

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Kilpatrick for United States Congress

ADDRESS (number and street) P.O. Box 32175
 Check if different than previously reported. (ACC)
Detroit MI 48232

2. **FEC IDENTIFICATION NUMBER** C00317842
IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
MI

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 07 20 2006 through 09 30 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Carl F. Stafford

Signature of Treasurer Electronically Filed by Carl F. Stafford Date 03 15 2007

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Kilpatrick for United States Congress

Report Covering the Period: From: To:

| | 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))..... | 66535.00 | 434347.60 |
| (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))..... | 66535.00 | 434347.60 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17)..... | 26301.99 | 274348.20 |
| (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))..... | 26301.99 | 274348.20 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 348635.06 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
Kilpatrick for United States Congress

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 7 |

| | |
|---|---|
| D | D |
| 2 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 0 | 9 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

14800.00

123782.60

(ii) Unitemized.....

500.00

2730.00

(iii) TOTAL of contributions

15300.00

126512.60

from individuals..... ▶

0.00

21000.00

(b) Political Party Committees.....

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

51235.00

286835.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

66535.00

434347.60

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

2000.00

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)..... ▶

66535.00

436347.60

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|---------------------------------------|--|
| 17. OPERATING EXPENDITURES..... | 26301.99 | 274348.20 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES..... | 0.00 | 9000.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of all Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees..... | 0.00 | 0.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS..... | 62600.00 | 214679.71 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 88901.99 | 498027.91 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 371002.05 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)..... | 66535.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 437537.05 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 88901.99 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 348635.06 |

**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 5 / 42 |
| | <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)
Kilpatrick for United States Congress

A. Full Name (Last, First, Middle Initial)
George Aubrey

Mailing Address 22711 Overlake

City State Zip Code
St. Clair Shores MI 48080

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2006

Transaction ID: SA11A1.10544

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 561 New Town

City State Zip Code
Detroit MI 48215

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

Name of Employer Occupation
Detroit Area Agency on Aging President/CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2006

Transaction ID: SA11A1.10549

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Dr. Robert Brumfield

Mailing Address 19801 Cherrylanw

City State Zip Code
Detroit MI 48221

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

Name of Employer Occupation
Oak Grove AMC Pastor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2006

Transaction ID: SA11A1.10542

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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 6 / 42 |
| | <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)
Kilpatrick for United States Congress

A. Full Name (Last, First, Middle Initial)
Arthur R. Collins

Mailing Address 1602B Huntington Creek Drive

City State Zip Code
Alexandria VA 22314-6221

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

Name of Employer
Public Private Partnershi-
p, In Occupation
CEO & President

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: SA11A1.10569

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Robert B. Crews, Jr.

Mailing Address 2874 Red Arrow Drive

City State Zip Code
Las Vegas NV 89135

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

Name of Employer Occupation

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2006

Transaction ID: SA11A1.10665

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Reginald G. Dozier

Mailing Address 18255 Wildemere

City State Zip Code
Detroit MI 48221

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

Name of Employer
Clark Hill PLC Occupation
Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: SA11A1.10556

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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 7 / 42 |
| | <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)
Kilpatrick for United States Congress

| | | | |
|--|--|--|--|
| A. Full Name (Last, First, Middle Initial) Gasper Fiore | | Date of Receipt M M / D D / Y Y Y Y Y 08 / 08 / 2006 | |
| Mailing Address 2411 Vinewood | | Transaction ID: SA11A1.10540 | |
| City State Zip Code Detroit MI 48216 | | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | Campaign Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Boulevard & Trumbull Towing Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Occupation Owner Election Cycle-to-Date ▼ 1000.00 | |

| | | | |
|--|--|--|--|
| B. Full Name (Last, First, Middle Initial) Gasper Fiore | | Date of Receipt M M / D D / Y Y Y Y Y 08 / 09 / 2006 | |
| Mailing Address 2411 Vinewood | | Transaction ID: SA11A1.10538 | |
| City State Zip Code Detroit MI 48216 | | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | Campaign Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Boulevard & Trumbull Towing Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Occupation Owner Election Cycle-to-Date ▼ 1500.00 | |

| | | | |
|--|--|--|--|
| C. Full Name (Last, First, Middle Initial) John M. Guzik | | Date of Receipt M M / D D / Y Y Y Y Y 09 / 21 / 2006 | |
| Mailing Address 7908 Oak Hollow Lane | | Transaction ID: SA11A1.10655 | |
| City State Zip Code Fairfax Station VA 22039 | | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | | Campaign Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer The Franklin Partnership, LLP Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Occupation Founding Partner Election Cycle-to-Date ▼ 1250.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1750.00 |
| 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 / 42 |
| | <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)
Kilpatrick for United States Congress

A. Full Name (Last, First, Middle Initial)
Susan Hoffman

Mailing Address 7030 Ravenna Ave. NE

City State Zip Code
Seattle WA 98115

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

Name of Employer Occupation
Lewis & Munday, P.C. Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: SA11A1.10552

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Karen Kendrick-Brown

Mailing Address 2031 Westchester Dr.

