

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 6552
 Check if different than previously reported. (ACC)
Las Cruces NM 88006

2. **FEC IDENTIFICATION NUMBER** C00433953
CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
NM 02

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

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

5. Covering Period 01 01 2008 through 03 31 2008

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

Signature of Treasurer Electronically Filed by Mary Lujan Date 04 14 2008

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Bill McCamley for Congress

Report Covering the Period: From:

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

To:

M M D D Y Y Y Y
0 3 3 1 2 0 0 8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	84889.07	350284.97
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	800.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	84889.07	349484.97
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	61470.53	120484.44
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	6600.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	61470.53	113884.44
8. Cash on Hand at Close of Reporting Period (from Line 27).....	235944.89	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
Bill McCamley for Congress

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	67823.04	287668.04
(ii) Unitemized.....	14899.63	37499.31
(iii) TOTAL of contributions from individuals..... ▶	82722.67	325167.35
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	0.00	16400.00
(d) The Candidate.....	2166.40	8717.62
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	84889.07	350284.97
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	6600.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	124.99	344.36
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	85014.06	357229.33

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	61470.53	120484.44
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	800.00
(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	800.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	61470.53	121284.44

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	212401.36
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	85014.06
25. SUBTOTAL (add Line 23 and Line 24).....	297415.42
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	61470.53
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	235944.89

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

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

Mailing Address PO Box 278

City State Zip Code
Santa Fe NM 87504-0278

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt MM / DD / YYYY
03 / 21 / 2008

Transaction ID: C4641032

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)
Charles Alfero

Mailing Address 2 Latigo Trail

City State Zip Code
Silver City NM 88061

FEC ID number of contributing federal political committee. C

Name of Employer NM Health Resources Occupation Director

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt MM / DD / YYYY
03 / 18 / 2008

Transaction ID: C4641037

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)
Charmay B Allred

Mailing Address 1428 Canada Del Sur

City State Zip Code
Santa Fe NM 87501

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 800.00

Date of Receipt MM / DD / YYYY
03 / 19 / 2008

Transaction ID: C4642895

Amount of Each Receipt this Period 300.00

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

SUBTOTAL of Receipts This Page (optional) 1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 139

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Sally Anderson

Mailing Address PO Box 1

City Roswell State NM Zip Code 88202

FEC ID number of contributing federal political committee. C

Name of Employer none Occupation homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY
03 / 19 / 2008

Transaction ID: C4640176

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)
Oscar Andrade

Mailing Address 3205 Sundown Road

City Las Cruces State NM Zip Code 88011

FEC ID number of contributing federal political committee. C

Name of Employer Pic Quik Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
03 / 31 / 2008

Transaction ID: C4644979

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)
Jarratt Applewhite

Mailing Address PO Box 5673

City Santa Fe State NM Zip Code 87502-5673

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
01 / 22 / 2008

Transaction ID: C4565933

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) 2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Dan Babcock

Mailing Address 37 Claraboya LP

City Alamogordo State NM Zip Code 88310

FEC ID number of contributing federal political committee. C

Name of Employer Otero Federal Credit Union Occupation Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
03 / 31 / 2008

Transaction ID: C4644956

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)
Denise Bagwell

Mailing Address 205 Old Mill Rd.
PO Box 18

City Fairacres State NM Zip Code 88033

FEC ID number of contributing federal political committee. C

Name of Employer None Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY
03 / 26 / 2008

Transaction ID: C4642896

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)
Philip Alan Banks

Mailing Address 5645 Spanish Pointe Rd.

City Las Cruces State NM Zip Code 88007

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Ag Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1800.00

Date of Receipt MM / DD / YYYY
03 / 20 / 2008

Transaction ID: C4640506

Amount of Each Receipt this Period 300.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Betty Beagles

Mailing Address PO Box 2167

City Roswell State NM Zip Code 88202

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

Name of Employer Self Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt MM / DD / YYYY
03 / 31 / 2008

Transaction ID: C4644963

Amount of Each Receipt this Period
2300.00

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

B.

Full Name (Last, First, Middle Initial)
Virgil Beagles

Mailing Address PO Box 2167

City Roswell State NM Zip Code 88202

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

Name of Employer Self-employed Occupation Contractor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1300.00

Date of Receipt MM / DD / YYYY
03 / 31 / 2008

Transaction ID: C4644962

Amount of Each Receipt this Period
1300.00

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

C.

