purpose of Disbursement CONTRIBUTION REFUND</p> <p>Candidate Name RAY MEIER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 24</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB28.106</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) CECIL STATON FOR STATE SENATE</p> <p>Mailing Address PO BOX 26427</p> <p>City MACON State GA Zip Code 31221</p> <p>Purpose of Disbursement CONTRIBUTION REFUND</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB28.42</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1300.00</p>
<p>C. Full Name (Last, First, Middle Initial) FRIENDS OF MARK LUTTRELL</p> <p>Mailing Address 6584 POPLAR AVE STE 200</p> <p>City MEMPHIS State TN Zip Code 38138</p> <p>Purpose of Disbursement CONTRIBUTION REFUND</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB28.13</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional)	4300.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3P) 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"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Friends of Fred Thompson, Inc.

A.

Full Name (Last, First, Middle Initial)
MCDONNELL FOR VIRGINIA

Transaction ID: SB28.29

Date of Disbursement

Mailing Address PO BOX 62386

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	0	8

City VIRGINIA BEACH State VA Zip Code 23466

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
CONTRIBUTION REFUND

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

4800.00