

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

Coble for Congress

ADDRESS (number and street) PO Box 1177

Check if different than previously reported. (ACC)

Greensboro NC 27402

2. **FEC IDENTIFICATION NUMBER** C00198796

IS THIS REPORT NEW (N) **OR** AMENDED (A)

CITY STATE ZIP CODE STATE DISTRICT

NC 6

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 04 01 2007 through 06 30 2007

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

Type or Print Name of Treasurer William H. Knight

Signature of Treasurer Electronically Filed by William H. Knight Date 09 18 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

Coble for Congress

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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)).....	25600.00	91690.25
(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)).....	25600.00	91690.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	29739.50	91747.64
(b) Total Offsets to Operating Expenditures (from Line 14).....	103.50	103.50
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	29636.00	91644.14
8. Cash on Hand at Close of Reporting Period (from Line 27).....	625746.06	
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

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Coble for Congress

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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).....

2400.00

16400.00

(ii) Unitemized.....

100.00

342.25

(iii) TOTAL of contributions

2500.00

16742.25

from individuals..... ▶

0.00

98.00

(b) Political Party Committees.....

23100.00

74850.00

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS (other than loans)

25600.00

91690.25

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

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

0.00

0.00

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

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

103.50

103.50

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0.00

22207.21

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

25703.50

114000.96

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	29739.50	91747.64
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
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.....	75000.00	130000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	104739.50	221747.64

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	704782.06
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	25703.50
25. SUBTOTAL (add Line 23 and Line 24).....	730485.56
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	104739.50
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	625746.06

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)
(Millionaires' Amendment)

Name of Candidate		Candidate ID Number	
John Howard Coble		H4NC06011	
Name of Principal Campaign Committee		Committee ID Number	
Coble for Congress		C C00198796	
Committee Address PO Box 1177			
City	State	ZIP	
Greensboro	NC	27402-	
Report Covering Period (check one) <input checked="" type="checkbox"/> through June 30, or <input type="checkbox"/> through December 31 of the year preceding the year of the general election			
	Primary	General	
1. Gross receipts of authorized committees	111480.96	2000.00	
2. Aggregate amount of contributions from personal funds of the candidate	0.00	0.00	
3. Gross receipts minus the candidate's personal contributions	111480.96	2000.00	

**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 6 / 22
	<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)
Coble for Congress

A. Full Name (Last, First, Middle Initial)
Am. Assoc. for Justice PAC(formerly ATLA)
Mailing Address 1050 31st. St NW

City State Zip Code
Washington DC 20007

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2007

Transaction ID: 70703.C13889

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Amer. Hospital Assoc. PAC
Mailing Address 325 Seventh Street

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 17 / 2007

Transaction ID: 70626.C13880

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
American Bankers Assoc PAC
Mailing Address 1120 Connecticut Ave NW

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2007

Transaction ID: 70703.C13890

Amount of Each Receipt this Period
1000.00

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

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 7 / 22
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Coble for Congress

A. Full Name (Last, First, Middle Initial)
American Moving & Storage Assoc. PAC
Mailing Address 1611 Duke St
City Alexandria State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 0 7
Transaction ID: 70626.C13875
Amount of Each Receipt this Period
500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
AT&T PAC
Mailing Address 32 Ave. Of The Americas
City New York State NY Zip Code 10013
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 0 7
Transaction ID: 70703.C13891
Amount of Each Receipt this Period
2000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Auction Market PAC, Chicago Board Trade
Mailing Address 141 W Jackson Blvd.
City Chicago State IL Zip Code 60604
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 0 7
Transaction ID: 70626.C13876
Amount of Each Receipt this Period
1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 22
	<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	

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NAME OF COMMITTEE (In Full)
Coble for Congress

A. Full Name (Last, First, Middle Initial)
Boeing PAC

Mailing Address 1200 Wilson Blvd

City State Zip Code
Arlington VA 22209

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 03 / 2007

Transaction ID: 70626.C13877

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Federal Express PAC

Mailing Address 2005 Corporate Ave.