Full Name (Last, First, Middle Initial)
Herbert A Beebe

Mailing Address PO Box 3458

City Las Cruces State NM Zip Code 88003

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt MM / DD / YYYY
03 / 23 / 2008

Transaction ID: C4642902

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) ► **3850.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 139
	(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)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Diana Bell		Date of Receipt MM / DD / YYYY 01 / 08 / 2008
	Mailing Address 12710 Lucca Road SW		Transaction ID: C4553651
	City Deming	State NM	Zip Code 88030
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer Retired	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1200.00		

B.	Full Name (Last, First, Middle Initial) Diana Bell		Date of Receipt MM / DD / YYYY 03 / 24 / 2008
	Mailing Address 12710 Lucca Road SW		Transaction ID: C4644968
	City Deming	State NM	Zip Code 88030
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Retired	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1200.00		

C.	Full Name (Last, First, Middle Initial) Phillip E. Born, JR		Date of Receipt MM / DD / YYYY 02 / 04 / 2008
	Mailing Address 2205 S. Solano		Transaction ID: C4572510
	City Las Cruces	State NM	Zip Code 88001
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Self	Occupation Dentist	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Russell Bradburd

Mailing Address 440 W. Las Cruces Ave

City Las Cruces State NM Zip Code 88005

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

Name of Employer NMSU Occupation Professor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt 03 / 21 / 2008

Transaction ID: C4641034

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)
Adan Briones

Mailing Address 2613 Justus

City El Paso State TX Zip Code 79930

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

Name of Employer None Occupation Student

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 17 / 2008

Transaction ID: C4640502

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)
Sandy Buffett

Mailing Address 369 Montezuma Ave #206

City Santa Fe State NM Zip Code 87501

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

Name of Employer Conservation Voters NM Occupation Non-profit Executive Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 800.00

Date of Receipt 03 / 21 / 2008

Transaction ID: C4642956

Amount of Each Receipt this Period 400.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Raul A. Carrillo, Jr.

Mailing Address 3915 Powers Drive

City State Zip Code
Las Cruces NM 88012

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

Name of Employer Self Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2008

Transaction ID: C4644974

Amount of Each Receipt this Period
1800.00

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

B.

Full Name (Last, First, Middle Initial)
Marie Chase

Mailing Address 304 Buena Vista Circle Apt 211E

City State Zip Code
Las Cruces NM 88011

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2008

Transaction ID: C4640525

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)
Priscilla D. Chavez

Mailing Address 4692 Forest Park Drive

City State Zip Code
Las Cruces NM 88007

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 28 / 2008

Transaction ID: C4642753

Amount of Each Receipt this Period
300.00

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

SUBTOTAL of Receipts This Page (optional) ► **2600.00**

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

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

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

FOR LINE NUMBER: PAGE 12 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
John Colquitt
Mailing Address 301 Paseo real Drive
City State Zip Code
Chaparral NM 88081
FEC ID number of contributing federal political committee. **C**
Name of Employer Colquitt Company Occupation President/Land Developer
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y
0 2 / 0 6 / 2 0 0 8
Transaction ID: C4574191
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)
Cosme Delgado
Mailing Address 5248 Stagecoach Lane
City State Zip Code
Las Cruces NM 88011
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Juvenile Correctional Officer Speciali
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1500.00
Date of Receipt
M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 8
Transaction ID: C4644970
Amount of Each Receipt this Period
1500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Peter Diamandis
Mailing Address 11755 Wilshire Blvd #900
City State Zip Code
Los Angeles CA 90025
FEC ID number of contributing federal political committee. **C**
Name of Employer X-Prize Foundation Occupation CEO
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 600.00
Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 0 8
Transaction ID: C4644980
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) ► 2100.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Jeffrey Diamond
Mailing Address PO Box 1866
City Carlsbad State NM Zip Code 88221
FEC ID number of contributing federal political committee. C
Name of Employer Paine-blenden and Diamond Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
2000.00

Date of Receipt 01 / 31 / 2008
Transaction ID: C4566924
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)
Nancy Dickenson
Mailing Address 35 Tano
City Santa Fe State NM Zip Code 87506
FEC ID number of contributing federal political committee. C
Name of Employer Self Occupation Rancher
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
900.00

Date of Receipt 03 / 24 / 2008
Transaction ID: C4642863
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)
David Duhigg
Mailing Address 1750 Shadyside Dr SW
City Albuquerque State NM Zip Code 87105
FEC ID number of contributing federal political committee. C
Name of Employer Duhigg, Crohin, Spring & Berlin Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
500.00

Date of Receipt 01 / 01 / 2008
Transaction ID: C4553647
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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

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

Mailing Address 1750 Shadyside Dr SW

City State Zip Code
Albuquerque NM 87105

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

Name of Employer Occupation
Duhigg, Cronin, Spring & Berlin Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
01 / 01 / 2008

Transaction ID: C4553648

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 Floyd

Mailing Address PO Box 100

City State Zip Code
Mesilla NM 88046

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

Name of Employer Occupation
Self Builder

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 25 / 2008

Transaction ID: C4642765

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)
Jim Foy

Mailing Address PO Box 2615

City State Zip Code
Silver City NM 88062

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

Name of Employer Occupation
Jim Foy & Associates Lawyer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 07 / 2008

Transaction ID: C4639604

Amount of Each Receipt this Period
300.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Philip Gaddy

Mailing Address 2025 San Pedro NE

City State Zip Code
Albuquerque NM 87110

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

Name of Employer self Occupation
attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 31 / 2008

