

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

JIM GILCHRIST FOR CONGRESS INC

Report Covering the Period: From:

M	M
1	1

D	D
1	7

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
2	6

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	281799.38	665482.30
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	281799.38	665482.30
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	339893.87	634818.07
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	339893.87	634818.07
8. Cash on Hand at Close of Reporting Period (from Line 27).....	34684.67	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	36417.46	

For further information contact:

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

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

**POST-ELECTION DETAILED
SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

Report of Receipts and Disbursements

Page 5

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

JIM GILCHRIST FOR CONGRESS INC

Report Covering the Period: From: To:

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of	COLUMN C Total for
11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than Political Committees (i) Itemized (Use Schedule A) <div style="border: 1px solid black; width: 150px; float: right; text-align: right; padding: 2px;">69142.74</div> (ii) Unitemized <div style="border: 1px solid black; width: 150px; float: right; text-align: right; padding: 2px;">209569.64</div> (iii) Total of contributions from individuals <div style="border: 1px solid black; width: 150px; float: right; text-align: right; padding: 2px;">278712.38</div>	<div style="border: 1px solid black; width: 150px; margin: 0 auto; padding: 5px;"> <input type="text" value="12"/> <input type="text" value="06"/> <input type="text" value="2005"/> (date of general election) </div>	<div style="border: 1px solid black; width: 150px; margin: 0 auto; padding: 5px;"> <input type="text" value="12"/> <input type="text" value="07"/> <input type="text" value="2005"/> (date after general election) </div> through <div style="border: 1px solid black; width: 150px; margin: 0 auto; padding: 5px;"> <input type="text" value="12"/> <input type="text" value="26"/> <input type="text" value="2005"/> (last day of reporting period) </div>
(b) Political Party Committees <div style="border: 1px solid black; width: 150px; float: right; text-align: right; padding: 2px;">3087.00</div>	<div style="border: 1px solid black; width: 150px; margin: 0 auto; padding: 2px;">3087.00</div>	<div style="border: 1px solid black; width: 150px; margin: 0 auto; padding: 2px;">0.00</div>
(c) Other Political Committees <div style="border: 1px solid black; width: 150px; float: right; text-align: right; padding: 2px;">0.00</div>	<div style="border: 1px solid black; width: 150px; margin: 0 auto; padding: 2px;">14301.00</div>	<div style="border: 1px solid black; width: 150px; margin: 0 auto; padding: 2px;">0.00</div>

**POST-ELECTION DETAILED
SUMMARY PAGE
Report of Receipts and Disbursements**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general Election) (* See page 5 for date)	COLUMN C Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate 0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d)) 281799.38	665482.30	80981.91
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES 0.00	0.00	0.00
13. LOANS: (a) Made or Guaranteed by the Candidate 0.00	0.00	0.00
(b). All Other Loans 0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b)) 0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc) 0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc) 0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) 281799.38	665482.30	80981.91

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

Report of Receipts and Disbursements

Write or Type Committe Name

JIM GILCHRIST FOR CONGRESS INC

Report the covering period

From:

MM 11

DD 17

YYYY 2005

To:

MM 12

DD 26

YYYY 2005

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
17. OPERATING EXPENDITURES		
339893.87	634818.07	76961.47
18. TRANSFER TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN PAYMENTS		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	0.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

Report of Receipts and Disbursements

Page 8

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	Total for * Through *	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
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(c) Other political committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))

0.00	0.00	0.00
------	------	------

21. OTHER DISBURSEMENTS

0.00	0.00	0.00
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22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)

339893.87	634818.07	76961.47
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

281799.38	665482.30	80981.91
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

339893.87	634818.07	76961.47
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINING OF REPORTING PERIOD	92779.16
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	281799.38
25. SUBTOTAL(add Line 23 and Line 24)	374578.54
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	339893.87
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	34684.67

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Abellera, Ruth		Date of Receipt MM / DD / YYYY 11 / 28 / 2005
Mailing Address 1707 Tennyson Ct		Transaction ID: SA11A1.28867
City Salisbury	State MD	Zip Code 21801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 205.00	

Full Name (Last, First, Middle Initial) B. Abellera, Ruth		Date of Receipt MM / DD / YYYY 12 / 06 / 2005
Mailing Address 1707 Tennyson Ct		Transaction ID: SA11A1.28866
City Salisbury	State MD	Zip Code 21801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 230.00	

Full Name (Last, First, Middle Initial) C. Adams, Ronald		Date of Receipt MM / DD / YYYY 11 / 18 / 2005
Mailing Address 1601 Kings Way		Transaction ID: SA11A1.41394
City Vista	State CA	Zip Code 92084
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation None	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 350.00	

SUBTOTAL of Receipts This Page (optional)	310.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Adams, Ronald		Date of Receipt MM / DD / YYYY 12 / 05 / 2005
Mailing Address 1601 Kings Way		Transaction ID: SA11A1.39634
City Vista	State CA	Zip Code 92084
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation None	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) B. Ames, Barry		Date of Receipt MM / DD / YYYY 11 / 18 / 2005
Mailing Address 23200 Olive Ave		Transaction ID: SA11A1.41975
City Lake Forest	State CA	Zip Code 92630
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Anderson, Catherine		Date of Receipt MM / DD / YYYY 11 / 21 / 2005
Mailing Address 8881 Hunter Ter		Transaction ID: SA11A1.41395
City Alpine	State CA	Zip Code 91901
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Anderson, Catherine		Date of Receipt MM / DD / YYYY 12 / 05 / 2005
Mailing Address 8881 Hunter Ter		Transaction ID: SA11A1.39652
City Alpine	State CA	Zip Code 91901
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Andrews, Ivan		Date of Receipt MM / DD / YYYY 11 / 29 / 2005
Mailing Address 831 Laurel Ct		Transaction ID: SA11A1.29073
City Rodeo	State CA	Zip Code 94572
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 201.00	

Full Name (Last, First, Middle Initial) C. Barrow, Dolores		Date of Receipt MM / DD / YYYY 11 / 21 / 2005
Mailing Address 2323 N Orange Dr West		Transaction ID: SA11A1.41976
City Upland	State CA	Zip Code 91784
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 395.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 395.00	

SUBTOTAL of Receipts This Page (optional)	685.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
Barrow, Dolores

Mailing Address 2323 N Orange Dr West

City Upland State CA Zip Code 91784

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 4 / 2 0 0 5

Transaction ID: SA11A1.41822

Amount of Each Receipt this Period
 25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5926 Rancho Mission Road 92

City San Diego State CA Zip Code 92108

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

Name of Employer Occupation

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 9 / 2 0 0 5

Transaction ID: SA11A1.41266

Amount of Each Receipt this Period
 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5926 Rancho Mission Road 92

City San Diego State CA Zip Code 92108

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

Name of Employer Occupation

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 400.00

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

Transaction ID: SA11A1.39687

Amount of Each Receipt this Period
 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) **225.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Beaman, M		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 5	
Mailing Address 837 Glen Leven Dr.		Transaction ID: SA11A1.29473	
City State Zip Code Nashville TN 37204	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 1000.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

Full Name (Last, First, Middle Initial) B. Becker, Bruce		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address 5363 Balboa Blvd Suite 246		Transaction ID: SA11A1.28621	
City State Zip Code Encino CA 91316	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self Occupation Physician	Election Cycle-to-Date ▼ 500.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

Full Name (Last, First, Middle Initial) C. Becker, Bruce		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address 5363 Balboa Blvd Suite 246		Transaction ID: SA11A1.28624	
City State Zip Code Encino CA 91316	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self Occupation Physician	Election Cycle-to-Date ▼ 800.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Becker, J		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 5
Mailing Address 5363 balboa boulevard #246		Transaction ID: SA11A1.41397
City Encino State CA Zip Code 91316	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer self Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Occupation physician Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Becker, J		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 5
Mailing Address 5363 balboa boulevard #246		Transaction ID: SA11A1.41406
City Encino State CA Zip Code 91316	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer self Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Occupation physician Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) C. David Benesch		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 7 / 2 0 0 5
Mailing Address PO Box 101558		Transaction ID: SA11A1.29552
City Anchorage State AK Zip Code 99510	Amount of Each Receipt this Period 700.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Occupation Retired Election Cycle-to-Date 700.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Dudley Benesch		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 5	
Mailing Address PO Box 101558		Transaction ID: SA11A1.29553	
City Anchorage	State AK	Zip Code 99510	Amount of Each Receipt this Period 1400.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 1400.00		

Full Name (Last, First, Middle Initial) B. Benesch, George		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 5	
Mailing Address P O Box 101558		Transaction ID: SA11A1.28611	
City Anchorage	State AK	Zip Code 99510	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) C. Benesch, George		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address P O Box 101558		Transaction ID: SA11A1.28618	
City Anchorage	State AK	Zip Code 99510	Amount of Each Receipt this Period 600.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 2100.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Berry, Herbert		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 5	
Mailing Address 106 Ridge Trail		Transaction ID: SA11A1.41134	
City State Zip Code Chapel Hill NC 27516		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) B. Berry, Herbert		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address 106 Ridge Trail		Transaction ID: SA11A1.39711	
City State Zip Code Chapel Hill NC 27516		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) C. Berry, Herbert		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5	
Mailing Address 106 Ridge Trail		Transaction ID: SA11A1.41267	
City State Zip Code Chapel Hill NC 27516		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 550.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Blower, Ralph		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 5	
Mailing Address 1424 Acacia Dr		Transaction ID: SA11A1.29723	
City State Zip Code Tustin CA 92780		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 225.00	

Full Name (Last, First, Middle Initial) B. Blower, Ralph		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address 1424 Acacia Dr		Transaction ID: SA11A1.29724	
City State Zip Code Tustin CA 92780		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Blower, Ralph		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address 1424 Acacia Dr		Transaction ID: SA11A1.29725	
City State Zip Code Tustin CA 92780		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 300.00	

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Boyce, Fumie		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address 332 Thunderbird Ct SE		Transaction ID: SA11A1.39747	
City State Zip Code Lacey WA 98503	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired	Receipt For: 2005 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff 300.00		

Full Name (Last, First, Middle Initial) B. Boyd, William		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address P O Box 1147		Transaction ID: SA11A1.29847	
City State Zip Code Tallahassee FL 32302	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Retired None	Receipt For: 2005 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff 250.00		

Full Name (Last, First, Middle Initial) C. Bridges, Mary		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5	
Mailing Address 136 Coronado St		Transaction ID: SA11A1.29948	
City State Zip Code Port Saint Joe FL 32456	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired	Receipt For: 2005 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff 250.00		

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Bridges, Mary		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address 136 Coronado St		Transaction ID: SA11A1.29947	
City State Zip Code Port Saint Joe FL 32456		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 275.00	

Full Name (Last, First, Middle Initial) B. Bridges, Mary		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address 136 Coronado St		Transaction ID: SA11A1.29949	
City State Zip Code Port Saint Joe FL 32456		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 375.00	

Full Name (Last, First, Middle Initial) C. Bridges, Mary		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 5	
Mailing Address 136 Coronado St		Transaction ID: SA11A1.29950	
City State Zip Code Port Saint Joe FL 32456		Amount of Each Receipt this Period 225.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 225.00	

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Brown, Yvonne		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5	
Mailing Address 2309 Westminster Ave		Transaction ID: SA11A1.41908	
City State Zip Code Costa Mesa CA 92627	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 220.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

Full Name (Last, First, Middle Initial) B. Brown, Yvonne		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 2309 Westminster Ave		Transaction ID: SA11A1.30077	
City State Zip Code Costa Mesa CA 92627	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 260.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

Full Name (Last, First, Middle Initial) C. Bruce, James		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 0 5	
Mailing Address 5850 W 3rd St 328		Transaction ID: SA11A1.41427	
City State Zip Code Los Angeles CA 90036	Amount of Each Receipt this Period 1600.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer na Occupation Radio Host	Election Cycle-to-Date ▼ 1600.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
Bruce, Tammy

Mailing Address 5850 W 3rd St #328

City State Zip Code
Los Angeles CA 90036

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

Name of Employer Self Occupation
Writer/Radio talk show host

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 2100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 5

Transaction ID: SA11A1.28625

Amount of Each Receipt this Period
1600.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5011 Lindsey Ave

City State Zip Code
Tarzana CA 91356

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

Name of Employer Retired Occupation
None

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 5

Transaction ID: SA11A1.30210

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1755 FM 1378

City State Zip Code
Wylie TX 75098

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

Name of Employer None Occupation
Retired

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 248.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.30222

