



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Friends of John Barrow

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	222010.75	824017.76
(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)).....	222010.75	824017.76
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	242378.51	439571.70
(b) Total Offsets to Operating Expenditures (from Line 14).....	68.45	151.45
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	242310.06	439420.25
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	413557.66	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	38929.27	

**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  
Friends of John Barrow

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	4

**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

	129932.75	638936.75
--	-----------	-----------

(i) Itemized (use Schedule A).....	14078.00	58776.15
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(ii) Unitemized.....		
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(iii) TOTAL of contributions from individuals..... ▶	144010.75	697712.90
------------------------------------------------------	-----------	-----------

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

(b) Political Party Committees.....		
-------------------------------------	--	--

(c) Other Political Committees (such as PACS).....	78000.00	125967.00
----------------------------------------------------	----------	-----------

(d) The Candidate.....	0.00	337.86
------------------------	------	--------

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	222010.75	824017.76
--------------------------------------------------------------------------------------	-----------	-----------

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
-----------------------------------------------------	------	------

13. LOANS

(a) Made or Guaranteed by the Candidate.....	0.00	25000.00
----------------------------------------------	------	----------

(b) All Other Loans.....	0.00	0.00
--------------------------	------	------

(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	25000.00
------------------------------------------------	------	----------

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	68.45	151.45
---------------------------------------------------------------------	-------	--------

15. OTHER RECEIPTS (Dividends, Interest, etc.).....	845.24	3957.15
-----------------------------------------------------	--------	---------

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	222924.44	853126.36
-----------------------------------------------------------------------------------------------------	-----------	-----------

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	242378.51	439571.70
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.....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	242378.51	439571.70

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	433011.73
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	222924.44
25. SUBTOTAL (add Line 23 and Line 24).....	655936.17
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	242378.51
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	413557.66

# 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 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Gilbert T. Adams</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 4
Mailing Address 1855 Calder Avenue P.O. Drawer 3688		Transaction ID: C30951
City State Zip Code Beaumont TX 77704-3688	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self-Employed Occupation Self-Employed Attorney	Election Cycle-to-Date 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Amount of Each Receipt this Period 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Robert Altman</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 4
Mailing Address 235 Peachtree Street, N.E. 600 North Tower		Transaction ID: C31107
City State Zip Code Atlanta GA 30303	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self-employed Occupation Self-employed Attorney	Election Cycle-to-Date 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Amount of Each Receipt this Period 250.00	

Full Name (Last, First, Middle Initial) <b>C. Pablo Alvarado</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 4
Mailing Address 311 N. Randolph Dr.		Transaction ID: C30785
City State Zip Code Dallas TX 75211	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self-employed Occupation Self-employed Attorney	Election Cycle-to-Date 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Amount of Each Receipt this Period 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2250.00
<b>TOTAL</b> 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 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A.</b> Lawrence A. Anderson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 4
Mailing Address 1705 41st Street South P.O. Box 2608		<b>Transaction ID:</b> C30924
City State Zip Code Great Falls MT 59405	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Self-employed Attorney	Election Cycle-to-Date 500.00	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Fredric Andes		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 4
Mailing Address One North Wacker Drive Suite 4400		<b>Transaction ID:</b> C31255
City State Zip Code Chicago IL 60606	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Barnes & Thornburg Attorney	Election Cycle-to-Date 500.00	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Richard H. Andre		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 4
Mailing Address 4601 Vermack Place		<b>Transaction ID:</b> C31259
City State Zip Code Atlanta GA 30338	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Andre & Blaustein, LLP Attorney	Election Cycle-to-Date 250.00	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> 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 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A.</b> Libero Andreotti		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2004	
Mailing Address 65 Rue du Fanbourg		Transaction ID: C31004	
City State Zip Code Paris FR 75009	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Georgia Tech Professor	Election Cycle-to-Date 1000.00		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B.</b> Allan Arffa		Date of Receipt M M / D D / Y Y Y Y 06 / 07 / 2004	
Mailing Address Paul Weiss Rifkind Wharton & Garri 1285 Avenue of the Americas		Transaction ID: C31018	
City State Zip Code New York NY 10019	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Paul Weiss Rifkind Wharton & Garri Attorney	Election Cycle-to-Date 250.00		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C.</b> Benjamin Barkley		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2004	
Mailing Address 952 Virginia Circle NE		Transaction ID: C30958	
City State Zip Code Atlanta GA 30306	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Kilpatrick Stockton Attorney	Election Cycle-to-Date 500.00		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1000.00
<b>TOTAL</b> 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 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mr. Stacy Barnett

Mailing Address 181 East Main Street

City State Zip Code  
Canton GA 30114

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

Name of Employer Occupation  
Barnett Law Firm P.C. Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2004

**Transaction ID:** C31011

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Joe Barrow

Mailing Address 2234 Cohen Street

City State Zip Code  
Savannah GA 31410

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

Name of Employer Occupation  
Barrow and Ballew Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

750.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2004

**Transaction ID:** C31237

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Carlos Batara

Mailing Address 1706 5th Avenue Suite 104

City State Zip Code  
San Diego CA 92101

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

Name of Employer Occupation  
Self-employed Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 28 / 2004

**Transaction ID:** C31183

Amount of Each Receipt this Period  
2000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Ron Bates

Mailing Address 125 Richard Way

City Athens State GA Zip Code 30605

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

Name of Employer Babies Can't Wait Occupation Social Worker

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2004

Transaction ID: C31118

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Larry Baumwald

Mailing Address 122 Bramford Place

City Athens State GA Zip Code 30606

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 16 / 2004

Transaction ID: C31083

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. Steven L. Beard

Mailing Address 324 Cherokee Street

City Marietta State GA Zip Code 30060

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

Name of Employer Steven L. Beard, P.C. Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 01 / 2004

Transaction ID: C31001

Amount of Each Receipt this Period  
250.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> 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 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Charles A. Beaumont

Mailing Address 150 Westview Drive

City Athens State GA Zip Code 30606

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2004

Transaction ID: C31176

Amount of Each Receipt this Period  
150.00

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

**B.** Full Name (Last, First, Middle Initial)  
Bruce David Becker

Mailing Address 3006 NW Chapin Drive

City Portland State OR Zip Code 97229

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2004

Transaction ID: C31064

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. John C. Bell, Jr.

Mailing Address 945 Broad Street, Third Floor  
P.O. Box 1547

City Augusta State GA Zip Code 30903-1547

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

Name of Employer Bell, James & Bentley Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 999.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2004

Transaction ID: C31163

Amount of Each Receipt this Period  
999.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1399.00
<b>TOTAL</b> 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 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Paul R. Bennett		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 4	
Mailing Address 812 Broadway P.O. Box 11		Transaction ID: C30954	
City State Zip Code Columbus GA 31902		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Agnew, Schlam & Bennett, P.C.	Occupation Attorney		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Terrell Benton		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 4	
Mailing Address 679 Hill Street		Transaction ID: C31133	
City State Zip Code Athens GA 30606		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Hall, Booth, Small & Slover	Occupation Attorney		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Frederick S. Bergen		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 4	
Mailing Address 123 East Charlton Street		Transaction ID: C31084	
City State Zip Code Savannah GA 31401		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Bergen and Bergen	Occupation Attorney		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Frederick S. Bergen

Mailing Address 123 East Charlton Street

City Savannah State GA Zip Code 31401

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

Name of Employer: Bergen and Bergen Occupation: Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt: 06 / 30 / 2004

Transaction ID: C31332

Amount of Each Receipt this Period: 250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Michael Berlon

Mailing Address 3700 Crestwood Pkwy Suite 1080

City Duluth State GA Zip Code 30096

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

Name of Employer: Self-employed Occupation: Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 05 / 12 / 2004

Transaction ID: C30941

Amount of Each Receipt this Period: 250.00

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

**C.** Full Name (Last, First, Middle Initial)  
George Berman

Mailing Address 22 Ravine Road

City Winchester State MA Zip Code 01890

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

Name of Employer: Peabody & Arnold Occupation: Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt: 06 / 16 / 2004

Transaction ID: C31101

Amount of Each Receipt this Period: 100.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Richard F. Bernstein

Mailing Address 521 Fifth Avenue

City State Zip Code  
New York NY 10175

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

Name of Employer Self-employed Occupation  
Self-employed Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

500.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2004

Transaction ID: C30928

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Roger Bernstein

Mailing Address 50 W 96th Street, Apt. 9A

City State Zip Code  
New York NY 10025

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

Name of Employer Self-employed Occupation  
Self-employed Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2004

Transaction ID: C31160

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Edward E. Best, Jr.

Mailing Address 101 Moss Side Dr.

City State Zip Code  
Athens GA 30607

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

Name of Employer Retired Occupation  
Retired Retired

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

950.00

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2004

Transaction ID: C31078

Amount of Each Receipt this Period  
250.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Gary L. Betow

Mailing Address 321 South Boston Avenue

City State Zip Code  
Tulsa OK 74103

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

Name of Employer Occupation  
Crowe & Dunlevy Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 18 / 2004

**Transaction ID:** C31128

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gary Blasingame

Mailing Address P.O. Box 8032

City State Zip Code  
Athens GA 30601

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

Name of Employer Occupation  
Blasingame, Burch, Garrard, Bryant Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 10 / 2004

**Transaction ID:** C30934

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
William H. Bonner

Mailing Address 530 Riverview Road

City State Zip Code  
Athens GA 30606

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 23 / 2004

**Transaction ID:** C31151

Amount of Each Receipt this Period  
250.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> 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 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Sharon K. Boston

Mailing Address 255 S. Church Street

City Athens State GA Zip Code 30605

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

Name of Employer Law Office of J. Philip Boston Occupation Office Manager

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2004

Transaction ID: C31228

Amount of Each Receipt this Period  
260.00

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

**B.** Full Name (Last, First, Middle Initial)  
Karen R. Bottar

Mailing Address 172 Cotton Street

City Newton State MA Zip Code 02458

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

Name of Employer Brown Brothers Harriman & Co. Occupation Investment Manager

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 26 / 2004

Transaction ID: C30880

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Louise Boyce

Mailing Address 330 Beechwood Drive

City Athens State GA Zip Code 30606

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 07 / 2004

Transaction ID: C31024

Amount of Each Receipt this Period  
100.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>610.00</b>
<b>TOTAL</b> 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 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Ruth Bracewell

Mailing Address 611 N. Main Street

City Madison State GA Zip Code 30650

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

Name of Employer Delta Airlines Occupation Flight Attendant

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2004

Transaction ID: C31261

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Alex Bransford

Mailing Address 148 Westminster Drive, NE Suite 2800

City Atlanta State GA Zip Code 30309-4528

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

Name of Employer Kilpatrick Stockton Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 10 / 2004

Transaction ID: C30936

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Robert Clifton Burns

Mailing Address 1420 N Street, NW Unit 812

City Washington State DC Zip Code 20005

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

Name of Employer Powell Goldstein Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 07 / 2004

Transaction ID: C31034

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mr. Walter H. Burt, III

Mailing Address P.O. Box 2575

City Albany State GA Zip Code 31702-2575

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

Name of Employer Burt & Swan Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

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

Transaction ID: C30929

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Robert Joseph Butler

Mailing Address 12785 Misty Creek Lane

City Fairfax State VA Zip Code 22033

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

Name of Employer Wiley Rein & Fielding Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 4

Transaction ID: C31045

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. Thomas M. Byrne

Mailing Address 892 Plymouth Road

City Atlanta State GA Zip Code 30306

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

Name of Employer Sutherland Asbill & Brennan, LLP Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 4

Transaction ID: C31048

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> 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 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Ricardo G. Cedillo

Mailing Address 755 E. Mulberry Avenue

City San Antonio State TX Zip Code 78212

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

Name of Employer Davis, Cedillo & Mendoza Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

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

Transaction ID: C30946

Amount of Each Receipt this Period  
 2000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Ricardo G. Cedillo

Mailing Address 755 E. Mulberry Avenue

City San Antonio State TX Zip Code 78212

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

Name of Employer Davis, Cedillo & Mendoza Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

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

Transaction ID: C30945

Amount of Each Receipt this Period  
 2000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Lisa D. Cheeley

Mailing Address 435 Old Homestead Trail

City Duluth State GA Zip Code 30097

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: C30979

Amount of Each Receipt this Period  
 2000.00

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: (check only one)	PAGE 19 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. C. Andrew Childers</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 4	
Mailing Address 7 Lumpkin St.		Transaction ID: C30920	
City Lawrenceville	State GA	Amount of Each Receipt this Period 500.00	
Zip Code 30045		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
FEC ID number of contributing federal political committee. C			
Name of Employer Schleuter, Buck & Childers	Occupation Attorney		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Nickolas P. Chilivis</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 4	
Mailing Address 3127 Maple Drive, N.E.		Transaction ID: C30839	
City Atlanta	State GA	Amount of Each Receipt this Period 250.00	
Zip Code 30305		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
FEC ID number of contributing federal political committee. C			
Name of Employer Chivilis, Cochran, Larkins & Bever	Occupation Attorney		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. John Christopher Clark</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4	
Mailing Address 1001 American Federal Building 544 Mulberry Street		Transaction ID: C31221	
City Macon	State GA	Amount of Each Receipt this Period 250.00	
Zip Code 31201-2774		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
FEC ID number of contributing federal political committee. C			
Name of Employer O'Neal, Brown & Clark	Occupation Attorney		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> 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 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Sally Wyche Coenen

Mailing Address 760 Rambling Road

City Athens State GA Zip Code 30606

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2004

Transaction ID: C31051

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Catherine H. Coleman

Mailing Address 14963 Altata Drive

City Pacific Palisades State CA Zip Code 90272

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

Name of Employer University of Southern California Occupation Law Professor

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 26 / 2004

Transaction ID: C30884

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Wilbur O Colom

Mailing Address 200 6th Street North, Suite 102  
P.O. Box 866

City Columbus State MS Zip Code 39703

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2004

Transaction ID: C31289

Amount of Each Receipt this Period  
2000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mr. Cale H. Conley

Mailing Address 4400 Peachtree Road, NE

City Atlanta State GA Zip Code 30319

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

Name of Employer Conley, Sacks & Griggs LLP Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

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

Transaction ID: C30889

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Marlo Cooper

Mailing Address 25 Earlymorn

City Irvine State CA Zip Code 92614

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 3 / 2 0 0 4

Transaction ID: C31157

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
David Cox

Mailing Address 508 Scott Drive, Room 339

City Scott Air Force Ba State IL Zip Code 62225

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

Name of Employer U.S. Transportation Command Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C30914

Amount of Each Receipt this Period  
250.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harold M. Crow

Mailing Address 575 Fortson Road

City Athens State GA Zip Code 30606

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

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

**Transaction ID:** C30961

Amount of Each Receipt this Period  
 100.00

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

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

Mailing Address 335 Crystal Court

City Athens State GA Zip Code 30606

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

Name of Employer UGA Occupation Dean - College of Environment and Design

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 1 0 / 2 0 0 4

**Transaction ID:** C31057

Amount of Each Receipt this Period  
 600.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. William T. Daniel, Jr.