Transaction ID: C4646149

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)
Thomas M. Gale

Mailing Address 3115 Majestic Ridge

City State Zip Code
Las Cruces NM 88011

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

Name of Employer Retired Occupation
Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
02 / 15 / 2008

Transaction ID: C4575600

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)
J.E. Gallegos

Mailing Address 460 Saint Michaels Drive

City State Zip Code
Santa Fe NM 87505

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

Name of Employer Retired Occupation
Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 31 / 2008

Transaction ID: C4646322

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) ► **1450.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Gerald Gammell		Date of Receipt MM / DD / YYYY 02 / 20 / 2008
	Mailing Address 4975 Mother Lode Trail		Transaction ID: C4648438
	City Las Cruces	State NM	Zip Code 88011
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.81
	Name of Employer Retired	Occupation Psychiatrist	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 907.08	* In-Kind: Gas for driving candidate
---	------------------------------------	--------------------------------------

B.	Full Name (Last, First, Middle Initial) Gerald Gammell		Date of Receipt MM / DD / YYYY 02 / 23 / 2008
	Mailing Address 4975 Mother Lode Trail		Transaction ID: C4648439
	City Las Cruces	State NM	Zip Code 88011
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.10
	Name of Employer Retired	Occupation Psychiatrist	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 907.08	* In-Kind: Gas for driving candidate
---	------------------------------------	--------------------------------------

C.	Full Name (Last, First, Middle Initial) Gerald Gammell		Date of Receipt MM / DD / YYYY 02 / 24 / 2008
	Mailing Address 4975 Mother Lode Trail		Transaction ID: C4646467
	City Las Cruces	State NM	Zip Code 88011
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.68
	Name of Employer Retired	Occupation Psychiatrist	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 907.08	* In-Kind: Motel room for candidate and staffer
---	------------------------------------	---

SUBTOTAL of Receipts This Page (optional)	101.59
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial) Gerald Gammell		Date of Receipt MM / DD / YYYY 02 / 25 / 2008
Mailing Address 4975 Mother Lode Trail		Transaction ID: C4648440
City Las Cruces	State NM	Zip Code 88011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.12
Name of Employer Retired	Occupation Psychiatrist	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 907.08	

* In-Kind: Gas for driving candidate

B.

Full Name (Last, First, Middle Initial) Gerald Gammell		Date of Receipt MM / DD / YYYY 03 / 03 / 2008
Mailing Address 4975 Mother Lode Trail		Transaction ID: C4646470
City Las Cruces	State NM	Zip Code 88011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.00
Name of Employer Retired	Occupation Psychiatrist	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 907.08	

* In-Kind: Gas for driving candidate

C.

Full Name (Last, First, Middle Initial) Gerald Gammell		Date of Receipt MM / DD / YYYY 03 / 03 / 2008
Mailing Address 4975 Mother Lode Trail		Transaction ID: C4648437
City Las Cruces	State NM	Zip Code 88011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.72
Name of Employer Retired	Occupation Psychiatrist	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 907.08	

* In-Kind: Gas for driving candidate

SUBTOTAL of Receipts This Page (optional)	95.84
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 18 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Gerald Gammell
Mailing Address 4975 Mother Lode Trail
City Las Cruces State NM Zip Code 88011
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Psychiatrist
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 907.08
Date of Receipt 03 / 04 / 2008
Transaction ID: C4646471
Amount of Each Receipt this Period 33.16
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Pens, envelope-s, and hanging folders

B. Full Name (Last, First, Middle Initial)
Gerald Gammell
Mailing Address 4975 Mother Lode Trail
City Las Cruces State NM Zip Code 88011
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Psychiatrist
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 907.08
Date of Receipt 03 / 04 / 2008
Transaction ID: C4648423
Amount of Each Receipt this Period 39.74
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Gas for driving candidate

C. Full Name (Last, First, Middle Initial)
Gerald Gammell
Mailing Address 4975 Mother Lode Trail
City Las Cruces State NM Zip Code 88011
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Psychiatrist
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 907.08
Date of Receipt 03 / 05 / 2008
Transaction ID: C4648424
Amount of Each Receipt this Period 45.20
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Gas for driving candidate

SUBTOTAL of Receipts This Page (optional) ► 118.10
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 19 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Gerald Gammell
Mailing Address 4975 Mother Lode Trail
City Las Cruces State NM Zip Code 88011
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Psychiatrist
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 907.08
Date of Receipt 03 / 06 / 2008
Transaction ID: C4648436
Amount of Each Receipt this Period 38.44
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Gas for driving candidate

B. Full Name (Last, First, Middle Initial)
Gerald Gammell
Mailing Address 4975 Mother Lode Trail
City Las Cruces State NM Zip Code 88011
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Psychiatrist
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 907.08
Date of Receipt 03 / 08 / 2008
Transaction ID: C4646464
Amount of Each Receipt this Period 12.20
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Gas for driving candidate

C. Full Name (Last, First, Middle Initial)
Gerald Gammell
Mailing Address 4975 Mother Lode Trail
City Las Cruces State NM Zip Code 88011
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Psychiatrist
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 907.08
Date of Receipt 03 / 08 / 2008
Transaction ID: C4646469
Amount of Each Receipt this Period 11.96
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Gas for driving candidate