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Carder, Laura		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 0 5	
Mailing Address 3036 Killybrooke Ln		Transaction ID: SA11A1.41398	
City State Zip Code Costa Mesa CA 92626	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired	Receipt For: 2005 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff 250.00		

Full Name (Last, First, Middle Initial) B. Carder, Laura		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address 3036 Killybrooke Ln		Transaction ID: SA11A1.39795	
City State Zip Code Costa Mesa CA 92626	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired	Receipt For: 2005 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff 500.00		

Full Name (Last, First, Middle Initial) C. Celli, Thomas		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 0 5	
Mailing Address 143 N Beachwood Dr # F		Transaction ID: SA11A1.30440	
City State Zip Code Burbank CA 91506	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired	Receipt For: 2005 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff 225.00		

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
Chandler, Arne

Mailing Address 26831 John Adams St

City State Zip Code
Murrieta CA 92563

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
500.00

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

Transaction ID: SA11A1.39811

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 26831 John Adams St

City State Zip Code
Murrieta CA 92563

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.41409

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Heath B Clarke

Mailing Address 3334 East Coast Hwy 315

City State Zip Code
Corona del Mar CA 92625

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

Name of Employer Interchange Corp Occupation CEO

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 5

Transaction ID: SA11A1.28622

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Clarke, Heath		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 9 / 2 0 0 5	
Mailing Address 3334 East Coast Hwy 315		Transaction ID: SA11A1.41424	
City State Zip Code Corona del Mar CA 92625	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Interchange Corporation	Occupation CEO		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. Coe, Barbara		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 0 / 2 0 0 5	
Mailing Address 5551 Castle Dr		Transaction ID: SA11A1.41399	
City State Zip Code Huntington Beach CA 92649	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Coe, Barbara		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address 5551 Castle Dr		Transaction ID: SA11A1.39823	
City State Zip Code Huntington Beach CA 92649	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 500.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Coli, Evelyn		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 370 Sara Avenue		Transaction ID: SA11A1.30661	
City Sunnyvale	State CA	Zip Code 94086	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 227.00		

Full Name (Last, First, Middle Initial) B. Considine, James		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address 5100 San Felipe St Ste 222E		Transaction ID: SA11A1.41400	
City Houston	State TX	Zip Code 77056	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Considine, James		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address 5100 San Felipe St Ste 222E		Transaction ID: SA11A1.39832	
City Houston	State TX	Zip Code 77056	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional)	535.00
TOTAL This Period (last page this line number only)	(Empty box)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Cook, Charles		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 1 / 2 0 0 5	
Mailing Address 481 Mojave Ct		Transaction ID: SA11A1.41410	
City State Zip Code Atwater CA 95301	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 500.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

Full Name (Last, First, Middle Initial) B. Crantz, Lois		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address 617 Terra California Dr Apt 6		Transaction ID: SA11A1.30842	
City State Zip Code Walnut Creek CA 94595	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 275.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

Full Name (Last, First, Middle Initial) C. Dietrich, Robert		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address 1312 Burbeck Ave		Transaction ID: SA11A1.41235	
City State Zip Code Richmond CA 94801	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 225.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

SUBTOTAL of Receipts This Page (optional) ▶	675.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Diggins, Stephen		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address 223 N Naomi St		Transaction ID: SA11A1.39892	
City Burbank	State CA	Amount of Each Receipt this Period 750.00	
Zip Code 91505		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation Retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) B. Diggins, Stephen		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 5	
Mailing Address 223 N Naomi St		Transaction ID: SA11A1.41422	
City Burbank	State CA	Amount of Each Receipt this Period 750.00	
Zip Code 91505		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation Retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) C. Dorken, Herbert		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address 18900 Chickadee Ct		Transaction ID: SA11A1.41870	
City Penn Valley	State CA	Amount of Each Receipt this Period 40.00	
Zip Code 95946		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation Retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 210.00		

SUBTOTAL of Receipts This Page (optional)	1540.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Portland, Margaret		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 8 / 2 0 0 5
Mailing Address 9180 E Cebter Ave A-2		Transaction ID: SA11A1.31289
City State Zip Code Denver CO 80247		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None	Occupation Retired	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 295.00	

Full Name (Last, First, Middle Initial) B. Portland, Margaret		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 9180 E Cebter Ave A-2		Transaction ID: SA11A1.31290
City State Zip Code Denver CO 80247		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None	Occupation Retired	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) C. Portland, Margaret		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 9180 E Cebter Ave A-2		Transaction ID: SA11A1.31293
City State Zip Code Denver CO 80247		Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None	Occupation Retired	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 355.00	

SUBTOTAL of Receipts This Page (optional)	85.00
TOTAL This Period (last page this line number only)	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Dortmund, Margaret		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5
Mailing Address 9180 E Cebter Ave A-2		Transaction ID: SA11A1.31291
City State Zip Code Denver CO 80247		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None	Occupation Retired	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 380.00	

Full Name (Last, First, Middle Initial) B. Dortmund, Margaret		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5
Mailing Address 9180 E Cebter Ave A-2		Transaction ID: SA11A1.31292
City State Zip Code Denver CO 80247		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None	Occupation Retired	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 405.00	

Full Name (Last, First, Middle Initial) C. Dugan, Robert		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address Po Box 5029		Transaction ID: SA11A1.31361
City State Zip Code Oceanside CA 92052		Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None	Occupation Retired	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	125.00
TOTAL This Period (last page this line number only)	(Empty box)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Dunn, Tony		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address 108 N Touchet Rd		Transaction ID: SA11A1.39923	
City State Zip Code Dayton WA 99328	Amount of Each Receipt this Period 297.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer None Occupation Retired	Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		
Election Cycle-to-Date 367.00			

Full Name (Last, First, Middle Initial) B. Dunn, Tony		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 9 / 2 0 0 5	
Mailing Address 108 N Touchet Rd		Transaction ID: SA11A1.41405	
City State Zip Code Dayton WA 99328	Amount of Each Receipt this Period 297.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer None Occupation Retired	Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		
Election Cycle-to-Date 297.00			

Full Name (Last, First, Middle Initial) C. Duvall, Judy		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address 1101 Richland Road		Transaction ID: SA11A1.39926	
City State Zip Code Yuba City CA 95991	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Stellar Mortgage Occupation Mortgage Banker	Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		
Election Cycle-to-Date 300.00			

SUBTOTAL of Receipts This Page (optional)	694.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Ebendorf, Iola		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 2 / 2 0 0 5
Mailing Address 120 S Clifton St		Transaction ID: SA11A1.31447
City State Zip Code Brush CO 80723	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 300.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

Full Name (Last, First, Middle Initial) B. Ebendorf, Iola		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5
Mailing Address 120 S Clifton St		Transaction ID: SA11A1.31448
City State Zip Code Brush CO 80723	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 400.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

Full Name (Last, First, Middle Initial) C. Edmonston, Brian		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 5
Mailing Address 13460 Old Winery Rd		Transaction ID: SA11A1.28623
City State Zip Code Poway CA 92064	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer iCODING Occupation Retired	Election Cycle-to-Date ▼ 900.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial) Edmonston, Brian		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 5
Mailing Address 13460 Old Winery Rd		Transaction ID: SA11A1.41411
City State Zip Code Poway CA 92064		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer iCODING	Occupation Retired	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Edwards, William		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5
Mailing Address 927 Hilgard Ave #01		Transaction ID: SA11A1.39932
City State Zip Code Los Angeles CA 90024		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None	Occupation Retired	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Fanning, Neil		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5
Mailing Address 220 Ranglely Ct		Transaction ID: SA11A1.39962
City State Zip Code Simi Valley CA 93065		Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None	Occupation Retired	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 400.00	

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Fern, Joyce		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5	
Mailing Address 668 Meadow Canyon Dr		Transaction ID: SA11A1.31727	
City State Zip Code Pittsburg CA 94565	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 240.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

Full Name (Last, First, Middle Initial) B. Fesmier, Robert		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address 7444 Spring Village Dr #503		Transaction ID: SA11A1.31738	
City State Zip Code Springfield VA 22160	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 450.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

Full Name (Last, First, Middle Initial) C. Foss, Warren		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5	
Mailing Address 509 Inwood Lane		Transaction ID: SA11A1.31879	
City State Zip Code Indian Harbour Bea FL 32937	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 300.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Fox, F		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 5	
Mailing Address 791 Valley Crest Dr		Transaction ID: SA11A1.41383	
City Vista	State CA	Zip Code 92084	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) B. Fox, F		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address 791 Valley Crest Dr		Transaction ID: SA11A1.39994	
City Vista	State CA	Zip Code 92084	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 600.00		

Full Name (Last, First, Middle Initial) C. Fry, Janis		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address 17811 Half Moon Ln Apt L		Transaction ID: SA11A1.32001	
City Cornelius	State NC	Zip Code 28031	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired	Occupation None		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional)	900.00
TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Fullbright, Homer		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 0 5	
Mailing Address 12794 Indian St		Transaction ID: SA11A1.32008	
City State Zip Code Moreno Valley CA 92553		Amount of Each Receipt this Period 37.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 209.00	

Full Name (Last, First, Middle Initial) B. Fullbright, Homer		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 5	
Mailing Address 12794 Indian St		Transaction ID: SA11A1.40002	
City State Zip Code Moreno Valley CA 92553		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 234.00	

Full Name (Last, First, Middle Initial) C. Gaddie, Greg		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5	
Mailing Address 1125 S De Wolf Ave		Transaction ID: SA11A1.32024	
City State Zip Code Fresno CA 93727		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 225.00	

SUBTOTAL of Receipts This Page (optional)	162.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Gilbreath, Harold		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 8 / 2 0 0 5	
Mailing Address 7630 El Escorial Way		Transaction ID: SA11A1.32204	
City State Zip Code Buena Park CA 90620		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) B. Gilbreath, Harold		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 5	
Mailing Address 7630 El Escorial Way		Transaction ID: SA11A1.32203	
City State Zip Code Buena Park CA 90620		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) C. Grant, Kelly		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5	
Mailing Address 16 Forest Green Dr		Transaction ID: SA11A1.32360	
City State Zip Code Springfield IL 62711		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Retired None			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 400.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Green, Conrelia		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 5	
Mailing Address 33 Ladue Terrace		Transaction ID: SA11A1.41413	
City State Zip Code St Louis MO 63124	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer retired	Occupation retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. Gunn, Kay		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 6214 Preston		Transaction ID: SA11A1.32512	
City State Zip Code Dallas TX 75205	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) C. Haid, David		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address 3931 Topanga Canyon Blvd		Transaction ID: SA11A1.32556	
City State Zip Code Malibu CA 90265	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired	Occupation None		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional)	950.00
TOTAL This Period (last page this line number only)	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial) Hall, Sandy Mailing Address P O Box 10666 City Midland State TX Zip Code 79702 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5 Transaction ID: SA11A1.32585 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired Occupation None Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff Election Cycle-to-Date 500.00		

B. Full Name (Last, First, Middle Initial) Hanna, Mark Mailing Address 717 Havana St City Aurora State CO Zip Code 80010 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5 Transaction ID: SA11A1.32635 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None Occupation Retired Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff Election Cycle-to-Date 600.00		

C. Full Name (Last, First, Middle Initial) Hanson, David Mailing Address 31171 Calle del Campo City San Juan Capistran State CA Zip Code 92675 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5 Transaction ID: SA11A1.32660 Amount of Each Receipt this Period 125.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired Occupation Pharmacist Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff Election Cycle-to-Date 350.00		

SUBTOTAL of Receipts This Page (optional)	1125.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
Harris, Monica

Mailing Address 1528 W Comstock Dr.