Mailing Address 22 Mulberry Bluff Dr

City Savannah State GA Zip Code 31406

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

Name of Employer Team Vaden Imports, Inc. Occupation Auto Dealer

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

**Transaction ID:** C35192

Amount of Each Receipt this Period  
 500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Ms. Lee Beauchamp Dauchy</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 4	
Mailing Address 1301 N. Madison		Transaction ID: C30797	
City Albany	State GA	Amount of Each Receipt this Period 2000.00	
Zip Code 31707		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Beauchamp & Associates	Occupation Attorney		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B. Jill Dawson</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 4	
Mailing Address 290 Lullwater Road		Transaction ID: C31106	
City Athens	State GA	Amount of Each Receipt this Period 250.00	
Zip Code 30606		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer ACC Board of Education	Occupation Teacher		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Virginia Day</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 4	
Mailing Address 125 Jennings Mill Parkway Apt. 6105		Transaction ID: C31016	
City Athens	State GA	Amount of Each Receipt this Period 250.00	
Zip Code 30606		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer St. Mary's	Occupation VP Mission Services		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2500.00
<b>TOTAL</b> 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 24 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Don S. DeAmicis

Mailing Address One International Place  
Ropes & Gray

City Boston State MA Zip Code 02110

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

Name of Employer Ropes & Gray Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 6 / 2 0 0 4

Transaction ID: C30871

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Dr. Edward Dempsey

Mailing Address 2 Tanglewood Court

City Athens State GA Zip Code 30606

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

Name of Employer Self Employed Occupation Doctor

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: C30938

Amount of Each Receipt this Period  
750.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Jean Herrin deVegter

Mailing Address 2315 Salcedo Avenue

City Savannah State GA Zip Code 31406

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

Name of Employer Self-employed Occupation Homemaker

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 1 / 2 0 0 4

Transaction ID: C31073

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **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 25 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mr. David Herschel Dickey

Mailing Address Oliver, Maner & Gray  
218 W. State St.

City Savannah State GA Zip Code 31412

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

Name of Employer Oliver, Maner & Gray Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2004

Transaction ID: C31167

Amount of Each Receipt this Period  
100.00

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

**B.** Full Name (Last, First, Middle Initial)  
Paul A. Dietrick

Mailing Address 3490 Piedmont Road, N.E.  
Suite 1200

City Atlanta State GA Zip Code 30305

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

Name of Employer Dietrick, Eveans, Scholz & William Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2004

Transaction ID: C30986

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Penn Dodson

Mailing Address 150 East Washington St

City Athens State GA Zip Code 30601

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

Name of Employer Dodson And Dodson Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2004

Transaction ID: C30944

Amount of Each Receipt this Period  
125.00

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

\* In-Kind: Savannah Trip Fuel expenses

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>475.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Penn Dodson

Mailing Address 150 East Washington St

City Athens State GA Zip Code 30601

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

Name of Employer Dodson And Dodson Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 4

**Transaction ID:** C31178

Amount of Each Receipt this Period  
100.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Everette L. Dofferymyre

Mailing Address 1600 The Peachtree  
1355 Peachtree Street

City Atlanta State GA Zip Code 30309

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

Name of Employer Dofferymyer, Shields, Canfield, Kno Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

**Transaction ID:** C30932

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. James R. Dorough

Mailing Address 766 Blackfoot Trail

City Suwanee State GA Zip Code 30024-1753

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

Name of Employer Self-employed Occupation Construction

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 0 4

**Transaction ID:** C31199

Amount of Each Receipt this Period  
2000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2350.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. James R. Dorough		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 4
Mailing Address 766 Blackfoot Trail		<b>Transaction ID:</b> C31200
City State Zip Code Suwanee GA 30024-1753	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Self-employed Construction	Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 4000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Paula Dorough		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 4
Mailing Address 1176 Bridgewater Walk		<b>Transaction ID:</b> C31201
City State Zip Code Snellville GA 30078	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Homemaker Homemaker	Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Charles J. Driebe		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 4
Mailing Address 6 Courthouse Way		<b>Transaction ID:</b> C31260
City State Zip Code Jonesboro GA 30236	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Driebe & Driebe Attorney	Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4200.00
<b>TOTAL</b> 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 28 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Thomas M. Dunning

Mailing Address 717 N. Harwood, Suite 2500

City State Zip Code  
Dallas TX 75201

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

Name of Employer Occupation  
Dunning Benefits Corp. Chairman

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 0 4

**Transaction ID:** C30870

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Myles E. Eastwood

Mailing Address 6445 Powers Ferry Rd.

City State Zip Code  
Atlanta GA 30339

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1750.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 4

**Transaction ID:** C31047

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Steve Eavenson

Mailing Address 1040 Colorado Boulevard

City State Zip Code  
Bogart GA 30622

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

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

**Transaction ID:** C30984

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Michael Eddings

Mailing Address P.O. Box 1658

City State Zip Code  
Calhoun GA 30703

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

Name of Employer Collins & Eddings Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 0 4

Transaction ID: C31103

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Benjamin S. Eichholz

Mailing Address 301 West York Street

City State Zip Code  
Savannah GA 31401

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

Name of Employer Benjamin Eichholz, P.C. Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 0 4

Transaction ID: C31275

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Professor Ronald Ellington

Mailing Address 135 Breaver Trail

City State Zip Code  
Athens GA 30605

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

Name of Employer University of Georgia Occupation Law Professor

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 7 / 2 0 0 4

Transaction ID: C31119

Amount of Each Receipt this Period  
250.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Ilene Engel

Mailing Address 1057 Arbor Trace

City Atlanta State GA Zip Code 30319

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

Name of Employer Community Volunteer Occupation Community Volunteer

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 878.75

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 0 4

Transaction ID: C30896

Amount of Each Receipt this Period  
128.75

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

\* In-Kind: Expenses for Meet and Greet

**B.** Full Name (Last, First, Middle Initial)  
Ilene Engel

Mailing Address 1057 Arbor Trace

City Atlanta State GA Zip Code 30319

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

Name of Employer Community Volunteer Occupation Community Volunteer

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 878.75

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 7 / 2 0 0 4

Transaction ID: C31017

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Elaine Epstein

Mailing Address 4 Manns Hill Crescent

City Sharon State MA Zip Code 02067

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

Name of Employer Todd & Weld Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C30949

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **878.75**

**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 31 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mary Erlanger

Mailing Address 121 Princeton Mill Road

City Athens State GA Zip Code 30606

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

Name of Employer Self-employed Occupation Psychologist

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
06 / 07 / 2004

**Transaction ID:** C31029

Amount of Each Receipt this Period  
100.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mary Erlanger

Mailing Address 121 Princeton Mill Road

City Athens State GA Zip Code 30606

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

Name of Employer Self-employed Occupation Psychologist

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2004

**Transaction ID:** C31214

Amount of Each Receipt this Period  
100.00

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

**C.** Full Name (Last, First, Middle Initial)  
Michael Esch

Mailing Address 6203 Dahlongea Road

City Bethesda State MD Zip Code 20816

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

Name of Employer Wilmer Cutler Pickering Hale & Dor Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
05 / 21 / 2004

**Transaction ID:** C30964

Amount of Each Receipt this Period  
100.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 155
	<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)  
Friends of John Barrow

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

Mailing Address 1875 Old Alabama Road  
Suite 710

City Roswell State GA Zip Code 30076

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

Name of Employer The Farnham Law Firm Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

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

Transaction ID: C30975

Amount of Each Receipt this Period  
750.00

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

**B.** Full Name (Last, First, Middle Initial)  
Ms. Anne Farnsworth

Mailing Address 490 Westview Drive

City Athens State GA Zip Code 30606

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

Name of Employer Self-employed Occupation Research and Strategy Consultant

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

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

Transaction ID: C30989

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Laurence Field

Mailing Address 42 Mt. Vernon Steet

City Cambridge State MA Zip Code 02140

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

Name of Employer Franklin Fields Occupation Real Estate

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 4

Transaction ID: C30910

Amount of Each Receipt this Period  
500.00

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

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

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 155
	<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)  
Friends of John Barrow

<b>A.</b> Full Name (Last, First, Middle Initial) Rob Fisher		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 4	
Mailing Address 389 Morton Farm Lane		<b>Transaction ID:</b> C30912	
City State Zip Code Athens GA 30605		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Robinson Fisher Koons		Occupation Landscape Architect	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. John Fleming		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 4	
Mailing Address 461 Greene Street		<b>Transaction ID:</b> C31265	
City State Zip Code Augusta GA 30901		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Fleming, Blanchard, Jackson & Durh		Occupation Attorney	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Kevin Fong		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 4	
Mailing Address 6573 Dawes Street		<b>Transaction ID:</b> C30888	
City State Zip Code Oakland CA 94611		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Pillsbury Winthrop		Occupation Attorney	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	.....

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Sherrie Ford

Mailing Address 325 Greystone Terrace

City Athens State GA Zip Code 30606

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

Name of Employer Change Partners Occupation Owner

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 0 4

**Transaction ID:** C31190

Amount of Each Receipt this Period  
200.00

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

**B.** Full Name (Last, First, Middle Initial)  
Laura Fortson

Mailing Address 310 Millege Heights

City Athens State GA Zip Code 30606

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

Name of Employer Retired Occupation Teacher

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 0 8 / 2 0 0 4

**Transaction ID:** C30819

Amount of Each Receipt this Period  
100.00

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

**C.** Full Name (Last, First, Middle Initial)  
Candace L. Fowler

Mailing Address 1100 Peachtree Street Suite 2800

City Atlanta State GA Zip Code 30309-4530

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

Name of Employer Kilpatrick Stockton, LLP Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 3 / 2 0 0 4

**Transaction ID:** C31168

Amount of Each Receipt this Period  
500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Ms. Lois Frank

Mailing Address 920 Crest Valley Road NW

City Atlanta State GA Zip Code 30327

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

Name of Employer Niagara National Corporation  
Occupation Office Administrator

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 07 / 2004

Transaction ID: C31015

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Richard Friedman

Mailing Address 1126 Highland Ave.

City Bremerton State WA Zip Code 98312

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

Name of Employer Self-employed  
Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 12 / 2004

Transaction ID: C30827

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
J. B. Fuqua

Mailing Address 1201 West Peachtree Atreet Suite 5000

City Atlanta State GA Zip Code 30309

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

Name of Employer Fuqua Companies  
Occupation President

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 18 / 2004

Transaction ID: C31125

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> 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 36 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Joe Gaines

Mailing Address 250 McWhorter Drive

City Athens State GA Zip Code 30606

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

Name of Employer St. Mary's Occupation Pathologist

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 14 / 2004

**Transaction ID:** C30950

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Denny Galis

Mailing Address 277 Henderson Avenue

City Athens State GA Zip Code 30605

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

Name of Employer Self-Employed Occupation Mediator

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2004

**Transaction ID:** C31250

Amount of Each Receipt this Period  
200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Thomas W Ganschow

Mailing Address 190 Chalice Ln

City Athens State GA Zip Code 30606-1210

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1600.00

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2004

**Transaction ID:** C31112

Amount of Each Receipt this Period  
100.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>550.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Michael Gaubert</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 4
Mailing Address 18772 Wainsborough Lane		<b>Transaction ID: C30868</b>
City State Zip Code Dallas TX 75287	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Sopuch Arnett Higgins & Gaubert	Occupation Attorney	
Receipt For: 2004 <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) <b>B. Jarome E Gautreaux</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 4
Mailing Address American Federal Bldg 544 Mulberry St, Ste 1001		<b>Transaction ID: C31233</b>
City State Zip Code Macon GA 31201	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer O'Neal, Brown & Sizemore, PC	Occupation attorney	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. George Gibson</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 4
Mailing Address 340 West Lake Drive		<b>Transaction ID: C31164</b>
City State Zip Code Athens GA 30606	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired	Occupation Retired	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Robert E Gibson</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 4	
Mailing Address 350 W. Rutherford Street		<b>Transaction ID: C31173</b>	
City State Zip Code Athens GA 30606		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired Occupation Retired			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Steve Gilliam</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 4	
Mailing Address Post Office Box 1098		<b>Transaction ID: C31139</b>	
City State Zip Code Gainesville GA 30503		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Smith, Gilliam, Williams & Miles Occupation Attorney			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Page Gleason</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 4	
Mailing Address 28 Plantation Drive, NE		<b>Transaction ID: C30862</b>	
City State Zip Code Atlanta GA 30324-2937		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Upper Chatahoochee Riverkeeper Occupation Development Director			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Harry Gordon

Mailing Address 325 N. Milledge Ave.