SUBTOTAL of Receipts This Page (optional) ▶ 62.60
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 20 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

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

Mailing Address 4975 Mother Lode Trail

City State Zip Code
Las Cruces NM 88011

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

Name of Employer Retired Occupation Psychiatrist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

907.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	8	/	2	0	0	8

Transaction ID: C4648434

Amount of Each Receipt this Period
42.73

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

* In-Kind: Beverages for event

B. Full Name (Last, First, Middle Initial)
Gerald Gammell

Mailing Address 4975 Mother Lode Trail

City State Zip Code
Las Cruces NM 88011

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

Name of Employer Retired Occupation Psychiatrist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

907.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	0	8

Transaction ID: C4646465

Amount of Each Receipt this Period
54.51

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

* In-Kind: Gas for driving candidate

C. Full Name (Last, First, Middle Initial)
Gerald Gammell

Mailing Address 4975 Mother Lode Trail

City State Zip Code
Las Cruces NM 88011

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

Name of Employer Retired Occupation Psychiatrist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

907.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	0	8

Transaction ID: C4646466

Amount of Each Receipt this Period
50.10

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

* In-Kind: Gas for driving candidate

SUBTOTAL of Receipts This Page (optional) ► **147.34**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

<p>A. Full Name (Last, First, Middle Initial) Gerald Gammell</p> <p>Mailing Address 4975 Mother Lode Trail</p> <p>City State Zip Code Las Cruces NM 88011</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Psychiatrist</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 907.08</p>	<p>Date of Receipt MM / DD / YYYY 03 / 17 / 2008</p> <p>Transaction ID: C4641036</p> <p>Amount of Each Receipt this Period 100.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Gerald Gammell</p> <p>Mailing Address 4975 Mother Lode Trail</p> <p>City State Zip Code Las Cruces NM 88011</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Psychiatrist</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 907.08</p>	<p>Date of Receipt MM / DD / YYYY 03 / 24 / 2008</p> <p>Transaction ID: C4646462</p> <p>Amount of Each Receipt this Period 3.16</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> <p>* In-Kind: Nametags for meet and greet</p>
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<p>C. Full Name (Last, First, Middle Initial) Gerald Gammell</p> <p>Mailing Address 4975 Mother Lode Trail</p> <p>City State Zip Code Las Cruces NM 88011</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Psychiatrist</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 907.08</p>	<p>Date of Receipt MM / DD / YYYY 03 / 25 / 2008</p> <p>Transaction ID: C4648435</p> <p>Amount of Each Receipt this Period 18.05</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> <p>* In-Kind: Beverages for event</p>
--	--

SUBTOTAL of Receipts This Page (optional)	121.21
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 22 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Gerald Gammell
 Mailing Address 4975 Mother Lode Trail
 City Las Cruces State NM Zip Code 88011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Psychiatrist
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 907.08
 Date of Receipt 03 / 26 / 2008
Transaction ID: C4646468
 Amount of Each Receipt this Period 29.56
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 * In-Kind: Gas for driving candidate

B. Full Name (Last, First, Middle Initial)
Gerald Gammell
 Mailing Address 4975 Mother Lode Trail
 City Las Cruces State NM Zip Code 88011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Psychiatrist
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 907.08
 Date of Receipt 03 / 27 / 2008
Transaction ID: C4646461
 Amount of Each Receipt this Period 46.55
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 * In-Kind: Food and related supplies for meet and greet

C. Full Name (Last, First, Middle Initial)
Gerald Gammell
 Mailing Address 4975 Mother Lode Trail
 City Las Cruces State NM Zip Code 88011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Psychiatrist
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 907.08
 Date of Receipt 03 / 27 / 2008
Transaction ID: C4648432
 Amount of Each Receipt this Period 16.80
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 * In-Kind: Gas for driving to get supplies

SUBTOTAL of Receipts This Page (optional) ► 92.91
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 139

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Gerald Gammell

Mailing Address 4975 Mother Lode Trail

City State Zip Code
Las Cruces NM 88011

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

Name of Employer Retired Occupation Psychiatrist

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 907.08

Date of Receipt

M M / D D / Y Y Y Y
03 / 29 / 2008

Transaction ID: C4646460

Amount of Each Receipt this Period

52.49

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

* In-Kind: Table for head-quarters

B.

Full Name (Last, First, Middle Initial)
Gerald Gammell

Mailing Address 4975 Mother Lode Trail

City State Zip Code
Las Cruces NM 88011

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

Name of Employer Retired Occupation Psychiatrist

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 907.08

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2008

Transaction ID: C4646201

Amount of Each Receipt this Period

15.00

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

C.