City State Zip Code
Silver Spring MD 20902

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

Name of Employer Occupation
Lewis & Munday, P.C. Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: SA11A1.10566

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Brian J. Kott

Mailing Address 138 Hupp Cross Road

City State Zip Code
Bloomfield Village MI 48301

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

Name of Employer Occupation
Lewis & Munday Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: SA11A1.10558

Amount of Each Receipt this Period
500.00

Campaign Contribution
 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 9 / 42 |
| | <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)
Kilpatrick for United States Congress

A. Full Name (Last, First, Middle Initial)
Hans J Massaquoi

Mailing Address 1301 Orleans
Apt. 1807

City State Zip Code
Detroit MI 48207

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

Name of Employer Occupation
Lewis & Munday, P.C. Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

300.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: SA11A1.10561

Amount of Each Receipt this Period
300.00

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

B. Full Name (Last, First, Middle Initial)
Omar S. Nashashibi

Mailing Address 719 6th St. S.E.

City State Zip Code
Washington DC 20003-2735

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

Name of Employer Occupation
The Franklin Partnership Founding Partner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2006

Transaction ID: SA11A1.10656

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Blair A Person

Mailing Address 2336 Lanergan Dr.

City State Zip Code
Troy MI 48084-1111

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

Name of Employer Occupation
Lewis & Munday, P.C. Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: SA11A1.10554

Amount of Each Receipt this Period
500.00

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

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1050.00 |
| 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 / 42 |
| | <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)
Kilpatrick for United States Congress

A. Full Name (Last, First, Middle Initial)
Carrie Ponce Deleon

Mailing Address 715 Oakdale Rd.

City State Zip Code
Ann Arbor MI 48105-1056

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

Name of Employer Occupation
Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 09 / 2006

Transaction ID: SA11A1.10543

Amount of Each Receipt this Period
3000.00

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

B. Full Name (Last, First, Middle Initial)
Peter J. Rose

Mailing Address 409 Hanover St.

City State Zip Code
Fredericksburg VA 22401-5936

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

Name of Employer Occupation
The Franklin Partnership Partner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2006

Transaction ID: SA11A1.10660

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Saginaw Chippewa Indian Tribe

Mailing Address 7070 E. Broadway

City State Zip Code
Mt. Pleasant MI 48858

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 27 / 2006

Transaction ID: SA11A1.10690

Amount of Each Receipt this Period
1000.00

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

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 4250.00 |
| 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 / 42 |
| | <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)
Kilpatrick for United States Congress

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

Mailing Address 1333 H St. N.W.
West Towers, 9th Floor

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2006

Transaction ID: SA11A1.10651

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 3543 16th Street NW

City Washington State DC Zip Code 20010-3041

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

Name of Employer Unknown Occupation Unknown

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 09 / 2006

Transaction ID: SA11A1.10536

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Dr. Nellie M. Williams

Mailing Address 311 Elmwood

City Detroit State MI Zip Code 48207

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

Name of Employer Ross-Hill Academy, Williams Ce Occupation Founder & Principal

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 09 / 2006

Transaction ID: SA11A1.10547

Amount of Each Receipt this Period
250.00

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

| | | |
|--|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1750.00 |
| TOTAL This Period (last page this line number only) | ▶ | 14800.00 |

**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 / 42 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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 | |

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)
Kilpatrick for United States Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-PAC)

Mailing Address 222 S PROSPECT AVENUE
C/O FINANCE DEPT

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2006

Transaction ID: SA11C.10647

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
American Federation of Teachers Comm. of PE

Mailing Address 555 New Jersey Avenue, NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C70002472

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11C.10713

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1300 J Street NW

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
15000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11C.10721

Amount of Each Receipt this Period
4000.00

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

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 6000.00 |
| 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 13 / 42 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <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)
Kilpatrick for United States Congress

| | | |
|--|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. ASSOCIATION OF TRIAL LAWYERS OF AMERICA POLITICAL ACTION COMMITTEE (ATLA PAC) | | Date of Receipt |
| Mailing Address 1050 31st Street N.W. | | <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2006"/> |
| City | State | Zip Code |
| Washington | DC | 20007 |
| FEC ID number of contributing federal political committee. | | Transaction ID: SA11C.10654 |
| <input type="text" value="C C00024521"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="5000.00"/> |
| Name of Employer | Occupation | Campaign Contribution |
| Receipt For: 2006 | Election Cycle-to-Date ▼ | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | <input type="text" value="7500.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. BANK OF AMERICA CORPORATION FEDERAL POLITICAL ACTION COMMITTEE | | Date of Receipt |
| Mailing Address 100 North Tryon Street | | <input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2006"/> |
| City | State | Zip Code |
| Charlotte | NC | 28255 |
| FEC ID number of contributing federal political committee. | | Transaction ID: SA11C.10716 |
| <input type="text" value="C C00364778"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="1000.00"/> |
| Name of Employer | Occupation | Campaign Contribution |
| Receipt For: 2006 | Election Cycle-to-Date ▼ | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | <input type="text" value="1000.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. COMCAST CORP. POLITICAL ACTION COMMITTEE | | Date of Receipt |
| Mailing Address 1500 Market Street 35th Floor | | <input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2006"/> |
| City | State | Zip Code |
| Philadelphia | PA | 19102 |
| FEC ID number of contributing federal political committee. | | Transaction ID: SA11C.10722 |
| <input type="text" value="C C00248716"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="2100.00"/> |
| Name of Employer | Occupation | Campaign Contribution |
| Receipt For: 2006 | Election Cycle-to-Date ▼ | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | <input type="text" value="4600.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="8100.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