City Chandler State AZ Zip Code 85224

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 212.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 2 8 / 2 0 0 5

Transaction ID: SA11A1.32706

Amount of Each Receipt this Period
 52.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 3385 Hallmark Drive SE

City Marietta State GA Zip Code 30067

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 240.00

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

Transaction ID: SA11A1.40092

Amount of Each Receipt this Period
 40.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO Box 2110

City Avalon State CA Zip Code 90704

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 2 9 / 2 0 0 5

Transaction ID: SA11A1.41299

Amount of Each Receipt this Period
 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	192.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial) Herlihy, Janet Mailing Address PO Box 2110 City Avalon State CA Zip Code 90704 FEC ID number of contributing federal political committee. 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>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: SA11A1.40100 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	3	0	/	2	0	0	5														
100.00																							
Name of Employer N/A Occupation Homemaker Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff Election Cycle-to-Date 350.00																							

B. Full Name (Last, First, Middle Initial) Hickman, Audrey Mailing Address 1069 Flora Dr. City Haines City State FL Zip Code 33844 FEC ID number of contributing federal political committee. 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>1</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: SA11A1.32979 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	8	/	2	0	0	5	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	2	8	/	2	0	0	5														
250.00																							
Name of Employer Retired Occupation None Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff Election Cycle-to-Date 250.00																							

C. Full Name (Last, First, Middle Initial) Hickman, John Mailing Address 824 Mallory Ct City Tyler State TX Zip Code 75703 FEC ID number of contributing federal political committee. 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>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: SA11A1.32983 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	6	/	2	0	0	5	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2	/	0	6	/	2	0	0	5														
100.00																							
Name of Employer None Occupation Retired Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff Election Cycle-to-Date 500.00																							

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Hinga, Mark		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 0 5
Mailing Address 6601 Tennyson St NE Apt 4306		Transaction ID: SA11A1.33039
City State Zip Code Albuquerque NM 87111	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self Occupation Doctor	Election Cycle-to-Date ▼ 270.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

Full Name (Last, First, Middle Initial) B. Hinga, Mark		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 0 5
Mailing Address 6601 Tennyson St NE Apt 4306		Transaction ID: SA11A1.33040
City State Zip Code Albuquerque NM 87111	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self Occupation Doctor	Election Cycle-to-Date ▼ 290.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

Full Name (Last, First, Middle Initial) C. Hinga, Mark		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 0 5
Mailing Address 6601 Tennyson St NE Apt 4306		Transaction ID: SA11A1.33041
City State Zip Code Albuquerque NM 87111	Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self Occupation Doctor	Election Cycle-to-Date ▼ 350.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Hinga, Mark		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5	
Mailing Address 6601 Tennyson St NE Apt 4306		Transaction ID: SA11A1.41300	
City State Zip Code Albuquerque NM 87111	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self Occupation Doctor	Election Cycle-to-Date ▼ 450.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

Full Name (Last, First, Middle Initial) B. Hodson, Lois		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 5	
Mailing Address 2355 Clinger Dr		Transaction ID: SA11A1.33081	
City State Zip Code American Fall ID 83211	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 205.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

Full Name (Last, First, Middle Initial) C. Holbrook, James		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 1912 Port Royal Ct		Transaction ID: SA11A1.33123	
City State Zip Code Lexington KY 40504	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 250.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

SUBTOTAL of Receipts This Page (optional) ▶	220.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial) Holliday, Floyd Mailing Address PO Box 551		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 5 / 2 0 0 5
City State Zip Code Garden Grove CA 92842		Transaction ID: SA11A1.40125 Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Occupation Election Cycle-to-Date 215.00	

B. Full Name (Last, First, Middle Initial) Holmes, Thomas Mailing Address P O Box 1267		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 2 / 2 0 0 5
City State Zip Code Post Falls ID 83877		Transaction ID: SA11A1.41401 Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Occupation Retired Election Cycle-to-Date 350.00	

C. Full Name (Last, First, Middle Initial) Hoppe, D Mailing Address 10291 Mandalay Cir		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 8 / 2 0 0 5
City State Zip Code Huntington Beach CA 92649		Transaction ID: SA11A1.33163 Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Occupation Retired Election Cycle-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
Howell, Eldon

Mailing Address 977 Victoria Way

City State Zip Code
Salt Lake City UT 84116

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
205.00

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

Transaction ID: SA11A1.33232

Amount of Each Receipt this Period
10.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 977 Victoria Way

City State Zip Code
Salt Lake City UT 84116

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
220.00

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

Transaction ID: SA11A1.33233

Amount of Each Receipt this Period
15.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 6509 Hwy 106 S

City State Zip Code
Hull GA 30646

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

Name of Employer Retired Occupation None

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 5

Transaction ID: SA11A1.33262

Amount of Each Receipt this Period
400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	425.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Ilsen, Roland		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 5	
Mailing Address 6847 Abbottswood Dr		Transaction ID: SA11A1.41164	
City Rancho Palos Verde State CA Zip Code 90275		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 225.00	

Full Name (Last, First, Middle Initial) B. Ilsen, Roland		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address 6847 Abbottswood Dr		Transaction ID: SA11A1.40145	
City Rancho Palos Verde State CA Zip Code 90275		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 275.00	

Full Name (Last, First, Middle Initial) C. Inman, Paul		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 5	
Mailing Address 28899 Millbrook Rd		Transaction ID: SA11A1.33375	
City Farmington Hills State MI Zip Code 48334		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired Occupation None			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Jackson, Russell		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 4507 Slone Dr		Transaction ID: SA11A1.33413
City Jeffersonville	State IN	Zip Code 47130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer U.S. Census Bureau	Occupation Lead Statistical Clerk	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) B. Jackson, W		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5
Mailing Address 55 Burbank Lane		Transaction ID: SA11A1.33417
City Yarmouth	State ME	Zip Code 04096
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer n/a	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 800.00	

Full Name (Last, First, Middle Initial) C. Jacobs, Dean		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address P O Box 2212		Transaction ID: SA11A1.33420
City Bullhead City	State AZ	Zip Code 86439
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 220.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
Jacobs, Dean

Mailing Address P O Box 2212

City State Zip Code
Bullhead City AZ 86439

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

Name of Employer Occupation
None Retired

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 320.00

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

Transaction ID: SA11A1.33422

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1239 N Riverhills Dr

City State Zip Code
Tampa FL 33617

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

Name of Employer Occupation
Retired None

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 500.00

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

Transaction ID: SA11A1.33438

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 30131 312th Way SE

City State Zip Code
Ravensdale WA 98051

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

Name of Employer Occupation
None Retired

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 250.00

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

Transaction ID: SA11A1.33540

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) **850.00**

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Johnson, William		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 1457 Lilac Ave		Transaction ID: SA11A1.41966
City State Zip Code Chula Vista CA 91911	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired	Election Cycle-to-Date ▼ 270.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

Full Name (Last, First, Middle Initial) B. Johnston, James		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address 1839 Foster Ave		Transaction ID: SA11A1.33602
City State Zip Code Ventura CA 93001	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Retired None	Election Cycle-to-Date ▼ 250.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

Full Name (Last, First, Middle Initial) C. Jones, Justin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 5
Mailing Address 5319 Hidden Oak Ct.		Transaction ID: SA11A1.33638
City State Zip Code Royal Oaks CA 95076	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired	Election Cycle-to-Date ▼ 300.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
Kalkiewicz, Anna

Mailing Address 222 Orchard Dr

City State Zip Code
Whitehall PA 18052

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 225.00

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

Transaction ID: SA11A1.33712

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 517 Ria Mirada Court

City State Zip Code
St. Augustine FL 32080

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

Name of Employer retired Occupation retired

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 500.00

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

Transaction ID: SA11A1.41384

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 3141 N Lakeshore Dr

City State Zip Code
Holland MI 49424

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 400.00

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

Transaction ID: SA11A1.40194

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial) Kemsley, Nicholas Mailing Address 30 Barn Ln City State Zip Code Lafayette CA 94549 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 5 Transaction ID: SA11A1.33800 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired Occupation None Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff Election Cycle-to-Date 500.00		

B. Full Name (Last, First, Middle Initial) Kezar, William Mailing Address 11942 Ottawa PI City State Zip Code Chino CA 91710 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 5 Transaction ID: SA11A1.33858 Amount of Each Receipt this Period 30.37 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None Occupation Retired Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff Election Cycle-to-Date 343.69		

C. Full Name (Last, First, Middle Initial) Kezar, William Mailing Address 11942 Ottawa PI City State Zip Code Chino CA 91710 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5 Transaction ID: SA11A1.33857 Amount of Each Receipt this Period 30.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None Occupation Retired Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff Election Cycle-to-Date 373.69		

SUBTOTAL of Receipts This Page (optional)	560.37
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Kezar, William		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 11942 Ottawa Pl		Transaction ID: SA11A1.33856	
City State Zip Code Chino CA 91710		Amount of Each Receipt this Period 25.37	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 399.06	

Full Name (Last, First, Middle Initial) B. Kotta, Susan		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address 33 Littleworth Ln		Transaction ID: SA11A1.34068	
City State Zip Code Sea Cliff NY 11579		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) C. Kusmiak, Eugene		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 5	
Mailing Address 3941 Happy Valley Road		Transaction ID: SA11A1.40252	
City State Zip Code Lafayette CA 94549		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self Occupation researcher			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional)	575.37
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial) Lally, Richard		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address 3100 South Montego Way		Transaction ID: SA11A1.40259	
City State Zip Code Mampa ID 83686		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 400.00	

B. Full Name (Last, First, Middle Initial) Laws, Susan		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address 1565 Woodbury Street		Transaction ID: SA11A1.34308	
City State Zip Code Redlands CA 92374		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 250.00	

C. Full Name (Last, First, Middle Initial) Luppi, Robert		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5	
Mailing Address 22472 Manacor		Transaction ID: SA11A1.41946	
City State Zip Code Mission Viejo CA 92692		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Robert W. Luppi, APC Attorney			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 300.00	

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial) Lupton, Thomas		Date of Receipt
Mailing Address 1 Fort Stephensen PI		M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 5
City State Zip Code Lookout Mountain TN 37350	Transaction ID: SA11A1.34582	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer None Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 300.00	

B. Full Name (Last, First, Middle Initial) Lupton, William		Date of Receipt
Mailing Address 1426 Rugby Ave		M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 5
City State Zip Code Charlottesville VA 22903	Transaction ID: SA11A1.34584	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer None Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 300.00	

C. Full Name (Last, First, Middle Initial) Madsen, Herb		Date of Receipt
Mailing Address 22661 Oxnard St		M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5
City State Zip Code Woodland Hills CA 91367	Transaction ID: SA11A1.40351	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer None Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 400.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Maier, Ronald		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 5
Mailing Address 58 Horse Fence Hill Rd		Transaction ID: SA11A1.34688
City State Zip Code Southbury CT 06488	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired	Occupation None	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Malley, Bonita		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5
Mailing Address PO Box 1007		Transaction ID: SA11A1.40354
City State Zip Code Silverdale WA 98383	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None	Occupation Retired	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Marbach, Henry		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 8 / 2 0 0 5
Mailing Address 77 Grandview Ave		Transaction ID: SA11A1.34753
City State Zip Code White Plains NY 10605	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None	Occupation Retired	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 710.00	

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Marbach, Henry		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5	
Mailing Address 77 Grandview Ave		Transaction ID: SA11A1.34752	
City State Zip Code White Plains NY 10605	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired	Election Cycle-to-Date ▼ 760.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

Full Name (Last, First, Middle Initial) B. Marriott, Will		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 2 / 2 0 0 5	
Mailing Address 20267 N 52nd Dr		Transaction ID: SA11A1.41370	
City State Zip Code Glendale AZ 85308	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Retired None	Election Cycle-to-Date ▼ 250.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

Full Name (Last, First, Middle Initial) C. Masters, Jean		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address 1150 Oka Knoll Dr.		Transaction ID: SA11A1.34877	
City State Zip Code Lake Forest IL 60045	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired	Election Cycle-to-Date ▼ 300.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Mathis, Ilse		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 39 Canyon Rd		Transaction ID: SA11A1.34882
City Berkeley State CA Zip Code 94704	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None Occupation Retired	Election Cycle-to-Date 250.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		

Full Name (Last, First, Middle Initial) B. Mathis, Ilse		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 5
Mailing Address 39 Canyon Rd		Transaction ID: SA11A1.34884
City Berkeley State CA Zip Code 94704	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None Occupation Retired	Election Cycle-to-Date 350.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		

Full Name (Last, First, Middle Initial) C. Mathis, Ilse		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address 39 Canyon Rd		Transaction ID: SA11A1.34883
City Berkeley State CA Zip Code 94704	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None Occupation Retired	Election Cycle-to-Date 400.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one)	PAGE 55 / 134
	<input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
Mayers, Gerald

Mailing Address 29330 Ws W Hillyard Dr M42

City Boring State OR Zip Code 97009

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

Name of Employer Retired Occupation None

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼ 300.00

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

Transaction ID: SA11A1.34929

Amount of Each Receipt this Period
 300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1492 W Hedding St