Full Name (Last, First, Middle Initial)
Dan Glickman

Mailing Address 4442 Hawthorne Street, NW

City State Zip Code
Wichita KS 20016

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

Name of Employer Motion Picture Association of America Occupation Chairman

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2008

Transaction ID: C4648446

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) ►

267.49

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
William Golden

Mailing Address 601 W. Second Street, St 18

City Roswell State NM Zip Code 88201

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

Name of Employer self-employed Occupation certified public accountant

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

500.00

Date of Receipt 03 / 31 / 2008

Transaction ID: C4644960

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)
Brenda Gomez-Glenn

Mailing Address PO Box 22

City Tome State NM Zip Code 87060

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

Name of Employer Heritage Titel of Valencia County Inc Occupation business owner

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

300.00

Date of Receipt 03 / 24 / 2008

Transaction ID: C4642792

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)
Melva Granillo

Mailing Address 680 Del Monte

City Las Cruces State NM Zip Code 88001

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

Name of Employer Comcast Occupation Service Rep

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

2300.00

Date of Receipt 03 / 31 / 2008

Transaction ID: C4644972

Amount of Each Receipt this Period 2300.00

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

SUBTOTAL of Receipts This Page (optional) ► **2900.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 139

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Rondeau M Gurley

Mailing Address 604 W Organ Ave.

City State Zip Code
Las Cruces NM 88005

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

Name of Employer Occupation
NMSU Development Officer College of Ag

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 7 / 2 0 0 8

Transaction ID: C4553652

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)
Jonathan Harris

Mailing Address 1 Aberdeen Way, #225

City State Zip Code
Cambridge MA 02138

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

Name of Employer Occupation
Town of Concord, MA Budget and Purchasing Administrator

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 8

Transaction ID: C4642758

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)
Peter Harrison

Mailing Address 1003 Tramway Lane NE

City State Zip Code
Albuquerque NM 87122

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

Name of Employer Occupation
Self Archaeologist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

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

Transaction ID: C4565069

Amount of Each Receipt this Period

300.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Peter Harrison

Mailing Address 1003 Tramway Lane NE

City State Zip Code
Albuquerque NM 87122

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

Name of Employer Self Occupation Archaeologist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2008

Transaction ID: C4641030

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)
Alta B Heath

Mailing Address 1925 Carlyle Dr.

City State Zip Code
Las Cruces NM 88005

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

Name of Employer LC Downtown Occupation Office Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2008

Transaction ID: C4641035

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)
John Hernandez

Mailing Address PO Box 3169

City State Zip Code
Las Cruces NM 88003

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2008

Transaction ID: C4641042

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) ► **550.00**

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

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

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

FOR LINE NUMBER: PAGE 27 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Paul Herzog

Mailing Address 920 Raleigh Rd.

City State Zip Code
Las Cruces NM 88005

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

Name of Employer Occupation
Memorial Medical Center Administrator

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 25 / 2008

Transaction ID: C4642759

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)
Tawfiq Hindash

Mailing Address 551 Corona Del Campo Loop

City State Zip Code
Las Cruces NM 88011

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

Name of Employer Occupation
Las Cruces Radiology Physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 29 / 2008

Transaction ID: C4646174

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)
James Kadlecsek

Mailing Address PO Box 0

City State Zip Code
San Miguel NM 88058

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

Name of Employer Occupation
Self Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 18 / 2008

Transaction ID: C4640505

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) ► **1100.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Bill Kellie

Mailing Address 4330 Jamie Pl

City State Zip Code
Las Cruces NM 88007

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2008

Transaction ID: C4646157

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)
Erik Khan

Mailing Address 1851 Buchanan Ave

City State Zip Code
Las Cruces NM 88001

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Dr. Khalid Khan & associates Chief Financial Officer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 13 / 2008

Transaction ID: C4575602

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)
Erik Khan

Mailing Address 1851 Buchanan Ave

City State Zip Code
Las Cruces NM 88001

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Dr. Khalid Khan & associates Chief Financial Officer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 05 / 2008

Transaction ID: C4640518

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Dave Kimble

Mailing Address 2439 Columbia Ave.

City State Zip Code
Las Cruces NM 88012

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

Name of Employer Occupation
Kimble and Associates Lobbyist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
200.00

Transaction ID: C4642893

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

B.

Full Name (Last, First, Middle Initial)
John Knopp

Mailing Address PO Box 45

City State Zip Code
Mesilla NM 88046

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

Name of Employer Occupation
Miratek Environmental

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
300.00

Transaction ID: C4553658

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

C.