**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 / 42 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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 | |

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)
Kilpatrick for United States Congress

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. DAIMLERCHRYSLER CORPORATION POLITICAL SUPPORT COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006 |
| Mailing Address 1000 CHRYSLER DRIVE CIMS # 485-10-95 | | Transaction ID: SA11C.10709 |
| City AUBURN HILLS State MI Zip Code 48326 | FEC ID number of contributing federal political committee. C C00043687 | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | Campaign Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 7000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. DRIVE Committee | | Date of Receipt M M / D D / Y Y Y Y Y 08 / 09 / 2006 |
| Mailing Address 25 Louisiana, NW | | Transaction ID: SA11C.10537 |
| City Washington State DC Zip Code 20001 | FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 5000.00 |
| Name of Employer | Occupation | Campaign Contributin <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. DTE ENERGY CO. PAC - FEDERAL | | Date of Receipt M M / D D / Y Y Y Y Y 08 / 09 / 2006 |
| Mailing Address 2000 SECOND AVENUE 1079 WCB | | Transaction ID: SA11C.10533 |
| City DETROIT State MI Zip Code 48226 | FEC ID number of contributing federal political committee. C C00081547 | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | Campaign Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 6000.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 7000.00 |
| 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 / 42 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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 | |

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)
Kilpatrick for United States Congress

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) A. DTE ENERGY CO. PAC - FEDERAL | | Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2006 | |
| Mailing Address 2000 SECOND AVENUE 1079 WCB | | Transaction ID: SA11C.10646 | |
| City State Zip Code DETROIT MI 48226 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C C00081547 | | Campaign Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Election Cycle-to-Date ▼ 7000.00 | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) B. DTE ENERGY CO. PAC - FEDERAL | | Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006 | |
| Mailing Address 2000 SECOND AVENUE 1079 WCB | | Transaction ID: SA11C.10720 | |
| City State Zip Code DETROIT MI 48226 | Amount of Each Receipt this Period 3000.00 | | |
| FEC ID number of contributing federal political committee. C C00081547 | | Campaign Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Election Cycle-to-Date ▼ 10000.00 | | |

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) C. ELI LILLY AND COMPANY | | Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2006 | |
| Mailing Address LILLY COPORATE CENTER | | Transaction ID: SA11C.10551 | |
| City State Zip Code INDIANAPOLIS IN 46285 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C C70003629 | | Campaign Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Election Cycle-to-Date ▼ 1000.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 5000.00 |
| 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 / 42 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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 | |

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)
Kilpatrick for United States Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS POLITICAL ACTION COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y Y 09 / 21 / 2006 |
| Mailing Address 942 South Shady Grove Road | | Transaction ID: SA11C.10649 |
| City State Zip Code Memphis TN 38120 | FEC ID number of contributing federal political committee. C C00068692 | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | Campaign Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. FEDERAL NATIONAL MORTGAGE ASSOCIATION POLITICAL ACTION COMMITTEE AKA FANNIE MAE | | Date of Receipt M M / D D / Y Y Y Y Y 08 / 09 / 2006 |
| Mailing Address 3900 Wisconsin Avenue NW | | Transaction ID: SA11C.10534 |
| City State Zip Code Washington DC 20016 | FEC ID number of contributing federal political committee. C C00393520 | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | Campaign Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. FEDERAL NATIONAL MORTGAGE ASSOCIATION POLITICAL ACTION COMMITTEE AKA FANNIE MAE | | Date of Receipt M M / D D / Y Y Y Y Y 09 / 21 / 2006 |
| Mailing Address 3900 Wisconsin Avenue NW | | Transaction ID: SA11C.10653 |
| City State Zip Code Washington DC 20016 | FEC ID number of contributing federal political committee. C C00393520 | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | Campaign Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|--|---|---------|
| 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: | PAGE 17 / 42 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <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)
Kilpatrick for United States Congress

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. FORD LINCOLN-MERCURY MINORITY DEALERS ASSOCIATION POLITICAL ACTION COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y Y 09 / 13 / 2006 |
| Mailing Address 16000 W NINE MILE ROAD SUITE 603 | | Transaction ID: SA11C.10640 |
| City SOUTHFIELD State MI Zip Code 48075 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C C00324368 | | Campaign Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Occupation | Election Cycle-to-Date ▼ 1000.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Human Rights Campaign | | Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006 |
| Mailing Address 919 18th Street, NW | | Transaction ID: SA11C.11053 |
| City Washington State DC Zip Code 20006 | Amount of Each Receipt this Period 25.00 | |
| FEC ID number of contributing federal political committee. C C00235853 | | In-kind - <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Occupation | Election Cycle-to-Date ▼ 2025.00 | |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2006 |
| Mailing Address One Thomas Circle NW Suite 400 | | Transaction ID: SA11C.10691 |
| City Washington State DC Zip Code 20005 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C C00032698 | | Campaign Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Occupation | Election Cycle-to-Date ▼ 3000.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 2025.00 |
| 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 / 42 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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 | |