City San Jose State CA Zip Code 95126

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼ 400.00

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

Transaction ID: SA11A1.34951

Amount of Each Receipt this Period
 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1113 Seabrook Ave

City Cary State NC Zip Code 27511

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼ 220.00

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

Transaction ID: SA11A1.34962

Amount of Each Receipt this Period
 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. McCoy, Thomas		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address PO Box 2490		Transaction ID: SA11A1.35021	
City Bell Gardens	State CA	Zip Code 90202	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired	Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	
Election Cycle-to-Date ▼ 700.00			

Full Name (Last, First, Middle Initial) B. Mcdonald, Kevin		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 5	
Mailing Address 545 Sunset Pkwy		Transaction ID: SA11A1.41180	
City Novato	State CA	Zip Code 94947	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired	Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	
Election Cycle-to-Date ▼ 275.00			

Full Name (Last, First, Middle Initial) C. Mcdonald, Kevin		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address 545 Sunset Pkwy		Transaction ID: SA11A1.40381	
City Novato	State CA	Zip Code 94947	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired	Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	
Election Cycle-to-Date ▼ 325.00			

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
McFadden, James

Mailing Address 2710 Coriander Place

City State Zip Code
Edgewater MD 21037

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

Name of Employer USA Occupation COL RET

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
11 / 29 / 2005

Transaction ID: SA11A1.41979

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 7634 E Diane Dr

City State Zip Code
Orange CA 92869

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

Name of Employer Retired Occupation None

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
12 / 08 / 2005

Transaction ID: SA11A1.35080

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 355 S END AVE

City State Zip Code
NEW YORK NY 10280

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

Name of Employer self employed Occupation trader

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date **750.00**

Date of Receipt
MM / DD / YYYY
11 / 29 / 2005

Transaction ID: SA11A1.28626

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) **1500.00**

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
Miller, Jo

Mailing Address 1065 Presidio Dr

City State Zip Code
Costa Mesa CA 92626

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

Name of Employer na Occupation na

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
230.00

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

Transaction ID: SA11A1.40423

Amount of Each Receipt this Period
90.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 29 Crestview Way

City State Zip Code
Las Vegas NV 89124

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
210.00

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

Transaction ID: SA11A1.35515

Amount of Each Receipt this Period
20.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 3715 Ramblewood Dr

City State Zip Code
Port Huron MI 48060

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 5

Transaction ID: SA11A1.35674

Amount of Each Receipt this Period
30.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	140.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Nagel, Alice		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5
Mailing Address 3715 Ramblewood Dr		Transaction ID: SA11A1.35673
City State Zip Code Port Huron MI 48060	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 230.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

Full Name (Last, First, Middle Initial) B. Nagel, Alice		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5
Mailing Address 3715 Ramblewood Dr		Transaction ID: SA11A1.35675
City State Zip Code Port Huron MI 48060	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 265.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

Full Name (Last, First, Middle Initial) C. Nichols, Dick		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 5
Mailing Address 519 Iris Ave		Transaction ID: SA11A1.40455
City State Zip Code Corona Del Mar CA 92625	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 250.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

SUBTOTAL of Receipts This Page (optional) ▶	305.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Nichols, Dick		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 5	
Mailing Address 519 Iris Ave		Transaction ID: SA11A1.41402	
City State Zip Code Corona Del Mar CA 92625		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Nicholson, Roger		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 0 5	
Mailing Address 1100 Irvine Blvd. #429		Transaction ID: SA11A1.35801	
City State Zip Code Tustin CA 92780		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Keystone Marketing President			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) C. Notgrass, John		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address 941 Roaring River Rd		Transaction ID: SA11A1.41371	
City State Zip Code Gainesboro TN 38562		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Self-employed Author/Publisher			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 400.00	

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
Oden, Ray

Mailing Address 702 Thora Blvd

City State Zip Code
Shreveport LA 71106

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

Name of Employer self Occupation retired

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
500.00

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

Transaction ID: SA11A1.41415

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 10 Hilton Avenue

City State Zip Code
Exeter NH 03833

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

Name of Employer retired Occupation retired

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
250.00

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

Transaction ID: SA11A1.41193

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1401 Rubio Street

City State Zip Code
Altadena CA 91001

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
350.00

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

Transaction ID: SA11A1.36091

Amount of Each Receipt this Period
150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Paulsen, Tom		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 8901 NE 14th St		Transaction ID: SA11A1.36171	
City Clyde Hill	State WA	Zip Code 98004	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired	Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	
Election Cycle-to-Date 375.00			

Full Name (Last, First, Middle Initial) B. Paxton, George		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address 3703 Paisley Ln		Transaction ID: SA11A1.36177	
City Horizon City	State TX	Zip Code 79928	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired	Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	
Election Cycle-to-Date 250.00			

Full Name (Last, First, Middle Initial) C. Elizabeth M Peroutka		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5	
Mailing Address 1103 Bernard Street 737		Transaction ID: SA11A1.28641	
City Denton	State TX	Zip Code 76201	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None	Occupation Retired	Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	
Election Cycle-to-Date 1000.00			

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Stephen G Peroutka		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address 8028 Ritchie Highway 300		Transaction ID: SA11A1.28639
City Pasadena	State MD	Zip Code 21122
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) B. Phillips, Edwin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5
Mailing Address 10 Bay Island		Transaction ID: SA11A1.40498
City Newport Beach	State CA	Zip Code 92661
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. phillips, edwin		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 9 / 2 0 0 5
Mailing Address 120 s irving bl		Transaction ID: SA11A1.41416
City los angeles	State CA	Zip Code 90004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self	Occupation insurance	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 500.00	

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial) Platt, Harold Mailing Address 8810 Walther Blvd Apt 3414 City State Zip Code Parkville MD 21234 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 5 / 2 0 0 5 Transaction ID: SA11A1.36389 Amount of Each Receipt this Period 50.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation None Retired Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff Election Cycle-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Plummer, Walter Mailing Address 103 West 2nd Street City State Zip Code Frederick MD 21701 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5 Transaction ID: SA11A1.36397 Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Retired Colonel, US Army, Retired Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff Election Cycle-to-Date ▼ 275.00		

C. Full Name (Last, First, Middle Initial) Plymale, Beth Mailing Address 2569 Lancaster Drive City State Zip Code Arroyo Grande CA 93420 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5 Transaction ID: SA11A1.40507 Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation None Retired Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff Election Cycle-to-Date ▼ 250.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 134
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Pohorsky, Frances		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5	
Mailing Address 12861 Chatsworth Ln		Transaction ID: SA11A1.36403	
City State Zip Code Grass Valley CA 95945		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 325.00	

Full Name (Last, First, Middle Initial) B. Potts, Helen		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 8 / 2 0 0 5	
Mailing Address 1094 Katella st		Transaction ID: SA11A1.41388	
City State Zip Code Laguna Beach CA 92651		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Giant R.V. Irvine Sales			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Potts, Helen		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address 1094 Katella st		Transaction ID: SA11A1.40511	
City State Zip Code Laguna Beach CA 92651		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Giant R.V. Irvine Sales			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 450.00	

SUBTOTAL of Receipts This Page (optional)	425.00
TOTAL This Period (last page this line number only)	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Powell, Don		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 153 Sharo Run Rd		Transaction ID: SA11A1.36469	
City State Zip Code Spraggs PA 15362	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 275.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

Full Name (Last, First, Middle Initial) B. Powell, Mark		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address 5551 Luford Cir		Transaction ID: SA11A1.40513	
City State Zip Code Westminster CA 96283	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 400.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

Full Name (Last, First, Middle Initial) C. Pringle, Julianne		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5	
Mailing Address 2300 Riverside Drive Unit 4D		Transaction ID: SA11A1.36508	
City State Zip Code Tulsa OK 74114	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 450.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial) Pruden, Robert		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 5
Mailing Address 4012 Boston Ave		Transaction ID: SA11A1.36521
City State Zip Code Glendale CA 91214	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 230.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

B. Full Name (Last, First, Middle Initial) Raya, Matile		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address 3509 Griffith Pk Blvd		Transaction ID: SA11A1.36609
City State Zip Code Los Angeles CA 90027	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 225.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

C. Full Name (Last, First, Middle Initial) Reardon, Nancy		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5
Mailing Address 118 Diamond St Apt 301		Transaction ID: SA11A1.36617
City State Zip Code San Francisco CA 94114	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 225.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
Reardon, Nancy

Mailing Address 118 Diamond St Apt 301

City State Zip Code
San Francisco CA 94114

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
275.00

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

Transaction ID: SA11A1.36618

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO Box 426

City State Zip Code
Missouri Valley IA 51555

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
210.00

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

Transaction ID: SA11A1.36628

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2201 E Hickory Hill Rd

City State Zip Code
Argyle TX 76226

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 5

Transaction ID: SA11A1.28607

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial) Nancy Reed		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 5
Mailing Address 2201 E Hickory Hill Rd		Transaction ID: SA11A1.28609
City State Zip Code Argyle TX 76226	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired	Election Cycle-to-Date ▼ 1000.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

B. Full Name (Last, First, Middle Initial) Nancy Reed		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 5
Mailing Address 2201 E Hickory Hill Rd		Transaction ID: SA11A1.42379
City State Zip Code Argyle TX 76226	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired	Election Cycle-to-Date ▼ 2000.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

C. Full Name (Last, First, Middle Initial) Reeves, Terry		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 9 / 2 0 0 5
Mailing Address 10537 E Sunnyside Dr		Transaction ID: SA11A1.36659
City State Zip Code Scottsdale AZ 85259	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Retired None	Election Cycle-to-Date ▼ 500.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

SUBTOTAL of Receipts This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Reinkemeyer, Joe		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 5
Mailing Address 3968 Hampstead Rd		Transaction ID: SA11A1.40539
City La Canada	State CA	Zip Code 91011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) B. Robson, John		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 1 / 2 0 0 5
Mailing Address 2111 E Highway 82		Transaction ID: SA11A1.36897
City Huachuca City	State AZ	Zip Code 85616
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Rodgers, J		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 5
Mailing Address 5440 Washington St		Transaction ID: SA11A1.36912
City Napa	State CA	Zip Code 94558
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 400.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Rodgers, J		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 5440 Washington St		Transaction ID: SA11A1.36913	
City State Zip Code Napa CA 94558	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation None Retired	Election Cycle-to-Date 500.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff			

Full Name (Last, First, Middle Initial) B. Rutledge, Thomas		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address 14108 Arbolitos Dr		Transaction ID: SA11A1.37087	
City State Zip Code Poway CA 92064	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Retired None	Election Cycle-to-Date 250.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff			

Full Name (Last, First, Middle Initial) C. Deenie Sardo		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address 1361 Foothill Blvd		Transaction ID: SA11A1.28653	
City State Zip Code La Canada CA 91011	Amount of Each Receipt this Period 1850.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Sardo Interior Services Vice President	Election Cycle-to-Date 1850.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff			

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Sonny Sardo		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address 1361 Foothill Blvd		Transaction ID: SA11A1.28651	
City State Zip Code La Canada CA 91011	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Sardo Interior Services President	Receipt For: 2005 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff 2000.00		

Full Name (Last, First, Middle Initial) B. Savino, Paul		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5	
Mailing Address 19036 North 29th Pl		Transaction ID: SA11A1.41404	
City State Zip Code Phoenix AZ 85030	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Self Dentist	Receipt For: 2005 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff 250.00		

Full Name (Last, First, Middle Initial) C. Schafer, Elizabeth		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 5	
Mailing Address 610 1st St.		Transaction ID: SA11A1.37199	
City State Zip Code Coronado CA 92118	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Retired None	Receipt For: 2005 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff 1000.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Schaller, Roger		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 5
Mailing Address 49505 Gratiot Ave		Transaction ID: SA11A1.37207
City Chesterfield	State MI	Zip Code 48051
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Schaller, Roger		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 0 / 2 0 0 5
Mailing Address 49505 Gratiot Ave		Transaction ID: SA11A1.37206
City Chesterfield	State MI	Zip Code 48051
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Schenk, Donald		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 7 / 2 0 0 5
Mailing Address 1440 Ridgemont Way		Transaction ID: SA11A1.41977
City Corona	State CA	Zip Code 92882
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	▶	900.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
Schenk, Donald

Mailing Address 1440 Ridgemont Way

City State Zip Code
Corona CA 92882

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) ▼
Runoff

Election Cycle-to-Date ▼
490.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 5