City Athens State GA Zip Code 30601

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 0 4

Transaction ID: C30901

Amount of Each Receipt this Period  
1500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Patricia Griffith

Mailing Address 1275 Peachtree St., N. E. Suite 600

City Atlanta State GA Zip Code 30309

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

Name of Employer Ford & Harrison LLP Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1200.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 1 / 2 0 0 4

Transaction ID: C31134

Amount of Each Receipt this Period  
200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Sheffield Hale

Mailing Address 1599 Clifton Road NE

City Atlanta State GA Zip Code 30329

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

Name of Employer American Cancer Society Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 0 4

Transaction ID: C30838

Amount of Each Receipt this Period  
250.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1950.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Sheffield Hale

Mailing Address 1599 Clifton Road NE

City Atlanta State GA Zip Code 30329

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

Name of Employer American Cancer Society Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2004

Transaction ID: C31172

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Ted Hammock

Mailing Address 275 Riverhill Drive

City Athens State GA Zip Code 30606

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 29 / 2004

Transaction ID: C31204

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
A. J. Hancock

Mailing Address 512 North Thomas St

City Athens State GA Zip Code 30601

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

Name of Employer Apex Signs Occupation Owner

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2004

Transaction ID: C30852

Amount of Each Receipt this Period  
750.00

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

\* In-Kind:

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one) <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 41 / 155
------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A.</b> Ernie Harris		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 4
Mailing Address 499 Fortson Drive		Transaction ID: C30972
City State Zip Code Athens GA 30606	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Harris & Liken	Occupation Attorney	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ernie Harris		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4
Mailing Address 499 Fortson Drive		Transaction ID: C31215
City State Zip Code Athens GA 30606	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Harris & Liken	Occupation Attorney	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Cheryl Haywood		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 4
Mailing Address 642 Second Street		Transaction ID: C31088
City State Zip Code Brooklyn NY 11215-3905	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self-employed	Occupation Homemaker	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Faye Hill

Mailing Address 6 Oak Grove Road

City Athens State GA Zip Code 30607

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

Name of Employer Self-employed Occupation Realtor

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 17 / 2004

**Transaction ID: C30952**

Amount of Each Receipt this Period  
1250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Marilyn A. Hill

Mailing Address 1200 Arborwood Ridge

City Bishop State GA Zip Code 30621

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

Name of Employer St. Mary's Health Care System Occupation Administration

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2004

**Transaction ID: C31171**

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Milton Hill

Mailing Address 195 LeAnn Drive

City Athens State GA Zip Code 30601-1113

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 07 / 2004

**Transaction ID: C30922**

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **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 43 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michael O. Horgan

Mailing Address P.O. Box 68

City State Zip Code  
Washington GA 30673

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1250.00

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

Transaction ID: C30844

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. E. Lamar Houston

Mailing Address 160 Red Fox Run

City State Zip Code  
Athens GA 30605

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 4

Transaction ID: C31056

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. John M. Hyatt

Mailing Address 755 Commerce Drive  
Suite 720 Commerce Plaza

City State Zip Code  
Decatur GA 30030

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

Name of Employer Hyatt & Hyatt, P.C. Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 0 4

Transaction ID: C30900

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mr. John M. Hyatt

Mailing Address 755 Commerce Drive  
Suite 720 Commerce Plaza

City Decatur State GA Zip Code 30030

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

Name of Employer Hyatt & Hyatt, P.C. Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 0 4

Transaction ID: C30899

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Ms. Charlotte Ingram

Mailing Address 145 Carlton Terrace

City Athens State GA Zip Code 30606

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

Name of Employer UGA Occupation Graphic Designer

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 4

Transaction ID: C31285

Amount of Each Receipt this Period  
50.00

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

**C.** Full Name (Last, First, Middle Initial)  
Nancy Israel

Mailing Address 130 Cotton Street

City Newton State MA Zip Code 02158

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

Name of Employer Israel Silberman PC Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 6 / 2 0 0 4

Transaction ID: C30882

Amount of Each Receipt this Period  
500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 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 45 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A.</b> Amy Berman Jackson		Date of Receipt MM / DD / YYYY 05 / 03 / 2004
Mailing Address 111 Oronoco Street		<b>Transaction ID:</b> C30905
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Trout & Richards	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Carol A. Jackson		Date of Receipt MM / DD / YYYY 04 / 16 / 2004
Mailing Address P.O. Box 11692		<b>Transaction ID:</b> C30851
City Atlanta	State GA	Zip Code 30355
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Federal Home Loan Bank of Atlanta	Occupation Banker	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Lillas James		Date of Receipt MM / DD / YYYY 05 / 12 / 2004
Mailing Address 1268 Jackson Springs Road		<b>Transaction ID:</b> C31295
City Macon	State GA	Zip Code 31211-1734
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Self-Employed	Occupation Doctor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Dr. David Jarrett

Mailing Address 1721 Prince Avenue

City Athens State GA Zip Code 30606

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

Name of Employer Jarrett Medical Occupation Psychiatrist

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 451.00

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

**Transaction ID: C30916**

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Dr. Farris Johnson

Mailing Address 340 Parkway Dr.

City Athens State GA Zip Code 30606

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

Name of Employer Athens Medical Center Occupation Physician

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

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

**Transaction ID: C30915**

Amount of Each Receipt this Period  
100.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. Weyman Johnson

Mailing Address 600 Peachtree Street Suite 2400

City Atlanta State GA Zip Code 30308

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

Name of Employer Paul, Hastings, Janofsky & Walker Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 900.00

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

**Transaction ID: C30937**

Amount of Each Receipt this Period  
200.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **550.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mr. Weyman Johnson

Mailing Address 600 Peachtree Street  
Suite 2400

City Atlanta State GA Zip Code 30308

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

Name of Employer Paul, Hastings, Janofsky & Walker  
Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 900.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 0 4

Transaction ID: C31092

Amount of Each Receipt this Period  
200.00

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

**B.** Full Name (Last, First, Middle Initial)  
Ken Jordan

Mailing Address 175 Cedar Creek Drive

City Athens State GA Zip Code 30605

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

Name of Employer Athens - Clarke County  
Occupation Public Servant

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 0 4

Transaction ID: C31443

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Bruce Joseph

Mailing Address 1776 K Street, N.W.

City Washington State DC Zip Code 20006

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

Name of Employer Wiley, Rein & Fielding  
Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C30830

Amount of Each Receipt this Period  
250.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>700.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 155
	<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)  
Friends of John Barrow

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

Mailing Address Post Office 23329

City State Zip Code  
Savannah GA 31403

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

Name of Employer Occupation  
Kahn & Company President

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 4

Transaction ID: C31177

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Kenneth Kalivoda, Esq.

Mailing Address 108 Chickadee Court

City State Zip Code  
Athens GA 30605

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

Name of Employer Occupation  
Hudson, Montgomery & Kalivoda Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

1550.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 0 4

Transaction ID: C31039

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Brett Kappel

Mailing Address 2482 Freetown Drive

City State Zip Code  
Reston VA 20191

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

Name of Employer Occupation  
Vorys, Sater, Seymour and Pease Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 0 4

Transaction ID: C31170

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

**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 49 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mr. Stanley J. Kays

Mailing Address 435 Hampton Court

City Athens State GA Zip Code 30605

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

Name of Employer UGA Occupation Professor of Horticulture

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C30927

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Ms. Jane Kidd

Mailing Address 410 Hampton Court

City Athens State GA Zip Code 30605

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

Name of Employer University of Georgia Occupation Public Relations

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1050.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 0 4

Transaction ID: C31090

Amount of Each Receipt this Period  
50.00

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

**C.** Full Name (Last, First, Middle Initial)  
Katherine Legette Kirbo

Mailing Address 890 Hill St.

City Athens State GA Zip Code 30606

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

Name of Employer Reef Ball Foundation Occupation Executive Director

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 1 / 2 0 0 4

Transaction ID: C31132

Amount of Each Receipt this Period  
450.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Charles Kirbo

Mailing Address 10705 Stroup Road

City Roswell State GA Zip Code 30075

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 21 / 2004

Transaction ID: C31131

Amount of Each Receipt this Period  
300.00

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

**B.** Full Name (Last, First, Middle Initial)  
Andrew Kislik

Mailing Address 1055 Woodland Drive

City Hillsborough State CA Zip Code 94010

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

Name of Employer Cohen & Ostler Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 16 / 2004

Transaction ID: C31097

Amount of Each Receipt this Period  
200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Marie Hodgson Koenig

Mailing Address 200 Rocky Ford Road

City Athens State GA Zip Code 30606

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 23 / 2004

Transaction ID: C31152

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **750.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mr. Paul M. Kurtz

Mailing Address 362 W. Cloverhurst Avenue

City Athens State GA Zip Code 30606

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

Name of Employer UGA Occupation Law Professor

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 1 / 2 0 0 4

**Transaction ID:** C31138

Amount of Each Receipt this Period  
250.00

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

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

Mailing Address 6701 Parkwood Lane

City Minneapolis State MN Zip Code 55436

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

Name of Employer Frederikson and Byron PA Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 1 / 2 0 0 4

**Transaction ID:** C31135

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Glenn Loewenthal

Mailing Address 4190 Fairgreen Drive

City Marietta State GA Zip Code 30068

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

Name of Employer Glenn Loewenthal, PC Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 4

**Transaction ID:** C31054

Amount of Each Receipt this Period  
100.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Stephen G. Lowry

Mailing Address 405 East Perry Street

City Savannah State GA Zip Code 31401

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

Name of Employer Harris, Penn, Lowry LLP Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2004

Transaction ID: C31202

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Chief Joseph Lumpkin

Mailing Address 168 Pinecrest Terrace

City Athens State GA Zip Code 30606

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

Name of Employer Athens Clarke County Occupation Chief of Police

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2004

Transaction ID: C31184

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
William J. Mareska

Mailing Address 3802 Washington Road

City Martinez State GA Zip Code 30907

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

Name of Employer Self-employed Occupation Dentist

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2004

Transaction ID: C30906

Amount of Each Receipt this Period  
500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
James B. Marlow, Jr.

Mailing Address 1212 Chadwick Lake Drive

City State Zip Code  
Lawrenceville GA 30043

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

Name of Employer Occupation  
Yahoo! Director of Sales

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 4

**Transaction ID:** C30957

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Charlotte Marshall

Mailing Address 402 Riverview Road

City State Zip Code  
Athens GA 30606

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 4

**Transaction ID:** C31316

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
David Matheny

Mailing Address 101 Middleton Court

City State Zip Code  
Athens GA 30606

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

Name of Employer Occupation  
Armentrout Roebuck Matheny Consult Architect

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

548.00

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

**Transaction ID:** C30973

Amount of Each Receipt this Period  
250.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Rep. Louise McBee

Mailing Address 145 Pine Valley Place

City Athens State GA Zip Code 30606

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 17 / 2004

Transaction ID: C31120

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. William C. McCalley

Mailing Address P.O. Box 938  
517 2nd Street, S.E.

City Moultrie State GA Zip Code 31776-0938

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

Name of Employer Kirbo & McCalley Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 27 / 2004

Transaction ID: C30992

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Peggy McCormick

Mailing Address 37 Lakeview Avenue

City Atlanta State GA Zip Code 30305

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

Name of Employer Atlanta Development Authority Occupation Director of Economic Development

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2004

Transaction ID: C30846

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 155
	<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)  
Friends of John Barrow

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

Mailing Address 1700 Pacific Avenue  
Suite 2800

City Dallas State TX Zip Code 75201

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

Name of Employer Vial, Hamilton, Koch & Knox  
Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 0 4

**Transaction ID:** C30869

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Larry V. McLeod, Esq.

Mailing Address DECEASED

City State Zip Code

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

Name of Employer DECEASED  
Occupation DECEASED

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 3 / 2 0 0 4

**Transaction ID:** C31146

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
J. Kenneth Menges, Jr.

Mailing Address Suite 4100  
1700 Pacific Avenue

City Dallas State TX Zip Code 75201

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

Name of Employer Akin, Gump, Strauss, Hauser, and Fe  
Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

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

**Transaction ID:** C35200

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 155
	<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)  
Friends of John Barrow

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

Mailing Address 31 W. 76th Street

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
Simpson Thacher & Bartlett, LLP Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

500.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2004

**Transaction ID:** C31252

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Laurence K. Miller

Mailing Address 1465 Edgecliff Lane

City State Zip Code  
Santa Barbara CA 93108

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 20 / 2004

**Transaction ID:** C30962

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Richard C. Mitchell

Mailing Address One Securities Center  
3490 Piedmont Road

City State Zip Code  
Atlanta GA 30305

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

Name of Employer Occupation  
Mitchell & Shapiro Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2004

**Transaction ID:** C30993

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Mr. David R. Montgomery</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 0 4	
Mailing Address P.O. Box 285		Transaction ID: C30995	
City Lexington	State GA	Amount of Each Receipt this Period 1000.00	
Zip Code 30648		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hudson, Montgomery & Kaliyoda	Occupation Attorney		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B. Regina Montoya</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 4	
Mailing Address 3302 Oakhurst Street		Transaction ID: C30784	
City Dallas	State TX	Amount of Each Receipt this Period 250.00	
Zip Code 75214		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer WorkRules Company		Occupation Vice Chairman	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Lee P. Morgan, Esq</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 4	
Mailing Address 56 Dooley Street		Transaction ID: C31060	
City Watkinsville	State GA	Amount of Each Receipt this Period 500.00	
Zip Code 30677		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Morgan and Morgan		Occupation Attorney	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
John Morrow

Mailing Address 130 Pine Tops Drive

City Athens State GA Zip Code 30606

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

Name of Employer University of Georgia Occupation Professor

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 03 / 2004

Transaction ID: C31012

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mickey Moses

Mailing Address Post Office Box 152

City Louisville State GA Zip Code 30434

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 21 / 2004

Transaction ID: C31136

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Susan Moye

Mailing Address 2613 Rothland Lane

City Plano State TX Zip Code 75023

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

Name of Employer Neiman Marcus Occupation Human Resource Manager

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 07 / 2004

Transaction ID: C31036

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 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 59 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Susan Moye</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 07 / 2004
Mailing Address 2613 Rothland Lane		Transaction ID: C31037
City State Zip Code Plano TX 75023	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Neiman Marcus Human Resource Manager		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>B. Donald G Myers</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2004
Mailing Address 275 Dearing Street		Transaction ID: C31104
City State Zip Code Athens GA 30605-1008	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Donald G. Myers Consulting Consultant		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C. Betty R. Myrtle</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 07 / 2004
Mailing Address 640 West Lake Drive		Transaction ID: C30809
City State Zip Code Athens GA 30606	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Retired Retired		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A.</b> Betty R. Myrtle		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 4
Mailing Address 640 West Lake Drive		<b>Transaction ID:</b> C31087
City Athens State GA Zip Code 30606	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired Occupation Retired		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Christopher T. Nace		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 4
Mailing Address 2600 One Atlanta Plaza 950 East Paces Ferry Road, NE		<b>Transaction ID:</b> C30988
City Atlanta State GA Zip Code 30326-1119	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Robins Kaplan Miller & Ci-resi Occupation Attorney		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Joseph Neal, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 8 / 2 0 0 4
Mailing Address 410 Telfair Street		<b>Transaction ID:</b> C30996
City Augusta State GA Zip Code 30901	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Joseph R. Neal, P.C. Occupation Attorney		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Dr. Edna Nigro

Mailing Address P.O. Box 7758

City Athens State GA Zip Code 30604

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 650.00

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

Transaction ID: C30831

Amount of Each Receipt this Period  
100.00

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

**B.** Full Name (Last, First, Middle Initial)  
Dr. Edna Nigro

Mailing Address P.O. Box 7758

City Athens State GA Zip Code 30604

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 7 / 2 0 0 4

Transaction ID: C31023

Amount of Each Receipt this Period  
50.00

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

**C.** Full Name (Last, First, Middle Initial)  
Dr. Edna Nigro

Mailing Address P.O. Box 7758

City Athens State GA Zip Code 30604

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 0 4

Transaction ID: C31185

Amount of Each Receipt this Period  
50.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **200.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Ms. Jenny P. Oliver

Mailing Address 140 Doe Run

City Athens State GA Zip Code 30605

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

Name of Employer UGA Occupation Professor

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
06 / 16 / 2004

Transaction ID: C31111

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Ms. Dorothy O'Niell

Mailing Address 174 Highland Terrace

City Athens State GA Zip Code 30606

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

Name of Employer University of Georgia Occupation Research Coordinator

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 850.00

Date of Receipt  
06 / 09 / 2004

Transaction ID: C31053

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Clif Pannell

Mailing Address 520 W. Cloverhurst Avenue

City Athens State GA Zip Code 30606-4216

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

Name of Employer University of Georgia Occupation Professor

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
06 / 07 / 2004

Transaction ID: C31031

Amount of Each Receipt this Period  
250.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mr. James L. Pannell

Mailing Address P.O. Box 10186  
218 State St. West

City Savannah State GA Zip Code 31412

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

Name of Employer Oliver, Maner & Gray Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 04 / 2004

Transaction ID: C31014

Amount of Each Receipt this Period  
750.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Sylvia Pannell

Mailing Address 520 West Cloverhurst

City Athens State GA Zip Code 30606

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

Name of Employer UGA Occupation Professor

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 07 / 2004

Transaction ID: C31032

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. Leonard J. Panzitta

Mailing Address 200 E St Julian St

City Savannah State GA Zip Code 31401

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

Name of Employer Law Offices of Lenny Panzitta Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 16 / 2004

Transaction ID: C31095

Amount of Each Receipt this Period  
300.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1300.00</b>
<b>TOTAL</b> 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 64 / 155
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Mr. Leonard J. Panzitta</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 4
Mailing Address 200 E St Julian St		<b>Transaction ID: C31236</b>
City State Zip Code Savannah GA 31401	Amount of Each Receipt this Period 600.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Law Offices of Lenny Panzitta	Occupation Attorney	
Receipt For: 2004 <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) <b>B. Mr. Andrew Patterson</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 4
Mailing Address 3355 Main Street		<b>Transaction ID: C31169</b>
City State Zip Code Atlanta GA 30337	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Thomas Kennedy Sampson & Patterson	Occupation Attorney	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Rudy Patterson</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 4
Mailing Address 4680 Arkwright Rd.		<b>Transaction ID: C31102</b>
City State Zip Code Macon GA 31210	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self-employed	Occupation Attorney	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Pat Pattillo

Mailing Address 1685 Silver Hill Rd.