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)
Kilpatrick for United States Congress

A. Full Name (Last, First, Middle Initial)
KING & SPALDING NONPARTISAN COMMITTEE FOR GOOD GOVERNMENT

Mailing Address 1180 Peachtree Street

City Atlanta State GA Zip Code 30309

FEC ID number of contributing federal political committee. **C** C00204453

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2006

Transaction ID: SA11C.10662

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Lewis & Munday, P.C. Political Action Committee

Mailing Address 1300 First National Building
660 Woodward

City Detroit State MI Zip Code 48226

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 100.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: SA11C.10557

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 1550 Crystal Drive
Suite 300

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11C.10717

Amount of Each Receipt this Period
2000.00

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

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 3100.00 |
| 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 / 42 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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 | |

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)
Kilpatrick for United States Congress

A. METRO VENTURES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1209 BAGLEY

City State Zip Code
DETROIT MI 48226

FEC ID number of contributing federal political committee. **C** C00426197

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2006

Transaction ID: SA11C.10648

Amount of Each Receipt this Period
1000.00

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

B. MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 16011 NE 36th Way
Box 97017

City State Zip Code
Redmond WA 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2006

Transaction ID: SA11C.10664

Amount of Each Receipt this Period
1000.00

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

C. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATAC)

Full Name (Last, First, Middle Initial)
Mailing Address 1325 Massachusetts Ave. NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11C.10745

Amount of Each Receipt this Period
3000.00

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

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 5000.00 |
| 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 / 42 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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 | |

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)
Kilpatrick for United States Congress

A. NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1101 King Street Suite 600
Suite 600

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11C.10708

Amount of Each Receipt this Period
5000.00

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

B. PARSONS BRINCKERHOFF INC. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1401 K Street NW
Suite 701

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00287003

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 06 / 2006

Transaction ID: SA11C.10626

Amount of Each Receipt this Period
1000.00

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

C. SERVICE EMPLOYEES INTERNATIONAL UNION

Full Name (Last, First, Middle Initial)
Mailing Address 1313 L STREET NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C70003124

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
9000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11C.10719

Amount of Each Receipt this Period
5000.00

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

| | |
|--|-----------------|
| SUBTOTAL of Receipts This Page (optional) | 11000.00 |
| 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 21 / 42 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" 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 |

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)
Kilpatrick for United States Congress

A. Full Name (Last, First, Middle Initial)
SIERRA CLUB

Mailing Address 85 SECOND STREET

City State Zip Code
SAN FRANCISCO CA 94105

FEC ID number of contributing federal political committee. **C** C70001318

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 10 / 2006

Transaction ID: SA11C.10702

Amount of Each Receipt this Period
10.00

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

B. Full Name (Last, First, Middle Initial)
UNITED STATES STEEL CORPORATION PAC

Mailing Address 600 Grant Street
Room 685

City State Zip Code
Pittsburgh PA 15219

FEC ID number of contributing federal political committee. **C** C00030676

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11C.10710

Amount of Each Receipt this Period
1000.00

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

| | | |
|--|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1010.00 |
| TOTAL This Period (last page this line number only) | ▶ | 51235.00 |

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 |

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)
Kilpatrick for United States Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. 1-800 Conference | | Transaction ID: SB17.10632 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6 |
| Mailing Address PO Box 95537 | | Amount of Each Disbursement this Period 34.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Chicago State IL Zip Code 60694 | | |
| Purpose of Disbursement Conference Call 6/26/06 Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. 1-800 Conference | | Transaction ID: SB17.10668 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6 |
| Mailing Address PO Box 95537 | | Amount of Each Disbursement this Period 30.29 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Chicago State IL Zip Code 60694 | | |
| Purpose of Disbursement Conference Call 9/29/06 Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. ARA Consultants | | Transaction ID: SB17.10603 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6 |
| Mailing Address P.O.Box 39841 | | Amount of Each Disbursement this Period 8000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Redford State MI Zip Code 48239 | | |
| Purpose of Disbursement Balance Fundraising/consultant fee Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 8065.16 |
| 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 |

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)
Kilpatrick for United States Congress

| | | |
|--|--|---|
| A. AT & T Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 900 1309 City Louisville State KY Zip Code 40290-1309 Purpose of Disbursement Long Distance Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 3522 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB17.10574 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period 35.22 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | | |
|--|--|--|
| B. AT & T Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 900 1309 City Louisville State KY Zip Code 40290-1309 Purpose of Disbursement Telephone Service July 2006 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB17.10575 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period 205.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

| | | |
|--|--|---|
| C. AT & T Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 900 1309 City Louisville State KY Zip Code 40290-1309 Purpose of Disbursement Long Distance Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB17.10608 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 6 Amount of Each Disbursement this Period 30.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 271.17 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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 24 / 42

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <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 |