Transaction ID: SA11A1.41919

Amount of Each Receipt this Period
90.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 516 helfin st

City State Zip Code
bound brook NJ 08805

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

Name of Employer self Occupation elevator installer/service

Receipt For: 2005
 Primary General
 Other (specify) ▼
Runoff

Election Cycle-to-Date ▼
250.00

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

Transaction ID: SA11A1.37473

Amount of Each Receipt this Period
150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 8159 Palm Street

City State Zip Code
Lemon Grove CA 91945

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

Name of Employer Self Occupation Attorney

Receipt For: 2005
 Primary General
 Other (specify) ▼
Runoff

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 5

Transaction ID: SA11A1.41971

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	490.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Shearer, William		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address 8159 Palm Street		Transaction ID: SA11A1.28644
City State Zip Code Lemon Grove CA 91945	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self Occupation Attorney	Election Cycle-to-Date ▼ 750.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

Full Name (Last, First, Middle Initial) B. Shek, Walter		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5
Mailing Address 12630 S Laftin St		Transaction ID: SA11A1.37508
City State Zip Code Calumet Park IL 60827	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 750.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

Full Name (Last, First, Middle Initial) C. Simmons, Vic		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 9 / 2 0 0 5
Mailing Address PO Box 182		Transaction ID: SA11A1.41973
City State Zip Code Redlands CA 92373	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 250.00	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Smith, Bernadine		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address 215 E Amber Way		Transaction ID: SA11A1.40643	
City State Zip Code Stanford CA 93230	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 500.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

Full Name (Last, First, Middle Initial) B. Smith, Bernadine		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 5	
Mailing Address 215 E Amber Way		Transaction ID: SA11A1.41417	
City State Zip Code Stanford CA 93230	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 500.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

Full Name (Last, First, Middle Initial) C. Smith, William		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address 19341 Pitcairn Ln		Transaction ID: SA11A1.37781	
City State Zip Code Huntington Beach CA 92646	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired	Election Cycle-to-Date ▼ 250.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff			

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Southwell, Lynn		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 2 / 2 0 0 5	
Mailing Address 12033 Solon Drive 103		Transaction ID: SA11A1.28643	
City State Zip Code Orlando FL 32826	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer None Occupation Retired	Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		
Election Cycle-to-Date 2500.00			

Full Name (Last, First, Middle Initial) B. Stephen G Spinosa		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address 15 Terrace Rd		Transaction ID: SA11A1.28619	
City State Zip Code Benton NJ 07005	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Spinosa Enterprises Occupation Financial Advisor	Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		
Election Cycle-to-Date 1000.00			

Full Name (Last, First, Middle Initial) C. Stahly, George		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 5 / 2 0 0 5	
Mailing Address 851 N Oak St		Transaction ID: SA11A1.37910	
City State Zip Code Colville WA 99114	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer None Occupation Retired	Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		
Election Cycle-to-Date 280.00			

SUBTOTAL of Receipts This Page (optional)	2030.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Stephens, Ralph		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 5
Mailing Address 1685 Fernald Point Ln		Transaction ID: SA11A1.37977
City State Zip Code Santa Barbara CA 93108	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired Occupation None		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Stephenson, Julie		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 8 / 2 0 0 5
Mailing Address 515 Vista Flora		Transaction ID: SA11A1.41120
City State Zip Code Newport Beach CA 92660	Amount of Each Receipt this Period 45.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self Occupation realtor		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 895.00	

Full Name (Last, First, Middle Initial) C. Stephenson, Julie		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 5
Mailing Address 515 Vista Flora		Transaction ID: SA11A1.40669
City State Zip Code Newport Beach CA 92660	Amount of Each Receipt this Period 45.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self Occupation realtor		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 940.00	

SUBTOTAL of Receipts This Page (optional)	590.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 79 / 134
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

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

Mailing Address 13313 Winchester Ave

City State Zip Code
Huntington Woods MI 48070

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 350.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 9 / 2 0 0 5

Transaction ID: SA11A1.41350

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 13313 Winchester Ave

City State Zip Code
Huntington Woods MI 48070

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 450.00

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

Transaction ID: SA11A1.40671

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 507 Crescent Dr

City State Zip Code
Pocatello ID 83201

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 211.00

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

Transaction ID: SA11A1.38024

Amount of Each Receipt this Period
74.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	274.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Stromquist, Dale		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 0 5	
Mailing Address 755608 Hienaloli Rd Unit 17		Transaction ID: SA11A1.38102	
City State Zip Code Kailua Kona HI 96740		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired Occupation None			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Stromquist, Donna		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address 755608 Hienaloli 17		Transaction ID: SA11A1.41981	
City State Zip Code Kailua Kona HI 96740		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer None Occupation Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Swinehart, Howard		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 342 N. 3RD ST.		Transaction ID: SA11A1.41379	
City State Zip Code Columbia PA 17512		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self-employed Occupation Software Developer			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional)	900.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Talmage, Jean		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5	
Mailing Address 1138 Devonshire Way		Transaction ID: SA11A1.38219	
City State Zip Code Palm Beach Gardens FL 33418		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 512.00	

Full Name (Last, First, Middle Initial) B. Talmage, Jean		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 5	
Mailing Address 1138 Devonshire Way		Transaction ID: SA11A1.38222	
City State Zip Code Palm Beach Gardens FL 33418		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Talmage, Jean		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 3 / 2 0 0 5	
Mailing Address 1138 Devonshire Way		Transaction ID: SA11A1.38220	
City State Zip Code Palm Beach Gardens FL 33418		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation None Retired			
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date 600.00	

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
Talmage, Jean

Mailing Address 1138 Devonshire Way

City State Zip Code
Palm Beach Gardens FL 33418

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 850.00

Date of Receipt
MM / DD / YYYY
12 / 14 / 2005

Transaction ID: SA11A1.38221

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 3407 N Washington St

City State Zip Code
Tacoma WA 98407

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

Name of Employer None Occupation Retired

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 350.00

Date of Receipt
MM / DD / YYYY
12 / 06 / 2005

Transaction ID: SA11A1.38317

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 710 S Handley Rd

City State Zip Code
Saint Louis MO 63105

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

Name of Employer Retired Occupation None

Receipt For: 2005
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 500.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2005

Transaction ID: SA11A1.38417

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	850.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
Trask, Paul

Mailing Address 1840 Fairburn Ave 212

City State Zip Code
Los Angeles CA 90025

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

Name of Employer Occupation
BF Consultants CPA

Receipt For: 2005 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Runoff

300.00

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

Transaction ID: SA11A1.41943

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1840 Fairburn Ave 212

City State Zip Code
Los Angeles CA 90025

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

Name of Employer Occupation
BF Consultants CPA

Receipt For: 2005 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Runoff

400.00

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

Transaction ID: SA11A1.40709

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2901 applying woods

City State Zip Code
plant city FL 33565

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

Name of Employer Occupation
uretek construction

Receipt For: 2005 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Runoff

310.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 5

Transaction ID: SA11A1.41408

Amount of Each Receipt this Period
310.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **510.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Trout, Michael		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 5
Mailing Address 2901 Appling Woods		Transaction ID: SA11A1.28627
City	State	Zip Code
Plant City	FL	33565
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer uretek	Occupation construction	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 1300.00	

Full Name (Last, First, Middle Initial) B. Trout, Michael		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 3 / 2 0 0 5
Mailing Address 2901 Appling Woods		Transaction ID: SA11A1.41425
City	State	Zip Code
Plant City	FL	33565
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer uretek	Occupation construction	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Uihlein, Lucia		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 1 / 2 0 0 5
Mailing Address 1001 Sheridan Rd		Transaction ID: SA11A1.38532
City	State	Zip Code
Lake Bluff	IL	60044
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation None	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 1000.00	

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Ulrich, David		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 5
Mailing Address 24192 Grayston Drive		Transaction ID: SA11A1.41419
City State Zip Code Lake Forest CA 92630	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Utel	Occupation Telecommunications	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. VanStaaveren, Elizabeth		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5
Mailing Address 1008 NW Cascade Way		Transaction ID: SA11A1.40722
City State Zip Code McMinnville OR 97128	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None	Occupation Retired	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) C. Watson, Winifred		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 0 5
Mailing Address 3057 S Higuera St 12		Transaction ID: SA11A1.38869
City State Zip Code San Luis Obispo CA 93401	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None	Occupation Retired	
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	775.00
TOTAL This Period (last page this line number only)	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. weber, ron		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 2 / 2 0 0 5	
Mailing Address box 5435		Transaction ID: SA11A1.41393	
City irvine	State CA	Amount of Each Receipt this Period 200.00	
Zip Code 92616		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation Retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. weber, ron		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 5	
Mailing Address box 5435		Transaction ID: SA11A1.40741	
City irvine	State CA	Amount of Each Receipt this Period 200.00	
Zip Code 92616		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation Retired		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 450.00		

Full Name (Last, First, Middle Initial) C. Weiss, Douglas		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 5	
Mailing Address 105 Tumble Creek Rd		Transaction ID: SA11A1.41358	
City Easton	State PA	Amount of Each Receipt this Period 100.00	
Zip Code 18042		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Small Business Owner		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 600.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Weiss, Douglas		Date of Receipt MM / DD / YYYY 11 / 30 / 2005
Mailing Address 105 Tumble Creek Rd		Transaction ID: SA11A1.40748
City Easton	State PA	Zip Code 18042
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Small Business Owner	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 700.00	

Full Name (Last, First, Middle Initial) B. White, Doug		Date of Receipt MM / DD / YYYY 12 / 05 / 2005
Mailing Address 52 Chapman White Rd		Transaction ID: SA11A1.39028
City Archibald	State LA	Zip Code 71218
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation None	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. White, Mary		Date of Receipt MM / DD / YYYY 11 / 22 / 2005
Mailing Address 4461 Stack Blvd Apt E130		Transaction ID: SA11A1.39038
City Melbourne	State FL	Zip Code 32901
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. White, Mary		Date of Receipt MM / DD / YYYY 11 / 29 / 2005
Mailing Address 4461 Stack Blvd Apt E130		Transaction ID: SA11A1.39037
City Melbourne	State FL	Zip Code 32901
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) B. Wilcher, Paul		Date of Receipt MM / DD / YYYY 12 / 01 / 2005
Mailing Address 5878 Spalding Drive		Transaction ID: SA11A1.41359
City Norcross	State GA	Zip Code 30092
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Self	Occupation CPA	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Wilmans, Chris		Date of Receipt MM / DD / YYYY 11 / 28 / 2005
Mailing Address 209 Grand Oaks Drive		Transaction ID: SA11A1.39155
City Glendora	State CA	Zip Code 91741
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00	
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 450.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 / 134
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Wolf, Phillip		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address 5665 Hwy 9N, Ste. 103-181		Transaction ID: SA11A1.41924	
City State Zip Code Alpharetta GA 30004	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self Occupation electronic sales	Election Cycle-to-Date <input type="checkbox"/> 300.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff			

Full Name (Last, First, Middle Initial) B. Wolfe, Betty		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 3 / 2 0 0 5	
Mailing Address 1600 Texas st		Transaction ID: SA11A1.41421	
City State Zip Code Fort Worth TX 76102	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer retired Occupation retired	Election Cycle-to-Date <input type="checkbox"/> 500.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff			

Full Name (Last, First, Middle Initial) C. Zhan, Tiangel		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 6 / 2 0 0 5	
Mailing Address 380 Rector PL 12C		Transaction ID: SA11A1.41362	
City State Zip Code New York NY 10280	Amount of Each Receipt this Period 120.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer NA Occupation NA	Election Cycle-to-Date <input type="checkbox"/> 220.00		
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff			

SUBTOTAL of Receipts This Page (optional)	720.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 90 / 134	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Zinke, Gilbert	
Mailing Address 7018 Central Ave	
City Glendale	State Zip Code NY 11385
FEC ID number of contributing federal political committee. C	
Name of Employer None	Occupation Retired
Receipt For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 350.00

Date of Receipt MM / DD / YYYY 12 / 06 / 2005
Transaction ID: SA11A1.39455
Amount of Each Receipt this Period 100.00
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	100.00
TOTAL This Period (last page this line number only)	69142.74

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 91 / 134
	(check only one)	
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
		<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
AMERICAN INDEPENDENT PARTY OF CALIFORNIA STATE CENTRAL COMMITTEE