City State Zip Code  
Stone Mountain GA 30087

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

Name of Employer Occupation  
Self Employed Developer

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2004

**Transaction ID: C30930**

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
John Peifer

Mailing Address 303 Hascall Road

City State Zip Code  
Atlanta GA 30309

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

Name of Employer Occupation  
Georgia Tech Faculty

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2004

**Transaction ID: C31223**

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Paul Perlman

Mailing Address 34 Winterhall Road

City State Zip Code  
Orchard Park NY 14127

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

Name of Employer Occupation  
Hodgson Russ Andrews Woods & Goody Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2004

**Transaction ID: C30982**

Amount of Each Receipt this Period  
500.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Dr. Robert Pilon

Mailing Address 7 Merry Meeting Lane

City Rye State NH Zip Code 03870

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

Name of Employer Retired Occupation Doctor

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 17 / 2004

Transaction ID: C31123

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Dr. Janet K. Pomeroy

Mailing Address 245 Davis Estates Road

City Athens State GA Zip Code 30606

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

Name of Employer Self-employed Occupation Civic volunteer

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 28 / 2004

Transaction ID: C30998

Amount of Each Receipt this Period  
50.00

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

**C.** Full Name (Last, First, Middle Initial)  
Dr. Janet K. Pomeroy

Mailing Address 245 Davis Estates Road

City Athens State GA Zip Code 30606

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

Name of Employer Self-employed Occupation Civic volunteer

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 23 / 2004

Transaction ID: C31147

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
John Harvey Pomeroy

Mailing Address 2412 N. Quebec Street

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
Dow Lohnes & Albertson, PLLC Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2004

**Transaction ID:** C31174

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Jim Ponsoldt

Mailing Address 240 Blue Heron Dr

City State Zip Code  
Athens GA 30605

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

Name of Employer Occupation  
University of Georgia Professor

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2004

**Transaction ID:** C31061

Amount of Each Receipt this Period  
100.00

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

**C.** Full Name (Last, First, Middle Initial)  
Geoffery E Pope

Mailing Address 1355 Peachtree St Suite 1600

City State Zip Code  
Atlanta GA 30309

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

Name of Employer Occupation  
Pope and Howard Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 800.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 22 / 2004

**Transaction ID:** C31156

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1350.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 155
	<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)  
Friends of John Barrow

<b>A.</b> Full Name (Last, First, Middle Initial) Kirk Post		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 4
Mailing Address 2 Ravinia Dr. Suite 1570		<b>Transaction ID:</b> C31069
City Atlanta State GA Zip Code 30346-2116	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer The Post Law Firm	Occupation Attorney	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Seaton D. Purdom		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 4
Mailing Address One Peachtree Center, Suite 4300 303 Peachtree Street, N.E.		<b>Transaction ID:</b> C31043
City Atlanta State GA Zip Code 30308	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Gambrell & Stolz	Occupation Attorney	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Pamela Ramey		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 4
Mailing Address P.O. Box 60		<b>Transaction ID:</b> C31067
City Winterville State GA Zip Code 30683	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self-employed	Occupation Artist / Free-lance writer	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Henry Ramsey

Mailing Address 265 Dearing Street

City Athens State GA Zip Code 30605-1008

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

Name of Employer Henry Ramsey Old Books Occupation Owner

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2004

Transaction ID: C31076

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Steven Reed

Mailing Address Steptoe & Johnson  
1330 Connecticut Avenue, NW

City Washington State DC Zip Code 20036

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

Name of Employer Steptoe & Johnson Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
05 / 21 / 2004

Transaction ID: C30966

Amount of Each Receipt this Period  
200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Molly Rice

Mailing Address 505 Ponderosa Drive

City Athens State GA Zip Code 30605

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2004

Transaction ID: C31055

Amount of Each Receipt this Period  
100.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>550.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mr. Richard L. Robbins

Mailing Address 1828 Chedworth Lane

City State Zip Code  
Stone Mountain GA 30087

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

Name of Employer Occupation  
Sutherland, Asbill & Brennan Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 4

**Transaction ID:** C30925

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
A. J. Robinson

Mailing Address 50 Westminster Drive

City State Zip Code  
Atlanta GA 30309

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

Name of Employer Occupation  
Central Atlanta Program Chairman

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 0 4

**Transaction ID:** C30994

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mark Robert Rosen

Mailing Address Two Commerce Square, Suite 3300  
2001 Market Street

City State Zip Code  
Philadelphia PA 19103

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

Name of Employer Occupation  
Barrack Rodos & Bacine Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 4

**Transaction ID:** C31288

Amount of Each Receipt this Period  
250.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> 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 71 / 155  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
George C. Rosenzweig

Mailing Address 32 South Court Square  
P.O. Box 220

City Newnan State GA Zip Code 30264

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

Name of Employer Rosenzweig, Jones & MacNabb, P.C. Occupation Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

750.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 0 4

**Transaction ID:** C31208

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Andrew S. Rowen

Mailing Address 145 Central Park West Apt. 13A

City New York State NY Zip Code 10023

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

Name of Employer Sullivan & Cromwell Occupation Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

2000.00

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

**Transaction ID:** C30826

Amount of Each Receipt this Period  
2000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Jeffrey Rubin

Mailing Address 1127 S Street

City Anchorage State AK Zip Code 99501

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

Name of Employer Friedman, Rubin & White Occupation Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

250.00

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

**Transaction ID:** C30828

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Rich Rusk

Mailing Address 1851 Rays Church Road

City Bishop State GA Zip Code 30621

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

Name of Employer Self-employed Occupation Rentals

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 29 / 2004

Transaction ID: C31209

Amount of Each Receipt this Period  
20.00

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

**B.** Full Name (Last, First, Middle Initial)  
Robert Ruxin

Mailing Address Eight Larchmont Lane

City Lexington State MA Zip Code 02420

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

Name of Employer Kazmaier Associate Occupation VP and General Counsel

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 09 / 2004

Transaction ID: C31044

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mark T. Sallee

Mailing Address 1523 Oak Grove Road

City Decatur State GA Zip Code 30033

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 21 / 2004

Transaction ID: C30976

Amount of Each Receipt this Period  
250.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>520.00</b>
<b>TOTAL</b> 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 73 / 155
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Tony Salloum

Mailing Address P.O. Box 1552

City Athens State GA Zip Code 30603

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

Name of Employer Salloum Construction Co. Occupation President

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2004

**Transaction ID:** C31085

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Timothy J. Santelli

Mailing Address P.O. Box 19713

City Atlanta State GA Zip Code 30327

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

Name of Employer Law Offices of Timothy J. Santelli Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2004

**Transaction ID:** C30935

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Katherine M. Scardino

Mailing Address 300 Bull St

City Savannah State GA Zip Code 31401

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

Name of Employer Self Occupation Freelance journalist

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2004

**Transaction ID:** C31235

Amount of Each Receipt this Period  
50.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A.</b> Julian Schroeder		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2004
Mailing Address 215 W 92nd Street Apartment 8A		<b>Transaction ID:</b> C31273
City State Zip Code New York NY 10025	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Credit Renaissance Partners	Occupation Investment Advisor	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ruth Schroeder		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2004
Mailing Address 215 W 92nd Street Apartment 8A		<b>Transaction ID:</b> C31274
City State Zip Code New York NY 10025	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer NYC Department of Education	Occupation Teacher	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Charity Scott		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2004
Mailing Address 1071 Oxford Road, NE		<b>Transaction ID:</b> C31000
City State Zip Code Atlanta GA 30306	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer GSU School of Law	Occupation Professor	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Chris Searcy

Mailing Address 2139 Palm Beach Lakes Blvd.

City State Zip Code  
West Palm Beach FL 33409

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

Name of Employer Searcy et al Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 07 / 2004

Transaction ID: C31021

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Jennifer Segrest

Mailing Address 630 Milledge Circle

City State Zip Code  
Athens GA 30606

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

Name of Employer Self-employed Occupation Architect

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 28 / 2004

Transaction ID: C31186

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
James I. Seifter

Mailing Address 3830 Glenhurst Drive

City State Zip Code  
Smyrna GA 30080

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

Name of Employer Kaplan & Seifter Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2004

Transaction ID: C31290

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Robert Selak

Mailing Address 312 Walnut Street  
Suite 1400

City State Zip Code  
Cincinnati OH 45202

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

Name of Employer Occupation  
Thompson Hine and Flory Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 29 / 2004

**Transaction ID:** C31222

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Christine Shane

Mailing Address 2229 Harvest Run

City State Zip Code  
Garland TX 75044

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

Name of Employer Occupation  
Community Credit Union Vice President

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 02 / 2004

**Transaction ID:** C30783

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Thomas C. Shelton

Mailing Address 1100 Peachtree Street  
Suite 2800

City State Zip Code  
Atlanta GA 30309-4530

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

Name of Employer Occupation  
Kilpatrick Stockton, LLP Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2004

**Transaction ID:** C31175

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Dr. Stephen Michael Schlaer

Mailing Address 2423 Walton Way

City State Zip Code  
Augusta GA 30904

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

Name of Employer Medical Oncology Associates  
Occupation Physician

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 4

Transaction ID: C30904

Amount of Each Receipt this Period  
2000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Robert Silberman

Mailing Address 33 Copley Street

City State Zip Code  
Newton MA 02458

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

Name of Employer Israel Silberman PC  
Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 4

Transaction ID: C30903

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. Kent E. Silver

Mailing Address P. O. Box 308

City State Zip Code  
Winterville GA 30683-0308

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

Name of Employer Silver & Archibald  
Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

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

Transaction ID: C30933

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Betty Ann Sims</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4	
Mailing Address 230 Gilleland Drive		<b>Transaction ID: C31207</b>	
City Athens	State GA	Zip Code 30606	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired	Occupation Retired		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Douglas E. Smith</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 4	
Mailing Address 676 Stillmont Circle		<b>Transaction ID: C31081</b>	
City Cashiers	State NC	Zip Code 28717	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired	Occupation Retired		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C. Paul Smith</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 4	
Mailing Address 3563 4th Street		<b>Transaction ID: C31013</b>	
City Boulder	State CO	Zip Code 80304	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Holme Roberts & Owen	Occupation Attorney		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> 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 79 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
S. Craig Smith

Mailing Address 4040 N. Central Expressway  
Suite 800

City Dallas State TX Zip Code 75204

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

Name of Employer Demarest Smith Giunta & Howell  
Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

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

Transaction ID: C30782

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Wilson Smith

Mailing Address P.O. Box 529

City Vidalia State GA Zip Code 30475-0529

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

Name of Employer Smith and Jenkins  
Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

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

Transaction ID: C30856

Amount of Each Receipt this Period  
2000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Alan Solow

Mailing Address 900 N. Kingsbury  
Apt 1031

City Chicago State IL Zip Code 60610

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

Name of Employer Goldberg, Köhn, Bell, Black, Rosen  
Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

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

Transaction ID: C30885

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3250.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
William Stanhope

Mailing Address 2600 One Atlanta Plaza  
950 East Paces Ferry Road, N.E.

City Atlanta State GA Zip Code 30326

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

Name of Employer Robbins, Kaplan, Miller & Ciresi Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C30840

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. John D. Stephens

Mailing Address 305 Equipment Court

City Lawrenceville State GA Zip Code 30045

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

Name of Employer Self-employed Occupation Developer

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 0 4

Transaction ID: C31198

Amount of Each Receipt this Period  
2000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. John D. Stephens

Mailing Address 305 Equipment Court

City Lawrenceville State GA Zip Code 30045

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

Name of Employer Self-employed Occupation Developer

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼  
Runoff

Election Cycle-to-Date ▼ 6000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 0 4

Transaction ID: C31197

Amount of Each Receipt this Period  
2000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mr. John D. Stephens

Mailing Address 305 Equipment Court

City State Zip Code  
Lawrenceville GA 30045

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

Name of Employer Occupation  
Self-employed Developer

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 6000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 28 / 2004

**Transaction ID:** C31196

Amount of Each Receipt this Period  
2000.00

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

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

Mailing Address 2 Terrace Drive

City State Zip Code  
Great Neck NY 11021

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

Name of Employer Occupation  
Cleary, Gottlieb, Steen & Hamilton Attorney

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 28 / 2004

**Transaction ID:** C30997

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. Lawrence Stumbaugh

Mailing Address 1033 Fairway Estates

City State Zip Code  
Atlanta GA 30319

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

Name of Employer Occupation  
Assurance America Corporation President/CEO

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 08 / 2004

**Transaction ID:** C30818

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A.</b> Joanna Sturm		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2004	
Mailing Address 1618 29th Street, NW		Transaction ID: C31110	
City State Zip Code Washington DC 20007-2901	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Not employed Occupation Not employed	Election Cycle-to-Date ▼ 2000.00		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Berrien L. Sutton		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2004	
Mailing Address 305 West Dame Avenue		Transaction ID: C31086	
City State Zip Code Homerville GA 31634	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Sutton and Associates PC Occupation Attorney	Election Cycle-to-Date ▼ 2000.00		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Ben Tate		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2004	
Mailing Address 2669 Riverview Road		Transaction ID: C31082	
City State Zip Code Macon GA 31204	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Macon State College Occupation Teacher	Election Cycle-to-Date ▼ 400.00		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mr. Daniel C. Tate, Jr.