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)
Kilpatrick for United States Congress

| | | |
|---|--|--|
| A. AT & T Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 900 1309 City Louisville State KY Zip Code 40290-1309 Purpose of Disbursement Telephone service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB17.10641 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6 Amount of Each Disbursement this Period 190.28 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|--|

| | | |
|--|--|--|
| B. B&D Novelty Full Name (Last, First, Middle Initial) Mailing Address 243 W. Congress Suite 350 City Detroit State MI Zip Code 48226 Purpose of Disbursement Vendor Payment - key chains Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB17.10587 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 930.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

| | | |
|---|--|---|
| C. Andrea Bragg Full Name (Last, First, Middle Initial) Mailing Address 8522 Roselawn City Detroit State MI Zip Code 48204 Purpose of Disbursement Election Day expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB17.10594 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|---|

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3120.28 |
| 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 25 / 42

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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 |

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)
Kilpatrick for United States Congress

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Andrea Bragg | | Transaction ID: SB17.10645 Date of Disbursement 09 / 11 / 2006 | |
| Mailing Address 8522 Roselawn | | Amount of Each Disbursement this Period 155.86 | |
| City Detroit State MI Zip Code 48204 | Purpose of Disbursement Reimbursement for refreshments | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Cingular Wireless | | Transaction ID: SB17.10631 Date of Disbursement 08 / 11 / 2006 | |
| Mailing Address P.O. Box 8229 | | Amount of Each Disbursement this Period 80.86 | |
| City Aurora State IL Zip Code 60572-8229 | Purpose of Disbursement Cellular Phone Service | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Cingular Wireless | | Transaction ID: SB17.10642 Date of Disbursement 09 / 06 / 2006 | |
| Mailing Address P.O. Box 8229 | | Amount of Each Disbursement this Period 80.14 | |
| City Aurora State IL Zip Code 60572-8229 | Purpose of Disbursement Cellular telephone service | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type | |

| | |
|--|---------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 316.86 |
| 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 |

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)
Kilpatrick for United States Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Communications Workers of America | | Transaction ID: SB17.10585 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6 |
| Mailing Address 1415 Trumbull | | Amount of Each Disbursement this Period 470.00 |
| City Detroit State MI Zip Code 48216 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Rent - August 2006 | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Communications Workers of America | | Transaction ID: SB17.10638 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6 |
| Mailing Address 1415 Trumbull | | Amount of Each Disbursement this Period 470.00 |
| City Detroit State MI Zip Code 48216 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Rent - September 2006 | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Costco | | Transaction ID: SB17.10616 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6 |
| Mailing Address 14900 Middlebelt | | Amount of Each Disbursement this Period 279.26 |
| City Livonia State MI Zip Code 48151 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Election Day Refreshments | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1219.26 |
| 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)

PAGE 27 / 42

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <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 |

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)
Kilpatrick for United States Congress

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. National City Visa | | Transaction ID: SB17.10622 Date of Disbursement 08 / 15 / 2006 |
| Mailing Address 4653 E. Main | | Amount of Each Disbursement this Period 1587.65 |
| City Columbus State OH Zip Code 43251 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Visa Payment | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Northwest Airlines | | Transaction ID: SB17.10622.0 Date of Disbursement 08 / 15 / 2006 |
| Mailing Address 5101 Northwest Drive | | Amount of Each Disbursement this Period 133.58 |
| City St. Paul State MN Zip Code 55111 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] | |
| Purpose of Disbursement CBC Boot Camp for Sandra Heath | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Northwest Airlines | | Transaction ID: SB17.10622.1 Date of Disbursement 08 / 15 / 2006 |
| Mailing Address 5101 Northwest Drive | | Amount of Each Disbursement this Period 138.60 |
| City St. Paul State MN Zip Code 55111 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] | |
| Purpose of Disbursement CBC Boot Camp A. Kilpatrick | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1587.65 |
| 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 |

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)
Kilpatrick for United States Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Northwest Airlines | | Transaction ID: SB17.10622.2 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6 |
| Mailing Address 5101 Northwest Drive | | Amount of Each Disbursement this Period 240.58 |
| City St. Paul State MN Zip Code 55111 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement CBC Boot Conference - A. McCallister | | [MEMO ITEM] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Northwest Airlines | | Transaction ID: SB17.10622.3 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6 |
| Mailing Address 5101 Northwest Drive | | Amount of Each Disbursement this Period 228.60 |
| City St. Paul State MN Zip Code 55111 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement CBC Boot Conference | | [MEMO ITEM] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Northwest Airlines | | Transaction ID: SB17.10622.4 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6 |
| Mailing Address 5101 Northwest Drive | | Amount of Each Disbursement this Period 754.11 |
| City St. Paul State MN Zip Code 55111 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement CBC Boot Conference - C. Kilpatrick | | [MEMO ITEM] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| 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)

PAGE 29 / 42

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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 |

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)
Kilpatrick for United States Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Northwest Airlines | | Transaction ID: SB17.10622.5 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6 |
| Mailing Address 5101 Northwest Drive | | Amount of Each Disbursement this Period 7.90 |
| City St. Paul State MN Zip Code 55111 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Service Chg. P. Peoples for CBC Tunica Candidate Name | | [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. National Democratic Club | | Transaction ID: SB17.10634 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 |
| Mailing Address 30 Ivy Street, SE | | Amount of Each Disbursement this Period 467.33 |
| City Washington State DC Zip Code 20003 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Catering Services 7/13/1006 Candidate Name | | [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Sheehy Ford | | Transaction ID: SB17.10692 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6 |
| Mailing Address 5000 Auth Road | | Amount of Each Disbursement this Period 454.89 |
| City Marlow Heights State MD Zip Code 20746 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Car Repair Candidate Name | | [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 922.22 |
| 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 |