Mailing Address 1084 W MARSHALL BOULEVARD

City State Zip Code
SAN BERNARDINO CA 92405

FEC ID number of contributing federal political committee. **C** C00361162

Name of Employer Occupation

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
788.00

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

Transaction ID: SA11B.28646

Amount of Each Receipt this Period
187.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
CONSTITUTION PARTY NATIONAL COMMITTEE

Mailing Address 23 North Lime Street

City State Zip Code
Lancaster PA 17602

FEC ID number of contributing federal political committee. **C** C00279802

Name of Employer Occupation

Receipt For: 2005
 Primary General
 Other (specify) ▼
 Runoff

Election Cycle-to-Date ▼
7900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 5

Transaction ID: SA11B.28599

Amount of Each Receipt this Period
2900.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	3087.00
TOTAL This Period (last page this line number only)	▶	3087.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Aliso Creek Printing		Transaction ID: SB17.28746 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address 24051 Shelley Road		Amount of Each Disbursement this Period 1395.36
City Laguna Niguel State CA Zip Code 92677	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Signs and Banners Candidate Name	Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. American Caging		Transaction ID: SB17.28780 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 5
Mailing Address 4850 Wright Road Suite 168		Amount of Each Disbursement this Period 1115.68
City Stafford State TX Zip Code 77477	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Caging Fees Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. American Caging		Transaction ID: SB17.28808 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 5
Mailing Address 4850 Wright Road Suite 168		Amount of Each Disbursement this Period 3900.00
City Stafford State TX Zip Code 77477	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Caging Fees Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional) ▶	6411.04
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 93 / 134

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. American Caging		Transaction ID: SB17.28823 Date of Disbursement
Mailing Address 4850 Wright Road Suite 168		<input type="text" value="1"/> <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="5"/>
City Stafford	State TX	Zip Code 77477
Purpose of Disbursement Caging Fees	<input type="text" value="001"/> Category/ Type	
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="1104.27"/>
State: District:	Runoff	

Full Name (Last, First, Middle Initial) B. American Caging		Transaction ID: SB17.28860 Date of Disbursement
Mailing Address 4850 Wright Road Suite 168		<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/>
City Stafford	State TX	Zip Code 77477
Purpose of Disbursement Caging Fees	<input type="text" value="001"/> Category/ Type	
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="2502.18"/>
State: District:	Runoff	

Full Name (Last, First, Middle Initial) C. Balboa Bay Club		Transaction ID: SB17.28664 Date of Disbursement
Mailing Address 1221 West Coast Hwy		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/>
City Newport Beach	State CA	Zip Code 92663
Purpose of Disbursement Event Rental	<input type="text" value="007"/> Category/ Type	
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="5689.20"/>
State: District:	Runoff	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9295.65"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Balboa Bay Club		Transaction ID: SB17.28717 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 1221 West Coast Hwy		Amount of Each Disbursement this Period 4848.75
City Newport Beach State CA Zip Code 92663	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Dinner Expense	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Bank of America		Transaction ID: SB17.28731 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 11900 Baron Cameron Ave		Amount of Each Disbursement this Period 10.00
City Reston State VA Zip Code 20190	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Bank Charge	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. Bank of America		Transaction ID: SB17.28733 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 5 / 2 0 0 5
Mailing Address 11900 Baron Cameron Ave		Amount of Each Disbursement this Period 50.00
City Reston State VA Zip Code 20190	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Bank Charge	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional) ▶	4908.75
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Bieber Communications		Transaction ID: SB17.28767 Date of Disbursement 12 / 15 / 2005
Mailing Address 3605 W MacArthur Blvd Suite 712		Amount of Each Disbursement this Period 4500.00
City Santa Ana State CA Zip Code 92704	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Printed Campaign materials Candidate Name		006 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Bieber Communications		Transaction ID: SB17.28769 Date of Disbursement 12 / 15 / 2005
Mailing Address 3605 W MacArthur Blvd Suite 712		Amount of Each Disbursement this Period 8750.00
City Santa Ana State CA Zip Code 92704	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Printed Campaign Materials Candidate Name		006 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. Breiling, Anne		Transaction ID: SB17.28687 Date of Disbursement 12 / 01 / 2005
Mailing Address 100 Las Lomas Dr		Amount of Each Disbursement this Period 502.16
City Aptos State CA Zip Code 95003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Salary Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional)	13752.16
TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

<p>A. Full Name (Last, First, Middle Initial) Tim Bueler</p> <p>Mailing Address 6633 Nugget Dr</p> <p>City Foresthill State CA Zip Code 95631</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff</p>		<p>Transaction ID: SB17.28667 Date of Disbursement 11 / 18 / 2005</p> <p>Amount of Each Disbursement this Period 624.07</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Tim Bueler</p> <p>Mailing Address 6633 Nugget Dr</p> <p>City Foresthill State CA Zip Code 95631</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff</p>		<p>Transaction ID: SB17.28695 Date of Disbursement 12 / 02 / 2005</p> <p>Amount of Each Disbursement this Period 638.56</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Tim Bueler</p> <p>Mailing Address 6633 Nugget Dr</p> <p>City Foresthill State CA Zip Code 95631</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff</p>		<p>Transaction ID: SB17.28703 Date of Disbursement 12 / 06 / 2005</p> <p>Amount of Each Disbursement this Period 335.11</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1597.74

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Tim Bueler		Transaction ID: SB17.28772 Date of Disbursement 12 / 09 / 2005	
Mailing Address 6633 Nugget Dr		Amount of Each Disbursement this Period 111.83	
City Foresthill State CA Zip Code 95631	Purpose of Disbursement Salary Candidate Name	001 Category/ Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

Full Name (Last, First, Middle Initial) B. Tim Bueler		Transaction ID: SB17.28773 Date of Disbursement 12 / 09 / 2005	
Mailing Address 6633 Nugget Dr		Amount of Each Disbursement this Period 625.00	
City Foresthill State CA Zip Code 95631	Purpose of Disbursement Salary Candidate Name	001 Category/ Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

Full Name (Last, First, Middle Initial) C. Tim Bueler		Transaction ID: SB17.28775 Date of Disbursement 12 / 09 / 2005	
Mailing Address 6633 Nugget Dr		Amount of Each Disbursement this Period 412.44	
City Foresthill State CA Zip Code 95631	Purpose of Disbursement Salary Candidate Name	001 Category/ Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

SUBTOTAL of Disbursements This Page (optional) ▶	1149.27
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Catterton Printing		Transaction ID: SB17.28813 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 5
Mailing Address 100 Post Office Road		Amount of Each Disbursement this Period 579.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Waldorf State MD Zip Code 20602	Purpose of Disbursement Printed Solicitations Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Category/Type 003

Full Name (Last, First, Middle Initial) B. Coast Media Teleproductions		Transaction ID: SB17.28668 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 17062 Murphy Ave B		Amount of Each Disbursement this Period 150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Irvine State CA Zip Code 92614	Purpose of Disbursement Media Buys Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Category/Type 004

Full Name (Last, First, Middle Initial) C. Coast Media Teleproductions		Transaction ID: SB17.28669 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 0 5
Mailing Address 17062 Murphy Ave B		Amount of Each Disbursement this Period 150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Irvine State CA Zip Code 92614	Purpose of Disbursement Media Buys Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Category/Type 004

SUBTOTAL of Disbursements This Page (optional) ▶	879.80
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Cogs South		Transaction ID: SB17.28665 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 0 5
Mailing Address 3309 South Main St		Amount of Each Disbursement this Period 750.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Santa Ana State CA Zip Code 92707	Purpose of Disbursement Signs Candidate Name Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Colortree Inc		Transaction ID: SB17.28781 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 5
Mailing Address PO Box 28990		Amount of Each Disbursement this Period 1277.09 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Richmond State VA Zip Code 23228	Purpose of Disbursement Direct Mail Candidate Name Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. Colortree Inc		Transaction ID: SB17.28794 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5
Mailing Address PO Box 28990		Amount of Each Disbursement this Period 3330.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Richmond State VA Zip Code 23228	Purpose of Disbursement Direct Mail Candidate Name Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional) ▶	5357.99
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Colortree Inc		Transaction ID: SB17.28815 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 5
Mailing Address PO Box 28990		Amount of Each Disbursement this Period 803.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Richmond State VA Zip Code 23228	Purpose of Disbursement Direct Mail Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Complete Campaigns.com		Transaction ID: SB17.28750 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 575.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City San Diego State CA Zip Code 92102	Purpose of Disbursement Media Buys Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. County of Orange		Transaction ID: SB17.28712 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 5
Mailing Address PO Box 11298		Amount of Each Disbursement this Period 518.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Santa Ana State CA Zip Code 92711	Purpose of Disbursement Voter Regs Candidate Name Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional) ▶	1897.10
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) 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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. County of Orange		Transaction ID: SB17.28713 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 5
Mailing Address PO Box 11298		Amount of Each Disbursement this Period 103.77 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Santa Ana State CA Zip Code 92711	Purpose of Disbursement Voter Regs Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Category/ Type 006

Full Name (Last, First, Middle Initial) B. County of Orange		Transaction ID: SB17.28756 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5
Mailing Address PO Box 11298		Amount of Each Disbursement this Period 107.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Santa Ana State CA Zip Code 92711	Purpose of Disbursement Voter information Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Category/ Type 005

Full Name (Last, First, Middle Initial) C. Courtyard		Transaction ID: SB17.28720 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 23175 Avenida De La Carlota		Amount of Each Disbursement this Period 352.29 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Laguna Hills State CA Zip Code 92653	Purpose of Disbursement Event Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Category/ Type 007

SUBTOTAL of Disbursements This Page (optional) ▶	563.88
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

<p>A. Courtyard</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 23175 Avenida De La Carlota</p>		<p>Transaction ID: SB17.28730 Date of Disbursement 11 / 21 / 2005</p>
<p>City Laguna Hills State CA Zip Code 92653</p>	<p>Purpose of Disbursement Event Rental</p>	<p>Amount of Each Disbursement this Period 2.50</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Candidate Name</p>		<p>Category/Type 007</p>

<p>B. Cox Communication</p> <p>Full Name (Last, First, Middle Initial) Mailing Address PO Box 6058</p>		<p>Transaction ID: SB17.28707 Date of Disbursement 12 / 07 / 2005</p>
<p>City Cypress State CA Zip Code 90630</p>	<p>Purpose of Disbursement Office Communications</p>	<p>Amount of Each Disbursement this Period 460.37</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Candidate Name</p>		<p>Category/Type 001</p>

<p>C. Diener Consultants, Inc</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 264 Littel Creek Road</p>		<p>Transaction ID: SB17.28843 Date of Disbursement 12 / 22 / 2005</p>
<p>City Lancaster State PA Zip Code 17601</p>	<p>Purpose of Disbursement List Rental</p>	<p>Amount of Each Disbursement this Period 414.56</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Candidate Name</p>		<p>Category/Type 003</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>877.43</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Diener Consultants, Inc		Transaction ID: SB17.28850 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 5
Mailing Address 264 Littel Creek Road		Amount of Each Disbursement this Period 87.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lancaster State PA Zip Code 17601	Purpose of Disbursement List Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Category/ Type 003

Full Name (Last, First, Middle Initial) B. Diener Consultants, Inc		Transaction ID: SB17.28854 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 5
Mailing Address 264 Littel Creek Road		Amount of Each Disbursement this Period 26.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lancaster State PA Zip Code 17601	Purpose of Disbursement List Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Category/ Type 003

Full Name (Last, First, Middle Initial) C. Diener Consultants, Inc		Transaction ID: SB17.28857 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 5
Mailing Address 264 Littel Creek Road		Amount of Each Disbursement this Period 252.45 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lancaster State PA Zip Code 17601	Purpose of Disbursement List Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Category/ Type 003

SUBTOTAL of Disbursements This Page (optional) ▶	366.45
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Digital Color World		Transaction ID: SB17.28714 Date of Disbursement
Mailing Address 2632 W Main St		<input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2005"/>
City Ventura	State CA	Zip Code 93003
Purpose of Disbursement Signs	<input type="text" value="006"/>	Amount of Each Disbursement this Period <input type="text" value="1735.00"/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Runoff	

Full Name (Last, First, Middle Initial) B. Dolce Vita Ristoraunte		Transaction ID: SB17.28759 Date of Disbursement
Mailing Address 2321 Raymond Way		<input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2005"/>
City Lake Forest	State CA	Zip Code 92630
Purpose of Disbursement Office Dinner	<input type="text" value="001"/>	Amount of Each Disbursement this Period <input type="text" value="527.46"/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Runoff	