Full Name (Last, First, Middle Initial)
Ray Kogovsek

Mailing Address 215 W 2nd Street

City State Zip Code
Pueblo CO 81003

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

Name of Employer Occupation
Kogovsek and Associates President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
500.00

Transaction ID: C4635093

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
stanley krempa

Mailing Address po box 558

City falls church State VA Zip Code 22040

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

Name of Employer self Occupation clergy

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 19 / 2008

Transaction ID: C4641031

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)
Judith Lapointe

Mailing Address 133 Pena Blanca Loop

City Las Cruces State NM Zip Code 88011

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: C4642785

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)
Larry Lawrence

Mailing Address 2475 Calle de Parian
PO Box 433

City Mesilla State NM Zip Code 88046

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

Name of Employer self Occupation consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: C4642789

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) ► **1350.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 139
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
John Lewinger

Mailing Address 2 Blue Crow Ln

City State Zip Code
Sandia Park NM 87047

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

Name of Employer Occupation
Grubb and Ellis Real Estate Agent

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 18 / 2008

Transaction ID: C4639591

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)
Wes Light

Mailing Address 12710 Lucca Rd. SW

City State Zip Code
Deming NM 88030

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

Name of Employer Occupation
Gadcom Mediator

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
01 / 08 / 2008

Transaction ID: C4553650

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)
Wes Light

Mailing Address 12710 Lucca Rd. SW

City State Zip Code
Deming NM 88030

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

Name of Employer Occupation
Gadcom Mediator

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 24 / 2008

Transaction ID: C4644967

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) ► **1250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 139

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Mike Lilley

Mailing Address 7024 Raasaf Dr.

City State Zip Code
Las Cruces NM 88005

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation
Self Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1300.00

Date of Receipt MM / DD / YYYY
01 / 10 / 2008

Transaction ID: C4553659

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)
Mike Lilley

Mailing Address 7024 Raasaf Dr.

City State Zip Code
Las Cruces NM 88005

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation
Self Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1300.00

Date of Receipt MM / DD / YYYY
02 / 19 / 2008

Transaction ID: C4634661

Amount of Each Receipt this Period 150.00

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

C.

Full Name (Last, First, Middle Initial)
Mike Lilley

Mailing Address 7024 Raasaf Dr.

City State Zip Code
Las Cruces NM 88005

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation
Self Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1300.00

Date of Receipt MM / DD / YYYY
03 / 24 / 2008

Transaction ID: C4642901

Amount of Each Receipt this Period 150.00

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

SUBTOTAL of Receipts This Page (optional) 550.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 33 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Lance Lujan

Mailing Address 1813 Pomona Dr.

City State Zip Code
Las Cruces NM 88011

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period 100.00

Transaction ID: C4641046

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

B. Full Name (Last, First, Middle Initial)
Mary Lujan

Mailing Address 1304 Hill Road

City State Zip Code
Las Cruces NM 88007

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

Name of Employer Anjel, Sines, and Torres Occupation Legal Secretary

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period 100.00

Transaction ID: C4644958

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

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

Mailing Address 1151 N Roadrunner Pkwy #1006

City State Zip Code
Las Cruces NM 88011

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

Name of Employer Martin, Lutz, Roggow, Hosford & Eubank Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period 1550.00

Transaction ID: C4565068

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Diana Macarthur

Mailing Address 90 Tesuque Ridge

City State Zip Code
Santa Fe NM 87501

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

Name of Employer Occupation
Dynamac Corp CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2008

Transaction ID: C4642794

Amount of Each Receipt this Period
1300.00

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

B. Full Name (Last, First, Middle Initial)
Pat Madera

Mailing Address PO Box 702

City State Zip Code
Carlsbad NM 88220

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

Name of Employer Occupation
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2008

Transaction ID: C4644969

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)
Mike Martin

Mailing Address 4501 Geothermal Drive

City State Zip Code
Las Cruces NM 88011

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

Name of Employer Occupation
NMSU President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2008

Transaction ID: C4644975

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) ► **2000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Norma McCallan

Mailing Address 627 Camino Don Emilio

City State Zip Code
Santa Fe NM 87507

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2008

Transaction ID: C4642955

Amount of Each Receipt this Period
225.00

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

B. Full Name (Last, First, Middle Initial)
Mike McCamley

Mailing Address 1540 Karrie Ln

City State Zip Code
Las Cruces NM 88007

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 18 / 2008

Transaction ID: C4646473

Amount of Each Receipt this Period
79.99

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

* In-Kind: Printer for headquarters

C. Full Name (Last, First, Middle Initial)
Mary Ellen McKay

Mailing Address 1380 Via Norte

City State Zip Code
Las Cruces NM 88007

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: C4642768

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) ► **554.99**

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

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

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

FOR LINE NUMBER: PAGE 36 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Phil McKay
Mailing Address ?
City State Zip Code
Las Cruces NM 88007
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Memorial Medical Center Pharmacist
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
MM / DD / YYYY
03 / 28 / 2008
Transaction ID: C4642740
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)
Steven J Melander-Dayton
Mailing Address PO Box 9480
City State Zip Code
Santa Fe NM 87504
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
none none
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00
Date of Receipt
MM / DD / YYYY
03 / 25 / 2008
Transaction ID: C4642760
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)
Morgan Nelson
Mailing Address 3755 E Grand Plains Rd
City State Zip Code
Roswell NM 88203
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
retired retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt
MM / DD / YYYY
03 / 22 / 2008
Transaction ID: C4642897
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) ► 1250.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Steve Newby
Mailing Address 8760 Cordova
City Las Cruces State NM Zip Code 88007
FEC ID number of contributing federal political committee. C
Name of Employer Self Occupation Architect
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
350.00