Mailing Address 700-13th Street, N.W.  
Suite 400

City Washington State DC Zip Code 20005

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

Name of Employer Cassidy & Associates Occupation Vice President

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 0 4

Transaction ID: C30902

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address P.O. Box 9060

City Savannah State GA Zip Code 31412

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

Name of Employer Carter and Tate Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 4

Transaction ID: C31258

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Honorable Susan P. Tate

Mailing Address 140 River Oak Way

City Athens State GA Zip Code 30605

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

Name of Employer Athens - Clarke County Occupation Probate Judge

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 8 / 2 0 0 4

Transaction ID: C31127

Amount of Each Receipt this Period  
200.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Rex Templeton, Jr.

Mailing Address 5 Dobell Lane

City Savannah State GA Zip Code 31411

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

Name of Employer Self Employed Occupation Insurance Agent

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 23 / 2004

Transaction ID: C31155

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Nancy Terrill

Mailing Address Mercer School of Law  
1021 Georgia Avenue

City Macon State GA Zip Code 31207-0001

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

Name of Employer Mercer University Law School Occupation CLE Coordinator

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 01 / 2004

Transaction ID: C31003

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
James Pete Theodocion

Mailing Address 507 Walker Street

City Augusta State GA Zip Code 30901

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 29 / 2004

Transaction ID: C31203

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Emory Thomas</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2004
Mailing Address 595 Hill Street		<b>Transaction ID: C31267</b>
City Athens State GA Zip Code 30606-3031	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer UGA Occupation Professor	Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. William R Thurman</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2004
Mailing Address 151 Colonial Drive		<b>Transaction ID: C30991</b>
City Athens State GA Zip Code 30606	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired Occupation Retired	Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>C. Willard Tom</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 21 / 2004
Mailing Address Morgan Lewis & Bockius 1111 Pennsylvania Avenue		<b>Transaction ID: C31130</b>
City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Morgan, Lewis & Bockius Occupation Attorney	Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>550.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Lothar Tresp

Mailing Address 159 Meadowview Road

City Athens State GA Zip Code 30606-4223

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
06 / 18 / 2004

Transaction ID: C31126

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Madeline Van Dyck

Mailing Address 105 Moss Side Drive

City Athens State GA Zip Code 30606

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

Name of Employer Self-Employed Occupation Property Manager

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2250.00

Date of Receipt  
06 / 16 / 2004

Transaction ID: C31080

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Dr. Arvid Vasenden

Mailing Address 195 Rocky Branch Road

City Athens State GA Zip Code 30605

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

Name of Employer Athens Podiatry, PC Occupation Podiatrist

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2250.00

Date of Receipt  
06 / 13 / 2004

Transaction ID: C31074

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **750.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Marlena Wald</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2004	
Mailing Address 5015 Fawn Valley Drive		<b>Transaction ID: C31079</b>	
City State Zip Code Loganville GA 30052		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Emory University School of Medicine	Occupation Epidemiologist		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) <b>B. Burke Walker</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2004	
Mailing Address 376 Milledge Circle		<b>Transaction ID: C31234</b>	
City State Zip Code Athens GA 30606		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer NE Georgia Regional Development Of	Occupation Administrative Director		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Robert Walker</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 05 / 2004	
Mailing Address 440 Highland Avenue		<b>Transaction ID: C30801</b>	
City State Zip Code Athens GA 30606		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired	Occupation Retired		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 88 / 155
------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A.</b> Robert Walker		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 0 / 2 0 0 4	
Mailing Address 440 Highland Avenue		Transaction ID: C30960	
City Athens State GA Zip Code 30606	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired Occupation Retired	Election Cycle-to-Date 500.00		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr Michael J. Warshauer		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 4	
Mailing Address 75 14th Street, N.E. Suite 2700		Transaction ID: C31071	
City Atlanta State GA Zip Code 30309	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Warshauer Thornton & Eason Occupation Attorney	Election Cycle-to-Date 500.00		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C.</b> E. John Wheelchel		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 4	
Mailing Address 377 Herrington Drive N.E.		Transaction ID: C31137	
City Atlanta State GA Zip Code 30342-3819	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer BellSouth Occupation Attorney	Election Cycle-to-Date 1000.00		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1400.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Hoyt Whelchel

Mailing Address 48 Cherokee Rd.

City Moultrie State GA Zip Code 31768

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

Name of Employer Whelchel, Carlton & Waller Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 550.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 23 / 2004

Transaction ID: C31166

Amount of Each Receipt this Period  
50.00

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

**B.** Full Name (Last, First, Middle Initial)  
Hubert Whitlow

Mailing Address 445 Milledge Circle

City Athens State GA Zip Code 30606

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 07 / 2004

Transaction ID: C31026

Amount of Each Receipt this Period  
100.00

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

**C.** Full Name (Last, First, Middle Initial)  
Hubert Whitlow

Mailing Address 445 Milledge Circle

City Athens State GA Zip Code 30606

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2004

Transaction ID: C31248

Amount of Each Receipt this Period  
100.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> 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 90 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
John Wilkins

Mailing Address 255 Plum Nelly Road

City Athens State GA Zip Code 30606-4645

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 0 4

Transaction ID: C31264

Amount of Each Receipt this Period  
250.00

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

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

Mailing Address 2306 Cadden Road

City Augusta State GA Zip Code 30906-4757

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

Name of Employer Self-employed Occupation Real Estate

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 0 4

Transaction ID: C31093

Amount of Each Receipt this Period  
100.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mary Margaret Wood

Mailing Address 575 Milledge Circle

City Athens State GA Zip Code 30606

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 3 / 2 0 0 4

Transaction ID: C31150

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **600.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Norman Wood

Mailing Address 575 Milledge Circle

City Athens State GA Zip Code 30606

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

Name of Employer Retired Occupation Retired

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 4

Transaction ID: C30895

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
David J. Worley

Mailing Address 107 Regents Square

City Peachtree City State GA Zip Code 30269

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

Name of Employer MotleyRice Occupation Attorney

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 4

Transaction ID: C31229

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Doug Yarn

Mailing Address 485 West Lake Drive

City Athens State GA Zip Code 30606

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

Name of Employer Georgia State University Occupation Law Professor

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 2 / 2 0 0 4

Transaction ID: C31158

Amount of Each Receipt this Period  
250.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> 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 92 / 155
	<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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
Jay Cook

Mailing Address Cook, Noell, Tolley, Bates & Micha  
P. O. Box 1927

City Athens State GA Zip Code 30601

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

Name of Employer Cook, Noell, Tolley, Bates & Micha Occupation Partnership

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 0 4

Transaction ID: C31116

Amount of Each Receipt this Period  
750.00

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

PARTNERSHIP--partners below if itemized

**B.** Full Name (Last, First, Middle Initial)  
Jay Cook

Mailing Address Cook, Noell, Tolley, Bates & Micha  
PO BOX 1927

City Athens State GA Zip Code 30601

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

Name of Employer Cook, Noell, Tolley, Bates & Micha Occupation Partner

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 0 4

Transaction ID: C31115

Amount of Each Receipt this Period  
750.00

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

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Rett Gunn

Mailing Address Gunn Construction  
3700 Sexton Woods Drive

City Chamblee State GA Zip Code 30341

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

Name of Employer Gunn Construction and Development Occupation Partner

Receipt For: 2004 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 4

Transaction ID: C30894

Amount of Each Receipt this Period  
500.00

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

PARTNERSHIP--partners below if itemized

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1250.00</b>
<b>TOTAL</b> 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 93 / 155  
 (check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

A. Full Name (Last, First, Middle Initial)  
Rett Gunn

Mailing Address 3700 Sexton Woods Drive

City	State	Zip Code
Atlanta	GA	30341

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

Name of Employer  
Gunn Construction and Development

Occupation  
President

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 2 8 / 2 0 0 4

Transaction ID: C30893

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	129932.75

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 / 155  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
AFL-CIO COPE POLITICAL CONTRIBUTIONS COMMITTEE

Mailing Address 815 16th Street N.W.

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00003806

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 4

**Transaction ID:** C31262

Amount of Each Receipt this Period  
1500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Amalgamated Transit Union COPE Account

Mailing Address 5025 Wisconsin Ave, NW

City State Zip Code  
Washington DC 20016

FEC ID number of contributing federal political committee. **C** C00032995

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 6 / 2 0 0 4

**Transaction ID:** C31179

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN NURSES' ASSOCIATION PAC (ANA-PAC) (FKA N-

Mailing Address 600 MARYLAND AVENUE SW SUITE 100W

City State Zip Code  
WASHINGTON DC 20024

FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 4

**Transaction ID:** C31232

Amount of Each Receipt this Period  
5000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7500.00**

**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 95 / 155  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial)  
**A. AMERIPAC: THE FUND FOR A GREATER AMERICA**

Mailing Address 499 South Capitol Street SW  
Suite 108

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00271338

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2004

**Transaction ID: C31240**

Amount of Each Receipt this Period  
5000.00

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

Full Name (Last, First, Middle Initial)  
**B. CHARLES A GONZALEZ CONGRESSIONAL CAMPAIGN**

Mailing Address PO Box 12612

City State Zip Code  
San Antonio TX 78212

FEC ID number of contributing federal political committee. **C** C00330084

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2004

**Transaction ID: C31241**

Amount of Each Receipt this Period  
1000.00

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

Full Name (Last, First, Middle Initial)  
**C. COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)**

Mailing Address 100 INDIANA AVE., N. W.

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2004

**Transaction ID: C31238**

Amount of Each Receipt this Period  
2500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8500.00**

**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 96 / 155
	(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)  
Friends of John Barrow

<b>A.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT GARY ACKERMAN		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2004
Mailing Address 3000 Marcus Ave. Suite 1E9		<b>Transaction ID:</b> C31245
City State Zip Code Lake Success NY 11042	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00165241		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Committee to Elect Louise McBee		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2004
Mailing Address P.O. Box 5875		<b>Transaction ID:</b> C30939
City State Zip Code Athens GA 30604	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) DEMOCRATIC CANDIDATE FUND (AKA THOMAS P O'NEILL, J		Date of Receipt M M / D D / Y Y Y Y 05 / 21 / 2004
Mailing Address 1310 19TH STREET NW		<b>Transaction ID:</b> C30970
City State Zip Code WASHINGTON DC 20036	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00018135		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2500.00
<b>TOTAL</b> 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 97 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. DOOLEY FOR THE VALLEY</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 4
Mailing Address 1023 Langley Hill Drive Suite 4050		<b>Transaction ID: C31244</b>
City State Zip Code McLean VA 22101		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b> C00236711		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2004 <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) <b>B. DRIVE - DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUC</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 4
Mailing Address 25 Louisiana Ave. NW		<b>Transaction ID: C31193</b>
City State Zip Code Washington DC 20001		Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b> C00032979		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. ED JENKINS FOR CONGRESS</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 4
Mailing Address POST OFFICE BOX 70		<b>Transaction ID: C30968</b>
City State Zip Code JASPER GA 30143		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b> C00038323		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> 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 98 / 155  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
PASTOR FOR ARIZONA

Mailing Address PO BOX 6554

City State Zip Code  
PHOENIX AZ 85005

FEC ID number of contributing federal political committee. **C** C00251918

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 1 6 / 2 0 0 4

**Transaction ID:** C31113

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INT

Mailing Address 1125 17TH ST. NW

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 4 / 2 0 0 4

**Transaction ID:** C31161

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Jim Clyburn

Mailing Address P.O. Box 12567

City State Zip Code  
Columbia SC 29211

FEC ID number of contributing federal political committee. **C** C00255562

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

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

**Transaction ID:** C30967

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **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 99 / 155  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
HOYER FOR CONGRESS

Mailing Address 7905 MALCOLM ROAD SUITE 102

City State Zip Code  
CLINTON MD 20735

FEC ID number of contributing federal political committee. **C** C00140715

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 4

**Transaction ID:** C31246

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS COMMITTEE ON POLITICAL EDUCATION

Mailing Address 900 Seventh St. N.W.

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 1 6 / 2 0 0 4

**Transaction ID:** C31114

Amount of Each Receipt this Period  
3000.00

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

**C.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS COMMITTEE ON POLITICAL EDUCATION

Mailing Address 900 Seventh St. N.W.

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 2 / 2 0 0 4

**Transaction ID:** C31154

Amount of Each Receipt this Period  
5000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **9000.00**

**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 100 / 155
	(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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Ironworkers Political Action League</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2004
Mailing Address 1750 New York Avenue, NW		<b>Transaction ID: C31291</b>
City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C C00027359</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B. IUPAT MEMBER AND FAMILY FUNDRAISING PC ACCOUNT</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2004
Mailing Address 1750 New York Ave		<b>Transaction ID: C31224</b>
City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C C00349035</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. JOBS, OPPORTUNITIES AND EDUCATION, PAC (JOE-PAC)</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2004
Mailing Address 84-54 GRAND AVENUE		<b>Transaction ID: C31243</b>
City State Zip Code ELMHURST NY 11373	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C C00362384</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>8500.00</b>
<b>TOTAL</b> 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 101 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. KIDSPAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2004		
Mailing Address 2 Brighton Street 2nd Floor		<b>Transaction ID: C31239</b>		
City Belmont      State MA      Zip Code 02478	Amount of Each Receipt this Period 1000.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C00147975				
Name of Employer  Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Election Cycle-to-Date ▼ 1000.00			

Full Name (Last, First, Middle Initial) <b>B. NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY AND MEDICARE - PAC</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 21 / 2004		
Mailing Address 10 G STREET, NE, SUITE #600 SUITE 600		<b>Transaction ID: C34826</b>		
City WASHINGTON      State DC      Zip Code 20002	Amount of Each Receipt this Period 1000.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C70002605				
Name of Employer  Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Election Cycle-to-Date ▼ 1000.00			

Full Name (Last, First, Middle Initial) <b>C. NATIONAL LEADERSHIP PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2004		
Mailing Address PO Box 5577 Manhattanville Station		<b>Transaction ID: C31331</b>		
City New York      State NY      Zip Code 10027	Amount of Each Receipt this Period 1000.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C00302588				
Name of Employer  Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Election Cycle-to-Date ▼ 1000.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> 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 102 / 155
	<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. OUR COMMON VALUES PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 28 / 2004	
Mailing Address 101 WEST GRAND SUITE 200		<b>Transaction ID: C31191</b>	
City State Zip Code CHICAGO IL 60610	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b> C00399014		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B. POLITICAL EDUCATIONAL FUND OF THE BUILDING AND CONSTRUCTION TRADES DEPARTMENT</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 28 / 2004	
Mailing Address 815 16TH STREET NW #600		<b>Transaction ID: C34829</b>	
City State Zip Code WASHINGTON DC 20006	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. <b>C</b> C00003160		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) <b>C. SAC PAC</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 25 / 2004	
Mailing Address 8665 Wilshire Blvd. Suite 220		<b>Transaction ID: C30980</b>	
City State Zip Code Beverly Hills CA 90211	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b> C00165548		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8500.00
<b>TOTAL</b> 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 103 / 155  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
SEAFARERS POLITICAL ACTIVITY DONATION-SEAFARERS IN