City State Zip Code
Memphis TN 38132

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2007

Transaction ID: 70703.C13896

Amount of Each Receipt this Period
1500.00

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

C. Full Name (Last, First, Middle Initial)
General Dynamics PAC

Mailing Address 3190 Fairview Park Drive, #100

City State Zip Code
Falls Church VA 22042

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2007

Transaction ID: 70703.C13897

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 22
	(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

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NAME OF COMMITTEE (In Full)
Coble for Congress

A. Full Name (Last, First, Middle Initial)
Goodyear PAC

Mailing Address 1144 E. Market Street

City Akron State OH Zip Code 44316

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 10 / 2007

Transaction ID: 70626.C13879

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Limited Brands PAC

Mailing Address Three Limited Parkway

City Columbus State OH Zip Code 43230

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 28 / 2007

Transaction ID: 70703.C13892

Amount of Each Receipt this Period
5000.00

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

C. Full Name (Last, First, Middle Initial)
Natl Assoc. of Broadcasters PAC

Mailing Address 1771 NW N Street

City Washington State DC Zip Code 20036

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

Name of Employer Natl Assoc. of Broadcasters Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 29 / 2007

Transaction ID: 70703.C13898

Amount of Each Receipt this Period
1000.00

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

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:	PAGE 10 / 22
	(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

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NAME OF COMMITTEE (In Full)
Coble for Congress

A. Full Name (Last, First, Middle Initial)
Natl. Beer Wholesalers Assoc. PAC

Mailing Address 1100 S Washington Street

City State Zip Code
Alexandria VA 22314- 449

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2007

Transaction ID: 70703.C13893

Amount of Each Receipt this Period
1500.00

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

B. Full Name (Last, First, Middle Initial)
Procter & Gamble PAC

Mailing Address 1 Procter & Gamble Plaza

City State Zip Code
Cincinnati OH 45202

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼
2008 General

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2007

Transaction ID: 70626.C13878

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Realtors PAC

Mailing Address 430 N. Michigan Ave.

City State Zip Code
Chicago IL 60611

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2007

Transaction ID: 70703.C13894

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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

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

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

FOR LINE NUMBER: PAGE 11 / 22
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Coble for Congress

A. Full Name (Last, First, Middle Initial)
Sharp Pencil PAC

Mailing Address 2875 Towerview Rd, Suite 1000

City Herndon State VA Zip Code 20171

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 100.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 8 / 2 0 0 7

Transaction ID: 70626.C13886

Amount of Each Receipt this Period
 100.00

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

B. Full Name (Last, First, Middle Initial)
UPSPAC

Mailing Address 316 Pennsylvania Ave., SE

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 70626.C13884

Amount of Each Receipt this Period
 500.00

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

C. Full Name (Last, First, Middle Initial)
USTeam PAC

Mailing Address 100 West Putman Ave.

City Greenwich State CT Zip Code 06830

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 70626.C13882

Amount of Each Receipt this Period
 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 1600.00

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 12 / 22	
	(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

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NAME OF COMMITTEE (In Full)
Coble for Congress

A. Full Name (Last, First, Middle Initial)
Verizon PAC

Mailing Address 1300 I Street, NW. Suite 400 W

City	State	Zip Code
Washington	DC	20005

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

Name of Employer	Occupation
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2007

Transaction ID: 70703.C13899

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	23100.00

**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 13 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Coble for Congress

A. Full Name (Last, First, Middle Initial)
John B. Blount

Mailing Address 818 Connecticut Ave. NW Suite 1100

City Washington State DC Zip Code 20006

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

Name of Employer The National Group Occupation Lobbyist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
06 / 28 / 2007

Transaction ID: 70703.C13888

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Jack ORourke

Mailing Address 11028 Stanmore Drive

City Potomac State MD Zip Code 20854

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

Name of Employer ORourke Law Offices Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 650.00

Date of Receipt
06 / 25 / 2007

Transaction ID: 70626.C13887

Amount of Each Receipt this Period
650.00

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

6-25-07 DC Fundraiser

C. Full Name (Last, First, Middle Initial)
Danna Rocque

Mailing Address 970 Diamondhead Dr. S

City Pinehurst State NC Zip Code 28374

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

Name of Employer Housewife Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
06 / 29 / 2007

Transaction ID: 70703.C13895

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► 1400.00

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 14 / 22
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Coble for Congress

A. Full Name (Last, First, Middle Initial)
Russ Wapensky

Mailing Address 1276 N. Wayne St.