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)
Kilpatrick for United States Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Sutter's Mill | | Transaction ID: SB17.10604 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 6 |
| Mailing Address 499 South Capitol, SW | | Amount of Each Disbursement this Period 3567.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Washington State DC Zip Code 20002 | | |
| Purpose of Disbursement Services August 2006 Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Sutter's Mill | | Transaction ID: SB17.10667 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6 |
| Mailing Address 499 South Capitol, SW | | Amount of Each Disbursement this Period 3524.77 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Washington State DC Zip Code 20002 | | |
| Purpose of Disbursement Fundraising Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Transcend | | Transaction ID: SB17.10637 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 |
| Mailing Address 645 Griswold, Suite 1300 | | Amount of Each Disbursement this Period 1250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Detroit, State MI Zip Code 48226 | | |
| Purpose of Disbursement Balance Website Development Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 8342.09 |
| 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 |

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)
Kilpatrick for United States Congress

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. U.S. Postmaster | | Transaction ID: SB17.10573 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 0 6 | |
| Mailing Address 1401 W. Fort Street | | Amount of Each Disbursement this Period 40.00 | |
| City Detroit State MI Zip Code 48226 | Purpose of Disbursement Annual P.O Box fee 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 State: District: | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. U.S. Postmaster | | Transaction ID: SB17.10581 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 0 6 | |
| Mailing Address 1401 W. Fort Street | | Amount of Each Disbursement this Period 195.00 | |
| City Detroit State MI Zip Code 48226 | Purpose of Disbursement Postage Stamps 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 State: District: | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) C. U.S. Postmaster | | Transaction ID: SB17.10592 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6 | |
| Mailing Address 1401 W. Fort Street | | Amount of Each Disbursement this Period 507.00 | |
| City Detroit State MI Zip Code 48226 | Purpose of Disbursement Postage Stamps 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 State: District: | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 742.00 |
| 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)

PAGE 32 / 42

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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 |

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)
Kilpatrick for United States Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. U.S. Postmaster | | Transaction ID: SB17.10628 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6 |
| Mailing Address 1401 W. Fort Street | | Amount of Each Disbursement this Period 435.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Detroit State MI Zip Code 48226 | Purpose of Disbursement Mass mailing Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Unique Flower & Gift Shop | | Transaction ID: SB17.10644 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6 |
| Mailing Address 18415 Wyoming | | Amount of Each Disbursement this Period 91.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Detroit State MI Zip Code 48221 | Purpose of Disbursement Flowers constituent Judge Diggs Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Verizon Wireless | | Transaction ID: SB17.10633 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6 |
| Mailing Address Operations Support P.O. Box 9058 | | Amount of Each Disbursement this Period 55.04 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Dublin State OH Zip Code 43017 | Purpose of Disbursement Cellular telephone service Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 581.54 |
| 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 33 / 42

| | | | |
|--|---|--|---|
| <input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a | <input type="checkbox"/> 18 <input type="checkbox"/> 20b | <input type="checkbox"/> 19a <input type="checkbox"/> 20c | <input type="checkbox"/> 19b <input type="checkbox"/> 21 |
|--|---|--|---|

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

NAME OF COMMITTEE (In Full)
Kilpatrick for United States Congress

A. Verizon Wireless

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address: Operations Support
P.O. Box 9058

City: Dublin State: OH Zip Code: 43017

Purpose of Disbursement: Cellular Phone Service

Candidate Name: [] Category/Type: []

Office Sought: House Senate President
Disbursement For: 2006 Primary General
Other (specify) ▼

State: District: []

Transaction ID: SB17.10643
Date of Disbursement:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 9 | 0 | 6 | 2 | 0 | 6 | 6 |

Amount of Each Disbursement this Period:

| |
|-------|
| 48.27 |
|-------|

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. W.C. Screen Printing Company

Full Name (Last, First, Middle Initial)
W.C. Screen Printing Company

Mailing Address: 2281 Collingwood

City: Detroit State: MI Zip Code: 48206

Purpose of Disbursement: Vendor payment - Sunvisors campaign

Candidate Name: [] Category/Type: []

Office Sought: House Senate President
Disbursement For: 2006 Primary General
Other (specify) ▼

State: District: []

Transaction ID: SB17.10589
Date of Disbursement:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 8 | 0 | 3 | 2 | 0 | 6 | 6 |

Amount of Each Disbursement this Period:

| |
|--------|
| 375.00 |
|--------|

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. W.C. Screen Printing Company

Full Name (Last, First, Middle Initial)
W.C. Screen Printing Company

Mailing Address: 2281 Collingwood

City: Detroit State: MI Zip Code: 48206

Purpose of Disbursement: Visors/Hats campaign

Candidate Name: [] Category/Type: []

Office Sought: House Senate President
Disbursement For: 2006 Primary General
Other (specify) ▼

State: District: []

Transaction ID: SB17.10627
Date of Disbursement:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 8 | 1 | 1 | 2 | 0 | 6 | 6 |