Date of Receipt MM / DD / YYYY
02 / 12 / 2008
Transaction ID: C4575094
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)
Jane Oakes
Mailing Address 34 Camino Ladera
City Santa Fe State NM Zip Code 87506
FEC ID number of contributing federal political committee. C
Name of Employer Self Occupation Artist and investor
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
1000.00

Date of Receipt MM / DD / YYYY
02 / 11 / 2008
Transaction ID: C4575604
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)
Jane Oakes
Mailing Address 34 Camino Ladera
City Santa Fe State NM Zip Code 87506
FEC ID number of contributing federal political committee. C
Name of Employer Self Occupation Artist and investor
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
1000.00

Date of Receipt MM / DD / YYYY
03 / 19 / 2008
Transaction ID: C4640501
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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Eliot Orton

Mailing Address 310 Capri Arc

City Las Cruces State NM Zip Code 88005

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt 03 / 18 / 2008
Transaction ID: C4640500
 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)
Jean Ossorio

Mailing Address 1251 Southridge

City Las Cruces State NM Zip Code 88005

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 02 / 06 / 2008
Transaction ID: C4574184
 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)
Jean Ossorio

Mailing Address 1251 Southridge

City Las Cruces State NM Zip Code 88005

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 02 / 19 / 2008
Transaction ID: C4634666
 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) ▶ **650.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 139
(check only one)

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

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)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Jean Ossorio

Mailing Address 1251 Southridge

City State Zip Code
Las Cruces NM 88005

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2008

Transaction ID: C4641041

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)
Frank Otey

Mailing Address PO Box 1877

City State Zip Code
Alto NM 88312

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2008

Transaction ID: C4641044

Amount of Each Receipt this Period
400.00

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

C.

Full Name (Last, First, Middle Initial)
Thomas Patterson

Mailing Address 98 Chestnut St. Unit 1

City State Zip Code
Boston MA 02108

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

Name of Employer Harvard Occupation Professor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 21 / 2008

Transaction ID: C4642894

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 139
	<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)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Murray Potter		Date of Receipt
	Mailing Address 2505 Desert Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 29 / 2008
	City	State	Zip Code
	Las Cruces	NM	88001
	FEC ID number of contributing federal political committee.		Transaction ID: C4642862
		Amount of Each Receipt this Period	
		<input type="text"/> 500.00	
Name of Employer Retired		Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text"/> 500.00		

B.	Full Name (Last, First, Middle Initial) Lance Redman		Date of Receipt
	Mailing Address 405 N. 9th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 04 / 2008
	City	State	Zip Code
	Carlsbad	NM	88220
	FEC ID number of contributing federal political committee.		Transaction ID: C4640521
		Amount of Each Receipt this Period	
		<input type="text"/> 275.00	
Name of Employer Information Requested		Occupation Information Requested	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text"/> 275.00		

C.	Full Name (Last, First, Middle Initial) Karri Rodriguez		Date of Receipt
	Mailing Address 3375 Ridgeline Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 31 / 2008
	City	State	Zip Code
	Las Cruces	NM	88005
	FEC ID number of contributing federal political committee.		Transaction ID: C4644971
		Amount of Each Receipt this Period	
		<input type="text"/> 2300.00	
Name of Employer New Mexico Bolt and Screw		Occupation Asst. Manager	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text"/> 2300.00		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3075.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 41 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Dennis Rogers

Mailing Address 5080 Wind Summit Pl.

City State Zip Code
Las Cruces NM 88011

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

Name of Employer Occupation
Jornada Water Co. manager/owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: C4574183

Amount of Each Receipt this Period
1200.00

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

B. Full Name (Last, First, Middle Initial)
Angel Saenz

Mailing Address 333 S. Campo

City State Zip Code
Las Cruces NM 88001

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

Name of Employer Occupation
Self Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 8 / 2 0 0 8

Transaction ID: C4642755

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)
Dick Salopek

Mailing Address 975 Holcomb Road

City State Zip Code
Las Cruces NM 88007

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

Name of Employer Occupation
Self Farmer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 8 / 2 0 0 8

Transaction ID: C4642752

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) ► **2200.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 139
	(check only one)
<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"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

<p>A. Full Name (Last, First, Middle Initial) James Scherr</p> <p>Mailing Address 1 Texas Tower 109 N. Oregon 8th Floor</p> <p>City State Zip Code El Paso TX 79901</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Occupation Attorney</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2008</p> <p>Transaction ID: C4642788</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Rod Schumacher</p> <p>Mailing Address PO Drawer 700</p> <p>City State Zip Code Roswell NM 88202</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Atwood, Malone, Turner, & Sabin Occupation Attorney</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2008</p> <p>Transaction ID: C4644966</p> <p>Amount of Each Receipt this Period 250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) Frederick Sherman</p> <p>Mailing Address 315 S Tin St</p> <p>City State Zip Code Deming NM 88030</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Occupation Attorney</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2008</p> <p>Transaction ID: C4641033</p> <p>Amount of Each Receipt this Period 300.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Victoria Simons
Mailing Address PO Box 134
City Mesilla Park State NM Zip Code 88047
FEC ID number of contributing federal political committee. C
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
225.00