City State Zip Code
Arlington VA 22201

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

Name of Employer Occupation
The Leonard Group VP

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	4	/	2	0	0	7

Transaction ID: 70626.C13881

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	2400.00

**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)

PAGE 15 / 22

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

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NAME OF COMMITTEE (In Full)
Coble for Congress

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: 70626.E2428 Date of Disbursement
Mailing Address 101 W Friendly Ave		<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2007"/>
City Greensboro	State NC	Zip Code 27401-
Purpose of Disbursement MAR. W/H TAX	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="2463.24"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	MAR. W/H TAX
State: District:		

Full Name (Last, First, Middle Initial) B. Bank of America		Transaction ID: 70626.E2429 Date of Disbursement
Mailing Address 101 W Friendly Ave		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2007"/>
City Greensboro	State NC	Zip Code 27401-
Purpose of Disbursement 940 QRTLY. TAX	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="56.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	940 QRTLY. TAX
State: District:		

Full Name (Last, First, Middle Initial) C. Bank of America		Transaction ID: 70626.E2435 Date of Disbursement
Mailing Address 101 W Friendly Ave		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2007"/>
City Greensboro	State NC	Zip Code 27401-
Purpose of Disbursement APR. W/H TAX	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="1945.96"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	APR. W/H TAX
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4465.20"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 16 / 22

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

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NAME OF COMMITTEE (In Full)
Coble for Congress

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: 70626.E2443	
Mailing Address 101 W Friendly Ave		Date of Disbursement 06 / 01 / 2007	
City Greensboro	State NC	Zip Code 27401-	Amount of Each Disbursement this Period 2473.10
Purpose of Disbursement MAY W/H TAX	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		MAY W/H TAX
State: District:	Category/Type		

Full Name (Last, First, Middle Initial) B. Bank of America		Transaction ID: 70626.E2430	
Mailing Address PO Box 15731		Date of Disbursement 04 / 02 / 2007	
City Wilmington	State DE	Zip Code 19886-	Amount of Each Disbursement this Period 982.43
Purpose of Disbursement 3-14-07 FUNDRAISER; MSN	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		3-14-07 FUNDRAISER; MSN
State: District:	Category/Type		

Full Name (Last, First, Middle Initial) C. Bank of America		Transaction ID: 70626.E2436	
Mailing Address PO Box 15731		Date of Disbursement 05 / 02 / 2007	
City Wilmington	State DE	Zip Code 19886-	Amount of Each Disbursement this Period 76.65
Purpose of Disbursement POSTAGE;MSN	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		POSTAGE;MSN
State: District:	Category/Type		

SUBTOTAL of Disbursements This Page (optional)	3532.18
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 22

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

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NAME OF COMMITTEE (In Full)
Coble for Congress

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: 70626.E2445 Date of Disbursement
Mailing Address PO Box 15731		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="29"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="07"/> <input type="text" value="07"/>
City Wilmington	State DE	Zip Code 19886-
Purpose of Disbursement POSTAGE;MSN	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="210.22"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	POSTAGE;MSN
State: District:		

Full Name (Last, First, Middle Initial) B. Aristotle International Inc.		Transaction ID: 70626.E2441 Date of Disbursement
Mailing Address 205 Pennsylvania Ave., SE		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="23"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="07"/> <input type="text" value="07"/>
City Washington	State DC	Zip Code 20003-
Purpose of Disbursement SOFTWARE SUPPORT	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="3250.00"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SOFTWARE SUPPORT
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Transaction ID: 70626.E2434 Date of Disbursement
Mailing Address PO Box 70529		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="07"/> <input type="text" value="07"/>
City Charlotte	State NC	Zip Code 28272-
Purpose of Disbursement PHONES	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="299.91"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PHONES
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3760.13"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 22

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

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NAME OF COMMITTEE (In Full)
Coble for Congress

<p>A. AT&T</p> <p>Full Name (Last, First, Middle Initial) Mailing Address PO Box 70529</p>		<p>Transaction ID: 70626.E2442 Date of Disbursement 06 / 12 / 2007</p>
<p>City Charlotte State NC Zip Code 28272-</p>	<p>Purpose of Disbursement PHONES</p>	<p>Amount of Each Disbursement this Period 296.83</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>PHONES</p>

<p>B. BellSouth</p> <p>Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 70529</p>		<p>Transaction ID: 70626.E2431 Date of Disbursement 04 / 16 / 2007</p>
<p>City Charlotte State NC Zip Code 28272-</p>	<p>Purpose of Disbursement PHONES</p>	<p>Amount of Each Disbursement this Period 297.33</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>PHONES</p>