Amount of Each Disbursement this Period:

| |
|--------|
| 425.64 |
|--------|

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

| | |
|--|-----------------|
| SUBTOTAL of Disbursements This Page (optional) | 848.91 |
| TOTAL This Period (last page this line number only) | 26017.14 |

**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 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 checked="" type="checkbox"/> 21 |

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

NAME OF COMMITTEE (In Full)
Kilpatrick for United States Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Angie Paccione for Congress | | Transaction ID: SB21.10670 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6 |
| Mailing Address PO Box 1292 | | Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Ft. Collins State CO Zip Code 80522 | Purpose of Disbursement Campaign Contribution Candidate Name Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Leonard Boswell For Congress | | Transaction ID: SB21.10694 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6 |
| Mailing Address 301 4th Street, NE | | Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Washington State DC Zip Code 20002 | Purpose of Disbursement Campaign Contributin Candidate Name Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: 7 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. CHRIS OWENS FOR CONGRESS | | Transaction ID: SB21.10577 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 6 |
| Mailing Address 328 FLATBUSH AVENUE #333 | | Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City BROOKLYN State NY Zip Code 11238 | Purpose of Disbursement Campaign Contribution Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2500.00 |
| 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)

PAGE 35 / 42

| | | | |
|------------------------------|------------------------------|------------------------------|--|
| <input 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 checked="" type="checkbox"/> 21 |

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

NAME OF COMMITTEE (In Full)
Kilpatrick for United States Congress

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) A. COMMITTEE TO BRING BACK BARON | | Transaction ID: SB21.10678 | |
| Mailing Address PO BOX 1071 | | Date of Disbursement 09 / 19 / 2006 | |
| City SEYMOUR | State IN | Zip Code 47274 | Amount of Each Disbursement this Period 1000.00 |
| Purpose of Disbursement Campaign Contribution | | Category/ Type | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Candidate Name | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: IN | District: 09 | | |

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) B. Cranley for Congress | | Transaction ID: SB21.10681 | |
| Mailing Address 37 W 7TH ST SUITE 804 | | Date of Disbursement 09 / 21 / 2006 | |
| City CINCINNATI | State OH | Zip Code 45202 | Amount of Each Disbursement this Period 1000.00 |
| Purpose of Disbursement Campaign Contribution | | Category/ Type | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Candidate Name | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: OH | District: 01 | | |

| | | | |
|--|--|--|---|
| Full Name (Last, First, Middle Initial) C. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE | | Transaction ID: SB21.10610 | |
| Mailing Address 430 South Capitol Street SE 2nd Floor | | Date of Disbursement 07 / 25 / 2006 | |
| City Washington | State DC | Zip Code 20003 | Amount of Each Disbursement this Period 20000.00 |
| Purpose of Disbursement Unlimited trans to a Nat' Party Cmtee | | Category/ Type | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: | District: | | |

| | |
|--|-----------------|
| SUBTOTAL of Disbursements This Page (optional) | 22000.00 |
| 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 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 checked="" type="checkbox"/> 21 |

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

NAME OF COMMITTEE (In Full)
Kilpatrick for United States Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE | | Transaction ID: SB21.10688 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6 |
| Mailing Address 430 South Capitol Street SE 2nd Floor | | Amount of Each Disbursement this Period 20000.00 |
| City Washington State DC Zip Code 20003 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Unlimited trans to a Nat'l Party Cmtee | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Eastside Slate | | Transaction ID: SB21.10612 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6 |
| Mailing Address 8411 E. Forest | | Amount of Each Disbursement this Period 500.00 |
| City Detroit State MI Zip Code 48214 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement GOTV Donation | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Fannie Lou Hammer PAC | | Transaction ID: SB21.10614 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6 |
| Mailing Address 19600 W. McNichols | | Amount of Each Disbursement this Period 1500.00 |
| City Detroit State MI Zip Code 48219 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Donation GOTV | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 22000.00 |
| 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)

PAGE 37 / 42

| | | | |
|------------------------------|------------------------------|------------------------------|--|
| <input 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 checked="" type="checkbox"/> 21 |

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

NAME OF COMMITTEE (In Full)
Kilpatrick for United States Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Ken Daniels | | Transaction ID: SB21.10579 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 6 |
| Mailing Address 14470 Eastburn | | Amount of Each Disbursement this Period 1000.00 |
| City Detroit State MI Zip Code 48205 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Campaign Contribution Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Giffords for Congress | | Transaction ID: SB21.10686 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6 |
| Mailing Address PO Box 27565 | | Amount of Each Disbursement this Period 1000.00 |
| City Tucson State AZ Zip Code 85726 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Campaign Contribution Candidate Name | | Category/Type |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. HOOLEY FOR CONGRESS | | Transaction ID: SB21.10697 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6 |
| Mailing Address PO BOX 2050 | | Amount of Each Disbursement this Period 1000.00 |
| City SALEM State OR Zip Code 97308 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Campaign Contribution Candidate Name | | Category/Type |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3000.00 |
| 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)

PAGE 38 / 42

| | | | |
|------------------------------|------------------------------|------------------------------|--|
| <input 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 checked="" type="checkbox"/> 21 |