Full Name (Last, First, Middle Initial) C. Election Impact Group		Transaction ID: SB17.28718 Date of Disbursement
Mailing Address PO Box 2078		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2005"/>
City Oxford	State MS	Zip Code 38655
Purpose of Disbursement Media Buys	<input type="text" value="004"/>	Amount of Each Disbursement this Period <input type="text" value="1555.26"/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Runoff	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3817.72"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) 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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Election Impact Group		Transaction ID: SB17.28676 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5
Mailing Address PO Box 2078		Amount of Each Disbursement this Period 211.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Oxford State MS Zip Code 38655	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Frost, Jess		Transaction ID: SB17.28811 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 5
Mailing Address 26851 Mission Hills Dr		Amount of Each Disbursement this Period 654.70 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City San Juan Capistrano State CA Zip Code 92675	Purpose of Disbursement Bank Charges Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. Frost Bank		Transaction ID: SB17.28777 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 5
Mailing Address 3707 Richmond Ave		Amount of Each Disbursement this Period 212.97 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Houston State TX Zip Code 77046	Purpose of Disbursement Bank Charges Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional) ▶	1078.99
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Frost Bank		Transaction ID: SB17.28819 Date of Disbursement 11 / 17 / 2005	
Mailing Address 3707 Richmond Ave		Amount of Each Disbursement this Period 157.34	
City Houston State TX Zip Code 77046	Purpose of Disbursement Bank Charges Candidate Name	001 Category/ Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

Full Name (Last, First, Middle Initial) B. Frost Bank		Transaction ID: SB17.28826 Date of Disbursement 11 / 17 / 2005	
Mailing Address 3707 Richmond Ave		Amount of Each Disbursement this Period 41.84	
City Houston State TX Zip Code 77046	Purpose of Disbursement Bank Charges Candidate Name	001 Category/ Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

Full Name (Last, First, Middle Initial) C. Frost Bank		Transaction ID: SB17.28800 Date of Disbursement 12 / 01 / 2005	
Mailing Address 3707 Richmond Ave		Amount of Each Disbursement this Period 10.00	
City Houston State TX Zip Code 77046	Purpose of Disbursement Bank Charges Candidate Name	001 Category/ Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

SUBTOTAL of Disbursements This Page (optional) ▶	209.18
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) 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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Frost Bank		Transaction ID: SB17.28832 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address 3707 Richmond Ave		Amount of Each Disbursement this Period 150.00
City Houston State TX Zip Code 77046	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Bank Charges Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Frost Bank		Transaction ID: SB17.28802 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address 3707 Richmond Ave		Amount of Each Disbursement this Period 240.87
City Houston State TX Zip Code 77046	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Bank Charges Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. Frost Bank		Transaction ID: SB17.28821 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address 3707 Richmond Ave		Amount of Each Disbursement this Period 34.65
City Houston State TX Zip Code 77046	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Bank Charges Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional) ▶	425.52
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Frost Bank		Transaction ID: SB17.28834 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5	
Mailing Address 3707 Richmond Ave		Amount of Each Disbursement this Period 281.69	
City Houston State TX Zip Code 77046	Purpose of Disbursement Bank Charges Candidate Name	001 Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

Full Name (Last, First, Middle Initial) B. Frost Bank		Transaction ID: SB17.28805 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5	
Mailing Address 3707 Richmond Ave		Amount of Each Disbursement this Period 10.00	
City Houston State TX Zip Code 77046	Purpose of Disbursement Bank Charges Candidate Name	001 Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

Full Name (Last, First, Middle Initial) C. Frost Bank		Transaction ID: SB17.28838 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 5	
Mailing Address 3707 Richmond Ave		Amount of Each Disbursement this Period 105.93	
City Houston State TX Zip Code 77046	Purpose of Disbursement Bank Charges Candidate Name	001 Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		

SUBTOTAL of Disbursements This Page (optional) ▶	397.62
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

<p>A. Full Name (Last, First, Middle Initial) Julio Giron</p> <p>Mailing Address PO Box 2096</p> <p>City Bell Gardens State CA Zip Code 90201</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff</p>		<p>Transaction ID: SB17.28672 Date of Disbursement 11 / 22 / 2005</p> <p>Amount of Each Disbursement this Period 550.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
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<p>B. Full Name (Last, First, Middle Initial) Julio Giron</p> <p>Mailing Address PO Box 2096</p> <p>City Bell Gardens State CA Zip Code 90201</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff</p>		<p>Transaction ID: SB17.28688 Date of Disbursement 12 / 02 / 2005</p> <p>Amount of Each Disbursement this Period 550.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
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<p>C. Full Name (Last, First, Middle Initial) Home Depot</p> <p>Mailing Address 24332 El Toro Road</p> <p>City Laguna Hills State CA Zip Code 92653</p> <p>Purpose of Disbursement Office Supplies Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff</p>		<p>Transaction ID: SB17.28758 Date of Disbursement 12 / 06 / 2005</p> <p>Amount of Each Disbursement this Period 17.21</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
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SUBTOTAL of Disbursements This Page (optional)	1117.21
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) 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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Hyatt Hotel		Transaction ID: SB17.28741 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address 17900 Jamboree Road		Amount of Each Disbursement this Period 1330.58 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Irvine State CA Zip Code 92614	Purpose of Disbursement Event Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Category/Type 007
Full Name (Last, First, Middle Initial) B. Integram		Transaction ID: SB17.28783 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 5
Mailing Address 8421 Hilltop Road		Amount of Each Disbursement this Period 1124.41 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Category/Type 006
Full Name (Last, First, Middle Initial) C. Integram		Transaction ID: SB17.28796 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5
Mailing Address 8421 Hilltop Road		Amount of Each Disbursement this Period 1113.83 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Category/Type 003

SUBTOTAL of Disbursements This Page (optional) ▶	3568.82
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Integram		Transaction ID: SB17.28809 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 5
Mailing Address 8421 Hilltop Road		Amount of Each Disbursement this Period 3645.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Postage Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Integram		Transaction ID: SB17.28816 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 5
Mailing Address 8421 Hilltop Road		Amount of Each Disbursement this Period 2569.42 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Postage Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. J&N Printing		Transaction ID: SB17.28787 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 5
Mailing Address 121 Industrial Road #5		Amount of Each Disbursement this Period 1195.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Belmont State CA Zip Code 94002	Purpose of Disbursement Signs Candidate Name Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional) ▶	7409.93
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. J&N Printing Full Name (Last, First, Middle Initial) Mailing Address 121 Industrial Road #5 City Belmont State CA Zip Code 94002 Purpose of Disbursement Signs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		Transaction ID: SB17.28799 Date of Disbursement 11 / 30 / 2005 Amount of Each Disbursement this Period 2147.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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B. Michael Jameson Full Name (Last, First, Middle Initial) Mailing Address 635 E First St 421 City Tustin State CA Zip Code 92780 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		Transaction ID: SB17.28670 Date of Disbursement 11 / 30 / 2005 Amount of Each Disbursement this Period 1524.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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C. Kircher Family Partners Full Name (Last, First, Middle Initial) Mailing Address 23591 El Toro Road Suite 120 City Lake Forest State CA Zip Code 92630 Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		Transaction ID: SB17.28683 Date of Disbursement 11 / 30 / 2005 Amount of Each Disbursement this Period 3500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SUBTOTAL of Disbursements This Page (optional) ▶	7171.50
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Liberty Phone Center		Transaction ID: SB17.28831 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address 8001 Braddock Road		Amount of Each Disbursement this Period 3000.00
City Springfield State VA Zip Code 22151	Purpose of Disbursement Telemarketing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Liberty Phone Center		Transaction ID: SB17.28835 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5
Mailing Address 8001 Braddock Road		Amount of Each Disbursement this Period 2000.00
City Springfield State VA Zip Code 22151	Purpose of Disbursement Telemarketing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Liberty Phone Center		Transaction ID: SB17.28836 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5
Mailing Address 8001 Braddock Road		Amount of Each Disbursement this Period 2000.00
City Springfield State VA Zip Code 22151	Purpose of Disbursement Telemarketing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

**SCHEDULE B (FEC Form 3)
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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Monica Carabello & Assoc		Transaction ID: SB17.28691 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address 302 Auburn St		Amount of Each Disbursement this Period 1600.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Grass Valley State CA Zip Code 95945	Purpose of Disbursement Telemarketing Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Mountaintop Media Group		Transaction ID: SB17.28786 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 5
Mailing Address 217 Green Road		Amount of Each Disbursement this Period 12000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Sparta State NJ Zip Code 07871	Purpose of Disbursement Media Buys Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. Mountaintop Media Group		Transaction ID: SB17.28827 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 217 Green Road		Amount of Each Disbursement this Period 15000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Sparta State NJ Zip Code 07871	Purpose of Disbursement Ad Buys Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional) ▶	28600.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Mountaintop Media Group		Transaction ID: SB17.28793 Date of Disbursement 11 / 23 / 2005
Mailing Address 217 Green Road		Amount of Each Disbursement this Period 20000.00
City Sparta State NJ Zip Code 07871	Purpose of Disbursement Radio Ad Buys Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		
Category/Type: 004		

Full Name (Last, First, Middle Initial) B. Mountaintop Media Group		Transaction ID: SB17.28829 Date of Disbursement 11 / 29 / 2005
Mailing Address 217 Green Road		Amount of Each Disbursement this Period 15000.00
City Sparta State NJ Zip Code 07871	Purpose of Disbursement Ad Buys Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		
Category/Type: 004		

Full Name (Last, First, Middle Initial) C. Mountaintop Media Group		Transaction ID: SB17.28830 Date of Disbursement 11 / 30 / 2005
Mailing Address 217 Green Road		Amount of Each Disbursement this Period 24000.00
City Sparta State NJ Zip Code 07871	Purpose of Disbursement Ad Buys Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff		
Category/Type: 004		

SUBTOTAL of Disbursements This Page (optional)	59000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Mountaintop Media Group		Transaction ID: SB17.28833 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address 217 Green Road		Amount of Each Disbursement this Period 15692.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Sparta State NJ Zip Code 07871	Purpose of Disbursement Ad Buys Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Mountaintop Media Group		Transaction ID: SB17.28803 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5
Mailing Address 217 Green Road		Amount of Each Disbursement this Period 20000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Sparta State NJ Zip Code 07871	Purpose of Disbursement Radio Ad Buys Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. Mountaintop Media Group		Transaction ID: SB17.28804 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5
Mailing Address 217 Green Road		Amount of Each Disbursement this Period 19000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Sparta State NJ Zip Code 07871	Purpose of Disbursement Radio Ad Buys Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional) ▶	54692.82
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) 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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Gary Odom		Transaction ID: SB17.28661 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 0 5
Mailing Address 30625 Seminoce Dr		Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Coarsgold State CA Zip Code 93614	Purpose of Disbursement Salary Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Gary Odom		Transaction ID: SB17.28673 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 5
Mailing Address 30625 Seminoce Dr		Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Coarsgold State CA Zip Code 93614	Purpose of Disbursement Salary Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. Gary Odom		Transaction ID: SB17.28693 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address 30625 Seminoce Dr		Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Coarsgold State CA Zip Code 93614	Purpose of Disbursement Salary Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

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

SCHEDULE B (FEC Form 3) 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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Gary Odom		Transaction ID: SB17.28774 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 5
Mailing Address 30625 Seminoce Dr		Amount of Each Disbursement this Period 750.00
City Coarsgold State CA Zip Code 93614	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Office Depot		Transaction ID: SB17.28724 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 23631 El Toro Road		Amount of Each Disbursement this Period 99.82
City Lake Forest State CA Zip Code 92630	Purpose of Disbursement Office Expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Office Depot		Transaction ID: SB17.28671 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 0 5
Mailing Address 23631 El Toro Road		Amount of Each Disbursement this Period 172.39
City Lake Forest State CA Zip Code 92630	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1022.21
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Office Depot		Transaction ID: SB17.28732 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 0 5
Mailing Address 23631 El Toro Road		Amount of Each Disbursement this Period 53.48 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lake Forest State CA Zip Code 92630	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Office Depot		Transaction ID: SB17.28677 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 5
Mailing Address 23631 El Toro Road		Amount of Each Disbursement this Period 58.92 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lake Forest State CA Zip Code 92630	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. Office Depot		Transaction ID: SB17.28737 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 5
Mailing Address 23631 El Toro Road		Amount of Each Disbursement this Period 736.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lake Forest State CA Zip Code 92630	Purpose of Disbursement Sign Materials Candidate Name Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional) ▶	848.72
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) 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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Office Depot		Transaction ID: SB17.28742 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address 23631 El Toro Road		Amount of Each Disbursement this Period 75.40
City Lake Forest State CA Zip Code 92630	Purpose of Disbursement Decorations for Event Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/Type: 007		