<p>C. Hurseys Bar-B-Q</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 1834 S. Church St.</p>		<p>Transaction ID: 70626.E2437 Date of Disbursement 05 / 14 / 2007</p>
<p>City Burlington State NC Zip Code 27215-</p>	<p>Purpose of Disbursement 3-14-07DC FUNDRAISER</p>	<p>Amount of Each Disbursement this Period 2802.19</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>3-14-07DC FUNDRAISER</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>3396.35</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 22

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

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NAME OF COMMITTEE (In Full)
Coble for Congress

Full Name (Last, First, Middle Initial) A. NC Dept. of Revenue		Transaction ID: 70626.E2432 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address PO Box 2500		Amount of Each Disbursement this Period 430.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Raleigh State NC Zip Code 27640-	Purpose of Disbursement MAR. TAX Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	MAR. TAX

Full Name (Last, First, Middle Initial) B. NC Dept. of Revenue		Transaction ID: 70626.E2438 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address PO Box 2500		Amount of Each Disbursement this Period 370.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Raleigh State NC Zip Code 27640-	Purpose of Disbursement APR. W/H TAX Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	APR. W/H TAX

Full Name (Last, First, Middle Initial) C. NC Dept. of Revenue		Transaction ID: 70626.E2446 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 7
Mailing Address PO Box 2500		Amount of Each Disbursement this Period 469.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Raleigh State NC Zip Code 27640-	Purpose of Disbursement MAY TAX Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	MAY TAX

SUBTOTAL of Disbursements This Page (optional) ▶	1269.00
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 20 / 22

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

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NAME OF COMMITTEE (In Full)
Coble for Congress

Full Name (Last, First, Middle Initial) A. Jack ORourke		Transaction ID: 70626.C13887IK Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 7
Mailing Address 11028 Stanmore Drive		Amount of Each Disbursement this Period 650.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Potomac State MD Zip Code 20854-	Purpose of Disbursement 6-25-07 DC FUNDRAISER Candidate Name <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	IN KIND: 6-25-07 DC FUNDRAISER

Full Name (Last, First, Middle Initial) B. Anne Rosenthal		Transaction ID: 70626.E2439 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 14 Piccadilly Circle		Amount of Each Disbursement this Period 3812.02 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Greensboro State NC Zip Code 27410-	Purpose of Disbursement APR. SALARY Candidate Name <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	APR. SALARY

Full Name (Last, First, Middle Initial) C. Anne Rosenthal		Transaction ID: 70626.E2448 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7
Mailing Address 14 Piccadilly Circle		Amount of Each Disbursement this Period 4488.45 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Greensboro State NC Zip Code 27410-	Purpose of Disbursement MAY SALARY Candidate Name <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	MAY SALARY

SUBTOTAL of Disbursements This Page (optional) ▶	8950.47
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Coble for Congress

Full Name (Last, First, Middle Initial) A. Anne Rosenthal		Transaction ID: 70703.E2449 Date of Disbursement 06 / 29 / 2007	
Mailing Address 14 Piccadilly Circle		Amount of Each Disbursement this Period 4061.17	
City Greensboro State NC Zip Code 27410-	Purpose of Disbursement JUNE SALARY	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	JUNE SALARY	

Full Name (Last, First, Middle Initial) B. Sharrard McGee and Co.		Transaction ID: 70626.E2440 Date of Disbursement 05 / 09 / 2007	
Mailing Address 701 Green Valley Road		Amount of Each Disbursement this Period 305.00	
City Greensboro State NC Zip Code 27408-	Purpose of Disbursement TAX PREP.	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	TAX PREP.	

SUBTOTAL of Disbursements This Page (optional) ►

4366.17

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

29739.50

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

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

FOR LINE NUMBER:
(check only one)

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<input 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

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NAME OF COMMITTEE (In Full)
Coble for Congress

A. Full Name (Last, First, Middle Initial)
NRCC

Mailing Address 320 First Street, SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
TRANSFER CAMPAIGN FUNDS-PRES. DINNE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 70626.E2447

Date of Disbursement

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
0	5		2	9		2	0	0	7

Amount of Each Disbursement this Period

75000.00

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

SUBTOTAL of Disbursements This Page (optional) ►

75000.00

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

75000.00