Mailing Address 5201 AUTH WAY

City State Zip Code  
CAMP SPRINGS MD 20746

FEC ID number of contributing federal political committee. **C** C00004325

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 07 / 2004

**Transaction ID:** C31035

Amount of Each Receipt this Period  
1000.00

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

**B.** 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: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2004

**Transaction ID:** C31276

Amount of Each Receipt this Period  
3000.00

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

**C.** Full Name (Last, First, Middle Initial)  
SILVER STATE 21ST CENTURY PAC

Mailing Address 3069 CONQUISTA CT

City State Zip Code  
LAS VEGAS NV 89121

FEC ID number of contributing federal political committee. **C** C00364901

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2004

**Transaction ID:** C31242

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **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: PAGE 104 / 155  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
SMITH, GAMBRELL and Russell PAC

Mailing Address 1230 PEACHTREE ST NE STE 3100  
PROMENADE II

City ATLANTA State GA Zip Code 30309

FEC ID number of contributing federal political committee. **C** C00187112

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 8 / 2 0 0 4

**Transaction ID:** C31194

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNI

Mailing Address 1775 K STREET NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C70003645

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 4

**Transaction ID:** C31230

Amount of Each Receipt this Period  
5000.00

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

**C.** Full Name (Last, First, Middle Initial)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNI

Mailing Address 1775 K STREET NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C70003645

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼  
Runoff

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 4

**Transaction ID:** C31231

Amount of Each Receipt this Period  
5000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10500.00**

**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 105 / 155
	(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)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
UNITED TRANSPORTATION UNION (UTU) TRANSPORTATION P

Mailing Address 14600 DETROIT AVENUE

City State Zip Code  
CLEVELAND OH 44107

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	4

Transaction ID: C31467

Amount of Each Receipt this Period  
5000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	78000.00

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

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

FOR LINE NUMBER: PAGE 106 / 155  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
First American Bank

Mailing Address P.O. Box 1688

City State Zip Code  
Athens GA 30603-1688

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

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3957.15

Date of Receipt  

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

**Transaction ID:** C30918

Amount of Each Receipt this Period  
319.86

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

\*

**B.** Full Name (Last, First, Middle Initial)  
First American Bank

Mailing Address P.O. Box 1688

City State Zip Code  
Athens GA 30603-1688

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

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3957.15

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	0	4

**Transaction ID:** C30926

Amount of Each Receipt this Period  
22.09

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

\*

**C.** Full Name (Last, First, Middle Initial)  
First American Bank

Mailing Address P.O. Box 1688

City State Zip Code  
Athens GA 30603-1688

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

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3957.15

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	4

**Transaction ID:** C31117

Amount of Each Receipt this Period  
290.20

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

\*

**SUBTOTAL** of Receipts This Page (optional) ..... ► **632.15**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	PAGE 107 / 155
	(check only one) <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

**A.** Full Name (Last, First, Middle Initial)  
First American Bank

Mailing Address P.O. Box 1688

City Athens State GA Zip Code 30603-1688

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

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3957.15

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	3	/	2	0	0	4

**Transaction ID:** C31294

Amount of Each Receipt this Period  
23.07

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

\*

**B.** Full Name (Last, First, Middle Initial)  
First American Bank

Mailing Address P.O. Box 1688

City Athens State GA Zip Code 30603-1688

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

Name of Employer Occupation

Receipt For: 2004  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3957.15

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	4

**Transaction ID:** C31301

Amount of Each Receipt this Period  
190.02

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

\*

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>213.09</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>845.24</b>

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		<b>Transaction ID: D1302</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 4
Mailing Address 200 Vesey Street		Amount of Each Disbursement this Period 64.40
City New York State NY Zip Code 10285	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit Card Acceptance Charge Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		<b>Transaction ID: D1720</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 4
Mailing Address 200 Vesey Street		Amount of Each Disbursement this Period 63.00
City New York State NY Zip Code 10285	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit Card Acceptance Charge Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. American Express</b>		<b>Transaction ID: D1715</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 4
Mailing Address 200 Vesey Street		Amount of Each Disbursement this Period 161.00
City New York State NY Zip Code 10285	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit Card Acceptance Charge Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	288.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Ashe Sales</b>		<b>Transaction ID: D1374</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 4
Mailing Address 505 Fairway Ct		Amount of Each Disbursement this Period 5311.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Newnan State GA Zip Code 30265	Purpose of Disbursement Research Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Bellsouth</b>		<b>Transaction ID: D1334</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 4
Mailing Address 85 Annex		Amount of Each Disbursement this Period 913.64 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30385	Purpose of Disbursement Telephone bill Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Bellsouth</b>		<b>Transaction ID: D1373</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 4
Mailing Address 85 Annex		Amount of Each Disbursement this Period 862.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30385	Purpose of Disbursement Telephone Bill Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7087.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

<b>A. Bellsouth</b> Full Name (Last, First, Middle Initial) Mailing Address 85 Annex City Atlanta State GA Zip Code 30385 Purpose of Disbursement Telephone Bill Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1420</b> Date of Disbursement 06 / 25 / 2004 Amount of Each Disbursement this Period 862.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>B. Bill O'Brien</b> Full Name (Last, First, Middle Initial) Mailing Address Dekalb County Police City State Zip Code Purpose of Disbursement Television Shoot Security Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1408</b> Date of Disbursement 06 / 18 / 2004 Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<b>C. Cardservice Int.</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. BOX 5180 City Simi Valley State CA Zip Code 93062-5180 Purpose of Disbursement Credit Card Acceptance Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1303</b> Date of Disbursement 04 / 06 / 2004 Amount of Each Disbursement this Period 152.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1265.15
<b>TOTAL</b> 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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Cardservice Int.</b>		<b>Transaction ID:</b> D1366 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 4
Mailing Address P.O. BOX 5180		Amount of Each Disbursement this Period 99.92
City Simi Valley State CA Zip Code 93062-5180	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit Card Acceptance Fee Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Cardservice Int.</b>		<b>Transaction ID:</b> D1446 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 4
Mailing Address P.O. BOX 5180		Amount of Each Disbursement this Period 90.40
City Simi Valley State CA Zip Code 93062-5180	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit Card Acceptance Fee Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Cardservice Int.</b>		<b>Transaction ID:</b> D1445 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 4
Mailing Address P.O. BOX 5180		Amount of Each Disbursement this Period 148.39
City Simi Valley State CA Zip Code 93062-5180	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit Card Acceptance Fee Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	338.71
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Democratic Party of Georgia</b>		<b>Transaction ID: D1356</b> Date of Disbursement 04 / 27 / 2004
Mailing Address 1100 Spring Street Suite 710		Amount of Each Disbursement this Period 4641.00
City Atlanta State GA Zip Code 30309	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Qualifying Fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. First American Bank</b>		<b>Transaction ID: D1705</b> Date of Disbursement 04 / 12 / 2004
Mailing Address P.O. Box 1688		Amount of Each Disbursement this Period 5.00
City Athens State GA Zip Code 30603-1688	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit Card Acceptance Charge	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. First American Bank</b>		<b>Transaction ID: D1706</b> Date of Disbursement 05 / 12 / 2004
Mailing Address P.O. Box 1688		Amount of Each Disbursement this Period 5.00
City Athens State GA Zip Code 30603-1688	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit Card Acceptance Charge	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4651.00
<b>TOTAL</b> 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 113 / 155

<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. First American Bank</b>		<b>Transaction ID: D1707</b> Date of Disbursement 06 / 12 / 2004
Mailing Address P.O. Box 1688		Amount of Each Disbursement this Period 5.00
City Athens State GA Zip Code 30603-1688	Purpose of Disbursement Credit Card Acceptance Charge Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>B. First American Bank</b>		<b>Transaction ID: D2288</b> Date of Disbursement 06 / 16 / 2004
Mailing Address P.O. Box 1688		Amount of Each Disbursement this Period 10.00
City Athens State GA Zip Code 30603-1688	Purpose of Disbursement Wire Transfer Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>C. First American Bank</b>		<b>Transaction ID: D2289</b> Date of Disbursement 06 / 22 / 2004
Mailing Address P.O. Box 1688		Amount of Each Disbursement this Period 10.00
City Athens State GA Zip Code 30603-1688	Purpose of Disbursement Wire Transfer Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	25.00
<b>TOTAL</b> 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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. FMG</b>		<b>Transaction ID: D1338</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 4
Mailing Address 5 Keyser Woods Court		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 Baltimore State MD Zip Code 21208		
Purpose of Disbursement Fundraising Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FMG</b>		<b>Transaction ID: D1339</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 4
Mailing Address 5 Keyser Woods Court		Amount of Each Disbursement this Period 474.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Baltimore State MD Zip Code 21208		
Purpose of Disbursement Travel expenses Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FMG</b>		<b>Transaction ID: D1387</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 8 / 2 0 0 4
Mailing Address 5 Keyser Woods Court		Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Baltimore State MD Zip Code 21208		
Purpose of Disbursement Fundraising Consulting Services Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4474.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Fuquay Varina Adv.</b>		<b>Transaction ID:</b> D1406 Date of Disbursement 06 / 16 / 2004
Mailing Address P.O. Box 1059		Amount of Each Disbursement this Period 70100.00
City Fuquay Varina State NC Zip Code 27526	Purpose of Disbursement Advertising Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>B. Fuquay Varina Adv.</b>		<b>Transaction ID:</b> D1419 Date of Disbursement 06 / 23 / 2004
Mailing Address P.O. Box 1059		Amount of Each Disbursement this Period 54000.00
City Fuquay Varina State NC Zip Code 27526	Purpose of Disbursement Advertising Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>C. Georgia Department of Labor</b>		<b>Transaction ID:</b> D1342 Date of Disbursement 04 / 13 / 2004
Mailing Address Suite 642 148 International Blvd., NE		Amount of Each Disbursement this Period 391.50
City Atlanta State GA Zip Code 30303-1751	Purpose of Disbursement Quarterly Tax payment Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	124491.50
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Georgia Department of Revenue</b>		<b>Transaction ID: D1343</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 4
Mailing Address P.O. Box 740387		Amount of Each Disbursement this Period 121.16 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30374-0387	Purpose of Disbursement Withholding Taxes Candidate Name Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Georgia Department of Revenue</b>		<b>Transaction ID: D1454</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 4
Mailing Address P.O. Box 740387		Amount of Each Disbursement this Period 363.48 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30374-0387	Purpose of Disbursement Withholding Taxes Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Georgia Department of Revenue</b>		<b>Transaction ID: D1404</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 4
Mailing Address P.O. Box 740387		Amount of Each Disbursement this Period 136.16 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30374-0387	Purpose of Disbursement Withholding Taxes Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	620.80
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Georgia Power</b>		<b>Transaction ID: D1288</b> Date of Disbursement 04 / 01 / 2004
Mailing Address Bin 80001 2500 Patrick Henry Parkway		Amount of Each Disbursement this Period 74.19
City McDonough State GA Zip Code 30253-4298	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Electricity Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Georgia Power</b>		<b>Transaction ID: D1364</b> Date of Disbursement 05 / 04 / 2004
Mailing Address Bin 80001 2500 Patrick Henry Parkway		Amount of Each Disbursement this Period 107.61
City McDonough State GA Zip Code 30253-4298	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Electricity Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. A. J. Hancock</b>		<b>Transaction ID: D1347</b> Date of Disbursement 04 / 16 / 2004
Mailing Address 512 North Thomas St		Amount of Each Disbursement this Period 802.50
City Athens State GA Zip Code 30601	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Sign For Office Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>984.30</b>
<b>TOTAL</b> 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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. A. J. Hancock</b>		<b>Transaction ID: D1346</b> Date of Disbursement 04 / 16 / 2004	
Mailing Address 512 North Thomas St		Amount of Each Disbursement this Period 750.00	
City Athens State GA Zip Code 30601	Purpose of Disbursement Sign For Office Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	* in-kind received	

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		<b>Transaction ID: D1340</b> Date of Disbursement 04 / 13 / 2004	
Mailing Address Electronic payment		Amount of Each Disbursement this Period 758.52	
City Ogden State UT Zip Code 84201-0046	Purpose of Disbursement Payroll Taxes Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Internal Revenue Service</b>		<b>Transaction ID: D1341</b> Date of Disbursement 04 / 13 / 2004	
Mailing Address Electronic payment		Amount of Each Disbursement this Period 104.00	
City Ogden State UT Zip Code 84201-0046	Purpose of Disbursement Payroll Taxes Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1612.52</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		<b>Transaction ID: D1365</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 4
Mailing Address    Electronic payment		Amount of Each Disbursement this Period 2275.56 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Ogden	State UT	
Zip Code 84201-0046		
Purpose of Disbursement Payroll Taxes		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:    2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:                      District:		

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		<b>Transaction ID: D1398</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 4
Mailing Address    Electronic payment		Amount of Each Disbursement this Period 834.28 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Ogden	State UT	
Zip Code 84201-0046		
Purpose of Disbursement Payroll Taxes		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:    2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:                      District:		