Full Name (Last, First, Middle Initial) B. Office Depot		Transaction ID: SB17.28689 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address 23631 El Toro Road		Amount of Each Disbursement this Period 69.10
City Lake Forest State CA Zip Code 92630	Purpose of Disbursement Office Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/Type: 001		

Full Name (Last, First, Middle Initial) C. Office Depot		Transaction ID: SB17.28751 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5
Mailing Address 23631 El Toro Road		Amount of Each Disbursement this Period 172.88
City Lake Forest State CA Zip Code 92630	Purpose of Disbursement Sign Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/Type: 006		

SUBTOTAL of Disbursements This Page (optional) ▶	317.38
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Office Depot		Transaction ID: SB17.28753 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5
Mailing Address 23631 El Toro Road		Amount of Each Disbursement this Period 70.79
City Lake Forest State CA Zip Code 92630	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Orange County Register		Transaction ID: SB17.28660 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 5
Mailing Address 625 N. Grand Ave		Amount of Each Disbursement this Period 19.55
City Santa Ana State CA Zip Code 92701	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. Orange County Register		Transaction ID: SB17.28734 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 5 / 2 0 0 5
Mailing Address 625 N. Grand Ave		Amount of Each Disbursement this Period 2717.00
City Santa Ana State CA Zip Code 92701	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Ad Buys Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional) ▶	2807.34
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Patton-Kiehl Group		Transaction ID: SB17.28817 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 5
Mailing Address PO Box 590		Amount of Each Disbursement this Period 776.05 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Thornburg State VA Zip Code 22565	Purpose of Disbursement Direct Mail Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Pennysaver		Transaction ID: SB17.28735 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 5
Mailing Address 2000 Park Blvd		Amount of Each Disbursement this Period 2618.57 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City San Diego State CA Zip Code 92103	Purpose of Disbursement Ad Buys Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. PMI, Inc.		Transaction ID: SB17.28696 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 5
Mailing Address PO Box 698		Amount of Each Disbursement this Period 3150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Marianna State FL Zip Code 32447	Purpose of Disbursement Polling Candidate Name Category/Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional) ▶	6544.62
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. PMI, Inc.		Transaction ID: SB17.28711 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 5	
Mailing Address PO Box 698		Amount of Each Disbursement this Period 457.77	
City Marianna State FL Zip Code 32447	Purpose of Disbursement Telemarketing Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

Full Name (Last, First, Middle Initial) B. Save On Signs		Transaction ID: SB17.28680 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5	
Mailing Address Main St		Amount of Each Disbursement this Period 1000.00	
City Orlando State FL Zip Code 32829	Purpose of Disbursement Signs Candidate Name	Category/ Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

Full Name (Last, First, Middle Initial) C. Save On Signs		Transaction ID: SB17.28690 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5	
Mailing Address Main St		Amount of Each Disbursement this Period 1129.14	
City Orlando State FL Zip Code 32829	Purpose of Disbursement Signs Candidate Name	Category/ Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

SUBTOTAL of Disbursements This Page (optional) ▶	2586.91
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Mark Seidenberg		Transaction ID: SB17.28768 Date of Disbursement 12 / 12 / 2005
Mailing Address 23405 Via San Miguel		Amount of Each Disbursement this Period 1355.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Aliso Viejo	State CA	
Zip Code 92656	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Nathan Seaverns		Transaction ID: SB17.28708 Date of Disbursement 12 / 07 / 2005
Mailing Address 110 Casmer Dr		Amount of Each Disbursement this Period 1375.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Troy	State MO	
Zip Code 63379	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. Nathan Seaverns		Transaction ID: SB17.28766 Date of Disbursement 12 / 15 / 2005
Mailing Address 110 Casmer Dr		Amount of Each Disbursement this Period 199.39 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Troy	State MO	
Zip Code 63379	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional)	2930.26
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. SICM, Inc.		Transaction ID: SB17.28841 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 5
Mailing Address 3285 Windgate Dr		Amount of Each Disbursement this Period 783.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Buford State GA Zip Code 30519	Purpose of Disbursement List Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Category/Type 003

Full Name (Last, First, Middle Initial) B. SICM, Inc.		Transaction ID: SB17.28848 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 5
Mailing Address 3285 Windgate Dr		Amount of Each Disbursement this Period 72.15 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Buford State GA Zip Code 30519	Purpose of Disbursement List Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Category/Type 003

Full Name (Last, First, Middle Initial) C. SICM, Inc.		Transaction ID: SB17.28856 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 5
Mailing Address 3285 Windgate Dr		Amount of Each Disbursement this Period 282.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Buford State GA Zip Code 30519	Purpose of Disbursement List Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Category/Type 003

SUBTOTAL of Disbursements This Page (optional) ▶	1138.80
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Chris Simcox		Transaction ID: SB17.28662 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 0 5
Mailing Address 6501 East Greenway Parkway Suite103		Amount of Each Disbursement this Period 1000.00
City Scottsdale State AZ Zip Code 85254	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Salary Candidate Name		001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Chris Simcox		Transaction ID: SB17.28694 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address 6501 East Greenway Parkway Suite103		Amount of Each Disbursement this Period 2000.00
City Scottsdale State AZ Zip Code 85254	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Salary Candidate Name		001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. Sprint		Transaction ID: SB17.28719 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address PO Box 219554		Amount of Each Disbursement this Period 557.93
City Kansas City State MO Zip Code 64121	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Telephone Candidate Name		001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional) ▶	3557.93
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) 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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Sunrise Data Services		Transaction ID: SB17.28790 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 5
Mailing Address Main Street		Amount of Each Disbursement this Period 1034.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Los Angeles State CA Zip Code 90027	Purpose of Disbursement List Management Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Tancredo For Congress		Transaction ID: SB17.28675 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 5
Mailing Address 6099 South Quebec St		Amount of Each Disbursement this Period 298.96 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Centennial State CO Zip Code 80111	Purpose of Disbursement Travel Expenses Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) C. USPS		Transaction ID: SB17.28778 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 0 5
Mailing Address El Toro Post Office		Amount of Each Disbursement this Period 30000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lake Forest State CA Zip Code 92630	Purpose of Disbursement Postage Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional) ▶	31333.58
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3)
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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. USPS		Transaction ID: SB17.28792	
Mailing Address El Toro Post Office		Date of Disbursement 11 / 23 / 2005	
City Lake Forest	State CA	Zip Code 92630	Amount of Each Disbursement this Period 2087.68
Purpose of Disbursement Postage		003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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 checked="" type="checkbox"/> Other (specify) ▼	2005	
State: District:	Runoff		

Full Name (Last, First, Middle Initial) B. USPS		Transaction ID: SB17.28820	
Mailing Address El Toro Post Office		Date of Disbursement 11 / 23 / 2005	
City Lake Forest	State CA	Zip Code 92630	Amount of Each Disbursement this Period 976.90
Purpose of Disbursement Postage		003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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 checked="" type="checkbox"/> Other (specify) ▼	2005	
State: District:	Runoff		

Full Name (Last, First, Middle Initial) C. USPS		Transaction ID: SB17.28828	
Mailing Address El Toro Post Office		Date of Disbursement 11 / 23 / 2005	
City Lake Forest	State CA	Zip Code 92630	Amount of Each Disbursement this Period 135.52
Purpose of Disbursement Postage		003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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 checked="" type="checkbox"/> Other (specify) ▼	2005	
State: District:	Runoff		

SUBTOTAL of Disbursements This Page (optional)	3200.10
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. USPS		Transaction ID: SB17.28801	
Mailing Address El Toro Post Office		Date of Disbursement 12 / 02 / 2005	
City Lake Forest	State CA	Zip Code 92630	Amount of Each Disbursement this Period 19774.99
Purpose of Disbursement Postage		003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:	Runoff		

Full Name (Last, First, Middle Initial) B. USPS		Transaction ID: SB17.28810	
Mailing Address El Toro Post Office		Date of Disbursement 12 / 15 / 2005	
City Lake Forest	State CA	Zip Code 92630	Amount of Each Disbursement this Period 35141.26
Purpose of Disbursement Postage		003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:	Runoff		

Full Name (Last, First, Middle Initial) C. USPS		Transaction ID: SB17.28812	
Mailing Address El Toro Post Office		Date of Disbursement 12 / 20 / 2005	
City Lake Forest	State CA	Zip Code 92630	Amount of Each Disbursement this Period 2011.15
Purpose of Disbursement Postage		003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:	Runoff		

SUBTOTAL of Disbursements This Page (optional)	56927.40
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
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"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. USPS		Transaction ID: SB17.28824
Mailing Address El Toro Post Office		Date of Disbursement 12 / 20 / 2005
City Lake Forest	State CA	Zip Code 92630
Purpose of Disbursement Postage	Candidate Name	Amount of Each Disbursement this Period 143.51
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
State: District:	Runoff	Category/ Type 003

Full Name (Last, First, Middle Initial) B. USPS		Transaction ID: SB17.28839
Mailing Address El Toro Post Office		Date of Disbursement 12 / 20 / 2005
City Lake Forest	State CA	Zip Code 92630
Purpose of Disbursement Postage	Candidate Name	Amount of Each Disbursement this Period 82.34
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
State: District:	Runoff	Category/ Type 003

SUBTOTAL of Disbursements This Page (optional)

225.85

TOTAL This Period (last page this line number only)

337237.67

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Balboa Bay Club	Nature of Debt (Purpose): Event Expense
Mailing Address 1221 West Coast Hwy	
City State ZIP Code Newport Beach CA 92663	

Outstanding Balance Beginning This Period 5689.20	Transaction ID: SD10.28147	
Amount Incurred This Period 0.00	Payment This Period 5689.20	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Balboa Bay Club	Nature of Debt (Purpose): Event Rental
Mailing Address 1221 West Coast Hwy	
City State ZIP Code Newport Beach CA 92663	

Outstanding Balance Beginning This Period 4848.75	Transaction ID: SD10.28214	
Amount Incurred This Period 0.00	Payment This Period 4848.75	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mountaintop Media Group	Nature of Debt (Purpose): Advertising
Mailing Address 217 Green Road	
City State ZIP Code Sparta NJ 07871	

Outstanding Balance Beginning This Period 12000.00	Transaction ID: SD10.28150	
Amount Incurred This Period 0.00	Payment This Period 12000.00	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) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor PC Signs	Nature of Debt (Purpose): Signs
Mailing Address 2534 Commerce Blvd	
City State ZIP Code Cincinnati OH 45241	

Outstanding Balance Beginning This Period 135.27	Transaction ID: SD10.28593	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 135.27

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PC Signs	Nature of Debt (Purpose): Signs
Mailing Address 2534 Commerce Blvd	
City State ZIP Code Cincinnati OH 45241	

Outstanding Balance Beginning This Period 8782.19	Transaction ID: SD10.28595	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8782.19

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Politechs Inc	Nature of Debt (Purpose): Fundraising Expense
Mailing Address 4700 Surry Place	
City State ZIP Code Alexandria VA 22304	

Outstanding Balance Beginning This Period 17500.00	Transaction ID: SD10.12514	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 17500.00

1) SUBTOTALS This Period This Page (optional).....	26417.46
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 133 / 134
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
JIM GILCHRIST FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Politechs Inc	Nature of Debt (Purpose): Office Rental
Mailing Address 4700 Surry Place	
City State ZIP Code Alexandria VA 22304	

Outstanding Balance Beginning This Period <input type="text" value="3500.00"/>	Transaction ID: SD10.12516	
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="3500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Politechs Inc	Nature of Debt (Purpose): Consulting Fees
Mailing Address 4700 Surry Place	
City State ZIP Code Alexandria VA 22304	

Outstanding Balance Beginning This Period <input type="text" value="6500.00"/>	Transaction ID: SD10.12517	
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="6500.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="10000.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="36417.46"/>
3) TOTALS 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"/>

Image# 26950010144

Form/Schedule: SA11A1 Durring data entry into FEC File there was a typographical error in this entry. The donor's first name was spelled incorrectly and the 2 in the date was misread as a 7. The error has been corrected in this amendment.
Transaction ID: SA11A1.28643