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

NAME OF COMMITTEE (In Full)
Kilpatrick for United States Congress

| | | |
|---|-------------------|---|
| Full Name (Last, First, Middle Initial) A. Christine Jennings for Congress | | Transaction ID: SB21.10684 Date of Disbursement 09 / 21 / 2006 |
| Mailing Address 8211 241ST STREET EAST | | Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City MYAKKA CITY State FL Zip Code 34251 | Category/ Type | |
| Purpose of Disbursement Campaign Contribution Candidate Name | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 13 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------|---|
| Full Name (Last, First, Middle Initial) B. Kellam for Congress | | Transaction ID: SB21.10671 Date of Disbursement 09 / 19 / 2006 |
| Mailing Address PO Box 56254 PO BOX 56254 | | Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Virginia Beach State VA Zip Code 23456 | Category/ Type | |
| Purpose of Disbursement Campaign Contribution Candidate Name | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------|---|
| Full Name (Last, First, Middle Initial) C. Kilroy for Congress | | Transaction ID: SB21.10676 Date of Disbursement 09 / 21 / 2006 |
| Mailing Address 929 Harrison Ave Ste 305 | | Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Columbus State OH Zip Code 43215 | Category/ Type | |
| Purpose of Disbursement Campaign Contribution Candidate Name | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3000.00 |
| 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)

PAGE 39 / 42

| | | | |
|------------------------------|------------------------------|------------------------------|--|
| <input 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 checked="" type="checkbox"/> 21 |

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

NAME OF COMMITTEE (In Full)
Kilpatrick for United States Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. LAMPSON FOR CONGRESS | | Transaction ID: SB21.10669 Date of Disbursement 09 / 19 / 2006 |
| Mailing Address P.O. Box 21578 | | Amount of Each Disbursement this Period 1000.00 |
| City Beaumont | State TX | |
| Purpose of Disbursement Campaign Contribution | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Candidate Name | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: TX District: 02 | | Category/ Type |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. LUCAS FOR CONGRESS | | Transaction ID: SB21.10680 Date of Disbursement 09 / 19 / 2006 |
| Mailing Address PO BOX 175765 | | Amount of Each Disbursement this Period 1000.00 |
| City COVINGTON | State KY | |
| Purpose of Disbursement Campaign Contribution | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Candidate Name | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: KY District: 04 | | Category/ Type |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. MFUME FOR US SENATE | | Transaction ID: SB21.10595 Date of Disbursement 08 / 09 / 2006 |
| Mailing Address 505 PARK AVE SUITE 200 | | Amount of Each Disbursement this Period 2000.00 |
| City BALTIMORE | State MD | |
| Purpose of Disbursement Campaign Contribution | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: MD District: 03 | | Category/ Type |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4000.00 |
| 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)

PAGE 40 / 42

| | | | |
|------------------------------|------------------------------|------------------------------|--|
| <input 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 checked="" type="checkbox"/> 21 |

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

NAME OF COMMITTEE (In Full)
Kilpatrick for United States Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. The Black Slate | | Transaction ID: SB21.10600 Date of Disbursement 08 / 07 / 2006 |
| Mailing Address 729 Seward | | Amount of Each Disbursement this Period 2500.00 |
| City Detroit State MI Zip Code 48202 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Donation GOTV Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. The Jefferson Committee | | Transaction ID: SB21.10695 Date of Disbursement 09 / 26 / 2006 |
| Mailing Address 1723 Valmont Street | | Amount of Each Disbursement this Period 2000.00 |
| City New Orleans State LA Zip Code 70115 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Campaign Contribution Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. WETTERLING '06 | | Transaction ID: SB21.10673 Date of Disbursement 09 / 19 / 2006 |
| Mailing Address P.O. Box 2295 | | Amount of Each Disbursement this Period 1000.00 |
| City St. Cloud State MN Zip Code 56302 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Campaign Contribution Candidate Name | | Category/Type |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 5500.00 |
| 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)

PAGE 41 / 42

| | | | | | | | |
|--------------------------|-----|--------------------------|-----|--------------------------|-----|-------------------------------------|-----|
| <input 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 checked="" type="checkbox"/> | 21 |

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

NAME OF COMMITTEE (In Full)
Kilpatrick for United States Congress

Full Name (Last, First, Middle Initial)
A. Wilmac Tours

Mailing Address 122000 Greenfield

City State Zip Code
Detroit MI 48235

Purpose of Disbursement
Donation Youth Transportation

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21.10584
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

62500.00

Form/Schedule: **F3A**

Transaction ID:

This memorandum is submitted by the Committee Treasurer in response to the letter of the FEC dated February 12, 2007, with respect to the Committee's amended October Quarterly Report (7/20/06 - 9/30/06). 1. The discrepancies in the figures for the Summary and Detailed Summary Page were previously corrected by filing of an Amended October (2006) Quarterly Report. 2. The aggregate election cycle -to-date totals for DTE Energy Co. PAC, Human Rights Campaign Fund and the Federal National Mortgage Association PAC have been corrected by the merging of duplicate entries in our data base. 3. The description for the purpose of a Committee's contribution to the Democratic Congressional Campaign Committee has been changed from 'Annual Dues' to 'Unlimited transfer to a National Party Committee'. No other changes were made to the subject Amended October Quarterly Report (2006).