Full Name (Last, First, Middle Initial) <b>C. Tharon Johnson</b>		<b>Transaction ID: D1414</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 4
Mailing Address    2570 Laurel Circle		Amount of Each Disbursement this Period 530.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta	State GA	
Zip Code 30311		
Purpose of Disbursement Political Services		
Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:    2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:                      District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3639.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Meredith Ashley Jones</b>		<b>Transaction ID: D1293</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 4
Mailing Address 2411 Southern Oak Drive		Amount of Each Disbursement this Period 198.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Marietta State GA Zip Code 30064	Purpose of Disbursement Health Insurance Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Meredith Ashley Jones</b>		<b>Transaction ID: D1292</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 4
Mailing Address 2411 Southern Oak Drive		Amount of Each Disbursement this Period 1216.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Marietta State GA Zip Code 30064	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Meredith Ashley Jones</b>		<b>Transaction ID: D1331</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 4
Mailing Address 2411 Southern Oak Drive		Amount of Each Disbursement this Period 198.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Marietta State GA Zip Code 30064	Purpose of Disbursement Health Insurance Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1612.20
<b>TOTAL</b> 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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Meredith Ashley Jones</b>		<b>Transaction ID: D1330</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 4
Mailing Address 2411 Southern Oak Drive		Amount of Each Disbursement this Period 1216.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Marietta State GA Zip Code 30064	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Meredith Ashley Jones</b>		<b>Transaction ID: D1349</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 4
Mailing Address 2411 Southern Oak Drive		Amount of Each Disbursement this Period 102.66 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Marietta State GA Zip Code 30064	Purpose of Disbursement Expenses Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Meredith Ashley Jones</b>		<b>Transaction ID: D1712</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 4
Mailing Address 2411 Southern Oak Drive		Amount of Each Disbursement this Period 1216.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Marietta State GA Zip Code 30064	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2535.06</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Meredith Ashley Jones</b>		<b>Transaction ID: D1368</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 4
Mailing Address 2411 Southern Oak Drive		Amount of Each Disbursement this Period 1216.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Marietta State GA Zip Code 30064	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Meredith Ashley Jones</b>		<b>Transaction ID: D1455</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 4
Mailing Address 2411 Southern Oak Drive		Amount of Each Disbursement this Period 36.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Marietta State GA Zip Code 30064	Purpose of Disbursement Travel Expenses Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Meredith Ashley Jones</b>		<b>Transaction ID: D1384</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 4
Mailing Address 2411 Southern Oak Drive		Amount of Each Disbursement this Period 60.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Marietta State GA Zip Code 30064	Purpose of Disbursement refreshments for event Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1313.13
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Meredith Ashley Jones</b>		<b>Transaction ID: D1385</b> Date of Disbursement 05 / 28 / 2004	
Mailing Address 2411 Southern Oak Drive		Amount of Each Disbursement this Period 1216.20	
City Marietta State GA Zip Code 30064	Purpose of Disbursement Salary Candidate Name	001 Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Meredith Ashley Jones</b>		<b>Transaction ID: D1401</b> Date of Disbursement 06 / 10 / 2004	
Mailing Address 2411 Southern Oak Drive		Amount of Each Disbursement this Period 1216.20	
City Marietta State GA Zip Code 30064	Purpose of Disbursement Salary Candidate Name	001 Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Julie Cutler</b>		<b>Transaction ID: D1379</b> Date of Disbursement 05 / 19 / 2004	
Mailing Address Compass Media Group 1415 North Dayton St		Amount of Each Disbursement this Period 2000.00	
City Chicago State IL Zip Code 60622	Purpose of Disbursement Direct Mail Consulting Fee Candidate Name	006 Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4432.40</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Julie Cutler</b>		<b>Transaction ID:</b> D1451 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4
Mailing Address Compass Media Group 1415 North Dayton St		Amount of Each Disbursement this Period 7591.28 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chicago	State IL	
Zip Code 60622	Purpose of Disbursement Direct Mail Consulting Fee	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>B. LEB Properties</b>		<b>Transaction ID:</b> D1291 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 4
Mailing Address 2141 W Broad Street		Amount of Each Disbursement this Period 1600.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Athens	State GA	
Zip Code 30606	Purpose of Disbursement Rent Through 5/04	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Roman Levit</b>		<b>Transaction ID:</b> D1287 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 4
Mailing Address 149 Morton Ave Apartment 2		Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Athens	State GA	
Zip Code 30605	Purpose of Disbursement Consulting Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12191.28
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

<b>A. Roman Levit</b> Full Name (Last, First, Middle Initial) Roman Levit Mailing Address 149 Morton Ave Apartment 2 City Athens State GA Zip Code 30605 Purpose of Disbursement Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: D1286</b> Date of Disbursement 04 / 01 / 2004 Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>B. Roman Levit</b> Full Name (Last, First, Middle Initial) Roman Levit Mailing Address 149 Morton Ave Apartment 2 City Athens State GA Zip Code 30605 Purpose of Disbursement Expense reimb Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: D2283</b> Date of Disbursement 04 / 13 / 2004 Amount of Each Disbursement this Period 374.55 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>C. Roman Levit</b> Full Name (Last, First, Middle Initial) Roman Levit Mailing Address 149 Morton Ave Apartment 2 City Athens State GA Zip Code 30605 Purpose of Disbursement Consulting fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: D1357</b> Date of Disbursement 04 / 15 / 2004 Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3574.55
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Roman Levit</b>		<b>Transaction ID: D1358</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 0 4
Mailing Address 149 Morton Ave Apartment 2		Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Athens State GA Zip Code 30605	Purpose of Disbursement Health Insurance Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Roman Levit</b>		<b>Transaction ID: D1362</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 4
Mailing Address 149 Morton Ave Apartment 2		Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Athens State GA Zip Code 30605	Purpose of Disbursement Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Roman Levit</b>		<b>Transaction ID: D1372</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 4
Mailing Address 149 Morton Ave Apartment 2		Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Athens State GA Zip Code 30605	Purpose of Disbursement Campaign Management Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6200.00
<b>TOTAL</b> 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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Roman Levit</b>		<b>Transaction ID: D1389</b> Date of Disbursement 06 / 01 / 2004
Mailing Address 149 Morton Ave Apartment 2		Amount of Each Disbursement this Period 200.00
City Athens State GA Zip Code 30605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Health Insurance Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Roman Levit</b>		<b>Transaction ID: D1388</b> Date of Disbursement 06 / 01 / 2004
Mailing Address 149 Morton Ave Apartment 2		Amount of Each Disbursement this Period 3000.00
City Athens State GA Zip Code 30605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Salary Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Roman Levit</b>		<b>Transaction ID: D1394</b> Date of Disbursement 06 / 01 / 2004
Mailing Address 149 Morton Ave Apartment 2		Amount of Each Disbursement this Period 80.00
City Athens State GA Zip Code 30605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Dinner For Volunteers Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3280.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

<b>A. Roman Levit</b> Full Name (Last, First, Middle Initial) Roman Levit		<b>Transaction ID:</b> D1412 <b>Date of Disbursement</b> 06 / 18 / 2004
Mailing Address 149 Morton Ave Apartment 2		Amount of Each Disbursement this Period 3000.00
City Athens State GA Zip Code 30605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Campaign management retainer Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>B. Roman Levit</b> Full Name (Last, First, Middle Initial) Roman Levit		<b>Transaction ID:</b> D1413 <b>Date of Disbursement</b> 06 / 18 / 2004
Mailing Address 149 Morton Ave Apartment 2		Amount of Each Disbursement this Period 803.70
City Athens State GA Zip Code 30605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Television Shoot Expenses Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>C. Waddleton Mark</b> Full Name (Last, First, Middle Initial) Waddleton Mark		<b>Transaction ID:</b> D1409 <b>Date of Disbursement</b> 06 / 18 / 2004
Mailing Address Dekalb County Police		Amount of Each Disbursement this Period 250.00
City State Zip Code	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Television Shoot Security Candidate Name		004 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4053.70
<b>TOTAL</b> 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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Sean Marvin</b>		<b>Transaction ID: D1295</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 4
Mailing Address 101 Mark Twain Circle Apartment B		Amount of Each Disbursement this Period 123.00
City Athens State GA Zip Code 30605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Health Insurance Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Sean Marvin</b>		<b>Transaction ID: D1294</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 4
Mailing Address 101 Mark Twain Circle Apartment B		Amount of Each Disbursement this Period 810.67
City Athens State GA Zip Code 30605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Salary Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Sean Marvin</b>		<b>Transaction ID: D2273</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 4
Mailing Address 101 Mark Twain Circle Apartment B		Amount of Each Disbursement this Period 33.50
City Athens State GA Zip Code 30605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	967.17
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Sean Marvin</b>		<b>Transaction ID: D1329</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 4
Mailing Address 101 Mark Twain Circle Apartment B		Amount of Each Disbursement this Period 126.00
City Athens State GA Zip Code 30605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Health Insurance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sean Marvin</b>		<b>Transaction ID: D1328</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 4
Mailing Address 101 Mark Twain Circle Apartment B		Amount of Each Disbursement this Period 810.67
City Athens State GA Zip Code 30605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Sean Marvin</b>		<b>Transaction ID: D1369</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 4
Mailing Address 101 Mark Twain Circle Apartment B		Amount of Each Disbursement this Period 989.04
City Athens State GA Zip Code 30605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1925.71
<b>TOTAL</b> 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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Sean Marvin</b>		<b>Transaction ID: D1386</b> Date of Disbursement 05 / 28 / 2004
Mailing Address 101 Mark Twain Circle Apartment B		Amount of Each Disbursement this Period 989.05
City Athens State GA Zip Code 30605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Salary 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: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sean Marvin</b>		<b>Transaction ID: D1402</b> Date of Disbursement 06 / 10 / 2004
Mailing Address 101 Mark Twain Circle Apartment B		Amount of Each Disbursement this Period 989.05
City Athens State GA Zip Code 30605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Salary 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: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Sean Marvin</b>		<b>Transaction ID: D1415</b> Date of Disbursement 06 / 21 / 2004
Mailing Address 101 Mark Twain Circle Apartment B		Amount of Each Disbursement this Period 128.49
City Athens State GA Zip Code 30605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Reimbursement for television shoot 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: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2106.59</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

<b>A. Mr. John J. Barrow</b> Full Name (Last, First, Middle Initial) Mailing Address 255 Milledge Heights City Athens State GA Zip Code 30606 Purpose of Disbursement Reimbursement Shoot expenses (Food) Candidate Name John Barrow Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12 Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1416</b> Date of Disbursement 06 / 22 / 2004 Amount of Each Disbursement this Period 1170.56 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>B. NGP Software</b> Full Name (Last, First, Middle Initial) Mailing Address 5039 Connecticut Ave NW Suite 1A City Washington State DC Zip Code 20008 Purpose of Disbursement FEC Reporting Software Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1335</b> Date of Disbursement 04 / 13 / 2004 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
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<b>C. Officemax</b> Full Name (Last, First, Middle Initial) Mailing Address 150 East Pierce Road City Itasca State IL Zip Code 60143 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1348</b> Date of Disbursement 04 / 19 / 2004 Amount of Each Disbursement this Period 125.03 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2295.59
<b>TOTAL</b> 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)  
Friends of John Barrow

<b>A. Officemax</b> Full Name (Last, First, Middle Initial) Mailing Address 150 East Pierce Road City Itasca State IL Zip Code 60143 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1375</b> Date of Disbursement 05 / 14 / 2004 Amount of Each Disbursement this Period 69.54 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>B. Officemax</b> Full Name (Last, First, Middle Initial) Mailing Address 150 East Pierce Road City Itasca State IL Zip Code 60143 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1418</b> Date of Disbursement 05 / 21 / 2004 Amount of Each Disbursement this Period 20.18 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>C. Officemax</b> Full Name (Last, First, Middle Initial) Mailing Address 150 East Pierce Road City Itasca State IL Zip Code 60143 Purpose of Disbursement Fundraising Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1441</b> Date of Disbursement 06 / 24 / 2004 Amount of Each Disbursement this Period 152.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	242.45
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Paycycle.com</b>		<b>Transaction ID: D1576</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 4	
Mailing Address 210 Portage Avenue		Amount of Each Disbursement this Period 39.99	
City Palo Alto State CA Zip Code 94306-2242	Purpose of Disbursement Service Fee Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

Full Name (Last, First, Middle Initial) <b>B. Paycycle.com</b>		<b>Transaction ID: D1577</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 4	
Mailing Address 210 Portage Avenue		Amount of Each Disbursement this Period 39.99	
City Palo Alto State CA Zip Code 94306-2242	Purpose of Disbursement Service Fee Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

Full Name (Last, First, Middle Initial) <b>C. Paycycle.com</b>		<b>Transaction ID: D1578</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 4	
Mailing Address 210 Portage Avenue		Amount of Each Disbursement this Period 39.99	
City Palo Alto State CA Zip Code 94306-2242	Purpose of Disbursement Service Fee Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	119.97
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Plains T-shirt Company</b>		<b>Transaction ID:</b> D1297 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 4
Mailing Address 10 Sarah St		Amount of Each Disbursement this Period 1144.22 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Plains State PA Zip Code 18705		
Purpose of Disbursement Tshirts Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Scana Energy</b>		<b>Transaction ID:</b> D1289 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 4
Mailing Address P.O. Box 100157		Amount of Each Disbursement this Period 203.18 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Columbia State SC Zip Code 29202-3157		
Purpose of Disbursement Natural Gas Bill Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Scana Energy</b>		<b>Transaction ID:</b> D1350 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 4
Mailing Address P.O. Box 100157		Amount of Each Disbursement this Period 86.14 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Columbia State SC Zip Code 29202-3157		
Purpose of Disbursement Natural Gas Bill Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1433.54
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Scana Energy</b>		<b>Transaction ID: D1380</b> Date of Disbursement 05 / 19 / 2004
Mailing Address P.O. Box 100157		Amount of Each Disbursement this Period 62.80
City Columbia State SC Zip Code 29202-3157	Purpose of Disbursement Natural Gas Bill Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>B. Scana Energy</b>		<b>Transaction ID: D1421</b> Date of Disbursement 06 / 25 / 2004
Mailing Address P.O. Box 100157		Amount of Each Disbursement this Period 54.57
City Columbia State SC Zip Code 29202-3157	Purpose of Disbursement Natural Gas Bill Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>C. Steelech</b>		<b>Transaction ID: D1351</b> Date of Disbursement 04 / 26 / 2004
Mailing Address 7 East Congress Suite 712		Amount of Each Disbursement this Period 172.35
City Savannah State GA Zip Code 31401	Purpose of Disbursement Web Hosting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	289.72
<b>TOTAL</b> 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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Talking Heads Media</b>		<b>Transaction ID:</b> D1285 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 4
Mailing Address 684 Gresham St		Amount of Each Disbursement this Period 1750.00
City Atlanta State GA Zip Code 30316	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Political Consulting Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Talking Heads Media</b>		<b>Transaction ID:</b> D1336 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 4
Mailing Address 684 Gresham St		Amount of Each Disbursement this Period 1750.00
City Atlanta State GA Zip Code 30316	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Political Consulting Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Talking Heads Media</b>		<b>Transaction ID:</b> D1337 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 4
Mailing Address 684 Gresham St		Amount of Each Disbursement this Period 200.00
City Atlanta State GA Zip Code 30316	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Miscellaneous Expense Stipend Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Talking Heads Media</b>		<b>Transaction ID: D1363</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 4
Mailing Address 684 Gresham St		Amount of Each Disbursement this Period 1750.00
City Atlanta State GA Zip Code 30316	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Political Consulting	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Talking Heads Media</b>		<b>Transaction ID: D1456</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 4
Mailing Address 684 Gresham St		Amount of Each Disbursement this Period 300.00
City Atlanta State GA Zip Code 30316	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Political Consulting	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Talking Heads Media</b>		<b>Transaction ID: D1371</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 4
Mailing Address 684 Gresham St		Amount of Each Disbursement this Period 1750.00
City Atlanta State GA Zip Code 30316	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Political Consulting	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3800.00
<b>TOTAL</b> 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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Talking Heads Media</b>		<b>Transaction ID:</b> D1377 Date of Disbursement 05 / 15 / 2004
Mailing Address 684 Gresham St		Amount of Each Disbursement this Period 142.11
City Atlanta State GA Zip Code 30316	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Health Insurance	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Talking Heads Media</b>		<b>Transaction ID:</b> D1376 Date of Disbursement 05 / 15 / 2004
Mailing Address 684 Gresham St		Amount of Each Disbursement this Period 151.89
City Atlanta State GA Zip Code 30316	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Travel Expenses	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. The Mellman Group</b>		<b>Transaction ID:</b> D1333 Date of Disbursement 04 / 13 / 2004
Mailing Address 1000 Thomas Jefferson Street, NW Suite 520		Amount of Each Disbursement this Period 712.66
City Washington State DC Zip Code 20007	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Travel Expenses	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1006.66
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. The Mellman Group</b>		<b>Transaction ID:</b> D1422 Date of Disbursement 06 / 25 / 2004
Mailing Address 1000 Thomas Jefferson Street, NW Suite 520		Amount of Each Disbursement this Period 29013.83
City Washington State DC Zip Code 20007	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Polling Costs	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Tucker Castleberry Printing</b>		<b>Transaction ID:</b> D1396 Date of Disbursement 06 / 02 / 2004
Mailing Address 3500 Mccall Place		Amount of Each Disbursement this Period 1337.50
City Atlanta State GA Zip Code 30340	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Primary Election Letterhead and Envelope	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		<b>Transaction ID:</b> D1290 Date of Disbursement 04 / 01 / 2004
Mailing Address P.O. Box 505820		Amount of Each Disbursement this Period 81.49
City The Lakes State NV Zip Code 88905-5820	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Delivery	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>30432.82</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

<b>A. UPS</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 505820 City The Lakes State NV Zip Code 88905-5820 Purpose of Disbursement Delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1332</b> Date of Disbursement 04 / 13 / 2004 Amount of Each Disbursement this Period 38.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>B. UPS</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 505820 City The Lakes State NV Zip Code 88905-5820 Purpose of Disbursement Delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1355</b> Date of Disbursement 04 / 27 / 2004 Amount of Each Disbursement this Period 28.71 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>C. USPS</b> Full Name (Last, First, Middle Initial) Mailing Address 196 Alps Rd Suite 48 City Athens State GA Zip Code 30606 Purpose of Disbursement Stamps Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1378</b> Date of Disbursement 05 / 17 / 2004 Amount of Each Disbursement this Period 185.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	251.96
<b>TOTAL</b> 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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		<b>Transaction ID: D1395</b> Date of Disbursement 06 / 01 / 2004
Mailing Address 196 Alps Rd Suite 48		Amount of Each Disbursement this Period 370.00
City Athens State GA Zip Code 30606	Purpose of Disbursement Stamps Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		<b>Transaction ID: D1399</b> Date of Disbursement 06 / 07 / 2004
Mailing Address 196 Alps Rd Suite 48		Amount of Each Disbursement this Period 555.00
City Athens State GA Zip Code 30606	Purpose of Disbursement Stamps Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		<b>Transaction ID: D1442</b> Date of Disbursement 06 / 24 / 2004
Mailing Address 196 Alps Rd Suite 48		Amount of Each Disbursement this Period 92.00
City Athens State GA Zip Code 30606	Purpose of Disbursement Stamps Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1017.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		<b>Transaction ID:</b> D1440 Date of Disbursement 06 / 24 / 2004
Mailing Address 196 Alps Rd Suite 48		Amount of Each Disbursement this Period 185.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Athens State GA Zip Code 30606		
Purpose of Disbursement Stamps	Category/ Type 003	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. John J. Barrow</b>		<b>Transaction ID:</b> D1296 Date of Disbursement 04 / 02 / 2004
Mailing Address 255 Milledge Heights		Amount of Each Disbursement this Period 1698.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Athens State GA Zip Code 30606		
Purpose of Disbursement Travel and Tshirt Expense Reimbursement	Category/ Type	
Candidate Name John Barrow Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District: 12		

Full Name (Last, First, Middle Initial) <b>C. Continental Airlines</b>		<b>Transaction ID:</b> D1299 Date of Disbursement 04 / 02 / 2004
Mailing Address 3490 Piedmont Rd NE Suite 102		Amount of Each Disbursement this Period 255.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
City Atlanta State GA Zip Code 30305		
Purpose of Disbursement Plane Tickets	Category/ Type	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1883.82
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Delta Air Lines</b>		Transaction ID: D1298 Date of Disbursement 04 / 02 / 2004	
Mailing Address P.O. Box 20980		Amount of Each Disbursement this Period 239.20	
City Atlanta State GA Zip Code 30320	Purpose of Disbursement Plane Tickets	<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: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>B. Mr. John J. Barrow</b>		Transaction ID: D1354 Date of Disbursement 04 / 26 / 2004	
Mailing Address 255 Milledge Heights		Amount of Each Disbursement this Period 296.40	
City Athens State GA Zip Code 30606	Purpose of Disbursement Travel Reimbursement	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name John Barrow	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. US Airways</b>		Transaction ID: D1353 Date of Disbursement 04 / 26 / 2004	
Mailing Address 2345 Crystal Drive		Amount of Each Disbursement this Period 272.40	
City Arlington State VA Zip Code 22227	Purpose of Disbursement Reimbursement for Travel Expenses	<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: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	296.40
<b>TOTAL</b> 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 145 / 155

<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)  
Friends of John Barrow

<b>A. Roman Levit</b> Full Name (Last, First, Middle Initial) Mailing Address 149 Morton Ave Apartment 2 City Athens State GA Zip Code 30605 Purpose of Disbursement Office Equipment Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1359</b> Date of Disbursement 04 / 29 / 2004 Amount of Each Disbursement this Period 341.37 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>B. Mr. John J. Barrow</b> Full Name (Last, First, Middle Initial) Mailing Address 255 Milledge Heights City Athens State GA Zip Code 30606 Purpose of Disbursement Travel and Misc. Expenses Candidate Name John Barrow Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12 Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1381</b> Date of Disbursement 05 / 25 / 2004 Amount of Each Disbursement this Period 453.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<b>C. Bellsouth</b> Full Name (Last, First, Middle Initial) Mailing Address 85 Annex City Atlanta State GA Zip Code 30385 Purpose of Disbursement Long Distance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D1383</b> Date of Disbursement 05 / 25 / 2004 Amount of Each Disbursement this Period 46.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	794.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Delta Air Lines</b>		Transaction ID: D1382 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 4
Mailing Address P.O. Box 20980		Amount of Each Disbursement this Period 340.40
City Atlanta State GA Zip Code 30320	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Plane Tickets	Candidate Name	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Roman Levit</b>		Transaction ID: D1390 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 4
Mailing Address 149 Morton Ave Apartment 2		Amount of Each Disbursement this Period 87.73
City Athens State GA Zip Code 30605	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies	Candidate Name	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Officemax</b>		Transaction ID: D1393 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 4
Mailing Address 150 East Pierce Road		Amount of Each Disbursement this Period 87.73
City Itasca State IL Zip Code 60143	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies	Candidate Name	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	87.73
<b>TOTAL</b> 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 147 / 155

<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)  
Friends of John Barrow

Full Name (Last, First, Middle Initial) <b>A. Roman Levit</b>		<b>Transaction ID: D1391</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 4
Mailing Address 149 Morton Ave Apartment 2		Amount of Each Disbursement this Period 87.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Athens State GA Zip Code 30605	Purpose of Disbursement Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 001

Full Name (Last, First, Middle Initial) <b>B. Officemax</b>		<b>Transaction ID: D1392</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 4
Mailing Address 150 East Pierce Road		Amount of Each Disbursement this Period 87.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
City Itasca State IL Zip Code 60143	Purpose of Disbursement Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 001

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

87.73

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

241410.98

**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 148 / 155 FOR LINE NUMBER: (check only one) <table style="float: right; margin-left: 10px;"> <tr> <td style="border: 1px solid black; width: 20px; text-align: center;"><input checked="" type="checkbox"/></td> <td style="padding-left: 5px;">13a</td> </tr> <tr> <td style="border: 1px solid black; width: 20px; text-align: center;"><input type="checkbox"/></td> <td style="padding-left: 5px;">13b</td> </tr> </table>	<input checked="" type="checkbox"/>	13a	<input type="checkbox"/>	13b
<input checked="" type="checkbox"/>	13a				
<input type="checkbox"/>	13b				

NAME OF COMMITTEE (In Full)  
 Friends of John Barrow

**Transaction ID: L3**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Mr. John Barrow (Personal Funds)	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 255 Milledge Heights	
City Athens State GA ZIP Code 30606	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
15000.00	0.00	15000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:						
<table style="font-size: small;"> <tr> <td style="border: 1px solid black; padding: 2px;">M M</td> <td style="border: 1px solid black; padding: 2px;">D D</td> <td style="border: 1px solid black; padding: 2px;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 3</td> <td style="text-align: center;">3 1</td> <td style="text-align: center;">2 0 0 3</td> </tr> </table>	M M	D D	Y Y Y Y	0 3	3 1	2 0 0 3	20050101	0 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
M M	D D	Y Y Y Y							
0 3	3 1	2 0 0 3							

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial) Mr. John Barrow	Name of Employer Winburn, Lewis, Barrow, and Stolz PC
Mailing Address 255 Milledge Heights	Occupation Attorney
City Athens State GA ZIP Code 30606	Amount Guaranteed Outstanding: 15000.00
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional) ..... ▶	15000.00
<b>TOTALS</b> This Period (last page in this line only) ..... ▶	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 149 / 155
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)  
Friends of John Barrow

**Transaction ID: L2**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Mr. John Barrow (Personal Funds)	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 255 Milledge Heights	
City Athens State GA ZIP Code 30606	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M M 0 2 D D 0 4 Y Y Y Y 2 0 0 3	20050101	0 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial) Mr. John Barrow	Name of Employer Winburn, Lewis, Barrow, and Stolz PC
Mailing Address 255 Milledge Heights	Occupation Attorney
City Athens State GA ZIP Code 30606	Amount Guaranteed Outstanding: 10000.00
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional) .....	10000.00
<b>TOTALS</b> This Period (last page in this line only) .....	25000.00
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

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

(Use separate schedule(s) for each numbered line)	PAGE 150 / 155
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 Friends of John Barrow

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. John Barrow	Nature of Debt (Purpose): In Kind : Rent
Mailing Address 255 Milledge Heights	
City State ZIP Code Athens GA 30606	

Outstanding Balance Beginning This Period <input type="text" value="200.00"/>	<b>Transaction ID: D1202</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="200.00"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. John Barrow	Nature of Debt (Purpose): In Kind: Mileage
Mailing Address 255 Milledge Heights	
City State ZIP Code Athens GA 30606	

Outstanding Balance Beginning This Period <input type="text" value="1804.20"/>	<b>Transaction ID: D1193</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1804.20"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. John Barrow	Nature of Debt (Purpose): In Kind: Rent
Mailing Address 255 Milledge Heights	
City State ZIP Code Athens GA 30606	

Outstanding Balance Beginning This Period <input type="text" value="200.00"/>	<b>Transaction ID: D1196</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="200.00"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="2204.20"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
 Friends of John Barrow

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Mr. John Barrow			Nature of Debt (Purpose): In Kind: Rent
Mailing Address 255 Milledge Heights			
City Athens	State GA	ZIP Code 30606	

Outstanding Balance Beginning This Period 200.00		<b>Transaction ID: D1197</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Mr. John Barrow			Nature of Debt (Purpose): In Kind: Rent
Mailing Address 255 Milledge Heights			
City Athens	State GA	ZIP Code 30606	

Outstanding Balance Beginning This Period 200.00		<b>Transaction ID: D1198</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Mr. John Barrow			Nature of Debt (Purpose): In Kind: Rent
Mailing Address 255 Milledge Heights			
City Athens	State GA	ZIP Code 30606	

Outstanding Balance Beginning This Period 200.00		<b>Transaction ID: D1199</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶ 600.00
<b>2) TOTALS</b> This Period (last page this line number only).....	▶
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶

**SCHEDULE D (FEC Form 3 )**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 152 / 155
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Friends of John Barrow

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. John Barrow	Nature of Debt (Purpose): In Kind: Rent
Mailing Address 255 Milledge Heights	
City State ZIP Code Athens GA 30606	

Outstanding Balance Beginning This Period 200.00	<b>Transaction ID: D1192</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. John Barrow	Nature of Debt (Purpose): In Kind: Rent
Mailing Address 255 Milledge Heights	
City State ZIP Code Athens GA 30606	

Outstanding Balance Beginning This Period 200.00	<b>Transaction ID: D1201</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. John Barrow	Nature of Debt (Purpose): In Kind: Mileage
Mailing Address 255 Milledge Heights	
City State ZIP Code Athens GA 30606	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: D1439</b>	
Amount Incurred This Period 3892.73	Payment This Period 0.00	Outstanding Balance at Close of This Period 3892.73

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	4292.73
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	



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

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
 Friends of John Barrow

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Mr. John Barrow			Nature of Debt (Purpose): In Kind: Rent
Mailing Address 255 Milledge Heights			
City Athens	State GA	ZIP Code 30606	

Outstanding Balance Beginning This Period 200.00		<b>Transaction ID: D1203</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Mr. John Barrow			Nature of Debt (Purpose): In Kind: Rent
Mailing Address 255 Milledge Heights			
City Athens	State GA	ZIP Code 30606	

Outstanding Balance Beginning This Period 200.00		<b>Transaction ID: D1204</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Mr. John Barrow			Nature of Debt (Purpose): In Kind: Rent
Mailing Address 255 Milledge Heights			
City Athens	State GA	ZIP Code 30606	

Outstanding Balance Beginning This Period 200.00		<b>Transaction ID: D1205</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶ 600.00
<b>2) TOTALS</b> This Period (last page this line number only).....	▶
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶

**SCHEDULE D (FEC Form 3 )**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 154 / 155
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Friends of John Barrow

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. John Barrow	Nature of Debt (Purpose): In Kind: Rent
Mailing Address 255 Milledge Heights	
City State ZIP Code Athens GA 30606	

Outstanding Balance Beginning This Period <input type="text" value="200.00"/>	<b>Transaction ID: D1206</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="200.00"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. John Barrow	Nature of Debt (Purpose): In Kind: Mileage
Mailing Address 255 Milledge Heights	
City State ZIP Code Athens GA 30606	

Outstanding Balance Beginning This Period <input type="text" value="3785.78"/>	<b>Transaction ID: D1309</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3785.78"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. John Barrow	Nature of Debt (Purpose): In Kind: Mileage
Mailing Address 255 Milledge Heights	
City State ZIP Code Athens GA 30606	

Outstanding Balance Beginning This Period <input type="text" value="2046.56"/>	<b>Transaction ID: D1345</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2046.56"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="6032.34"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

(Use separate schedule(s) for each numbered line)	PAGE 155 / 155	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 Friends of John Barrow

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. John Barrow	Nature of Debt (Purpose): In Kind: Rent
Mailing Address 255 Milledge Heights	
City State ZIP Code Athens GA 30606	

Outstanding Balance Beginning This Period	<b>Transaction ID: D1200</b>	
200.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	200.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	200.00
2) <b>TOTALS</b> This Period (last page this line number only).....	13929.27
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	