Date of Receipt MM / DD / YYYY
03 / 03 / 2008
Transaction ID: C4640523
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)
Martin Small
Mailing Address 3314 Mercury Ln
City Las Cruces State NM Zip Code 88012
FEC ID number of contributing federal political committee. C
Name of Employer Calcuex Occupation CEO
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
2000.00

Date of Receipt MM / DD / YYYY
03 / 24 / 2008
Transaction ID: C4642976
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)
Geoffrey Z. Smith
Mailing Address 4828 River Heights Dr.
City Las Cruces State NM Zip Code 88007
FEC ID number of contributing federal political committee. C
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
600.00

Date of Receipt MM / DD / YYYY
01 / 19 / 2008
Transaction ID: C4565080
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) 750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 139
(check only one)

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

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)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
JD Smith

Mailing Address 2248 Calais Ave.

City Las Cruces State NM Zip Code 88011

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

Name of Employer Smith Appraisal Occupation Real Estate Appraising

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 03 / 28 / 2008

Transaction ID: C4646190

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)
James Sorenson

Mailing Address 10032 San Savino Court

City Las Cruces State NM Zip Code 88007

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

Name of Employer Kemp Smith LLP Occupation Lawyer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 21 / 2008

Transaction ID: C4642898

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)
Tom Tate

Mailing Address 6040 Vista Court

City Las Cruces State NM Zip Code 88005

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

Name of Employer Self/Developer Occupation Developer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 28 / 2008

Transaction ID: C4642747

Amount of Each Receipt this Period 500.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Laura Threet

Mailing Address 814 Morningside Pl. SE

City State Zip Code
Albuquerque NM 87108

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

Name of Employer Occupation
Martin E. Threet & Associates administrator

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
02 / 04 / 2008

Transaction ID: C4574322

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)
Penrod Toles

Mailing Address Post Office Drawer 1300

City State Zip Code
Roswell NM 88202

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

Name of Employer Occupation
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 31 / 2008

Transaction ID: C4644964

Amount of Each Receipt this Period
2300.00

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

C. Full Name (Last, First, Middle Initial)
Sally Toles

Mailing Address Post Office Drawer 1300

City State Zip Code
Roswell NM 88202

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

Name of Employer Occupation
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 31 / 2008

Transaction ID: C4644965

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional) ► **4750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Gary Van Valin

Mailing Address 8224 Louisiana Blvd NE, Ste D

City Albuquerque State NM Zip Code 87113

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

Name of Employer Keystone International Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 26 / 2008
Transaction ID: C4642781
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)
Patrick Vandergriff

Mailing Address 35 Cottonwood Canyon Road

City La Luz State NM Zip Code 88337

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

Name of Employer Self Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 07 / 2008
Transaction ID: C4640524
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)
Donna Vargas

Mailing Address 296 Capri Rd

City Las Cruces State NM Zip Code 88005

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 03 / 22 / 2008
Transaction ID: C4642899
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) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 139
	(check only one)
<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"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) James Volk		Date of Receipt
	Mailing Address 5773 Mira Grande		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	El Paso	TX	79912
	FEC ID number of contributing federal political committee. C		Transaction ID: C4644957
Name of Employer State National Bank		Occupation President	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text" value="500.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼			

B.	Full Name (Last, First, Middle Initial) Wendy Volkmann		Date of Receipt
	Mailing Address PO Box 6516		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Santa Fe	NM	87502
	FEC ID number of contributing federal political committee. C		Transaction ID: C4642761
Name of Employer Self		Occupation Consultant	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text" value="300.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼			

C.	Full Name (Last, First, Middle Initial) Michael Ward		Date of Receipt
	Mailing Address 106 School Street		<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Wayland	MA	01778
	FEC ID number of contributing federal political committee. C		Transaction ID: C4648441
Name of Employer Town of Concord		Occupation Budget Analyst	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text" value="113.98"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼			

* In-Kind: Travel 1/23

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="913.98"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial) Michael Ward		Date of Receipt MM / DD / YYYY 02 / 12 / 2008
Mailing Address 106 School Street		Transaction ID: C4648442
City Wayland	State MA	Zip Code 01778
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 286.15
Name of Employer Town of Concord	Occupation Budget Analyst	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1625.97	
		* In-Kind: Travel 2/12

B.

Full Name (Last, First, Middle Initial) Michael Ward		Date of Receipt MM / DD / YYYY 02 / 13 / 2008
Mailing Address 106 School Street		Transaction ID: C4648427
City Wayland	State MA	Zip Code 01778
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.00
Name of Employer Town of Concord	Occupation Budget Analyst	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1625.97	
		* In-Kind: DVDs of TV appearances

C.

Full Name (Last, First, Middle Initial) Michael Ward		Date of Receipt MM / DD / YYYY 02 / 13 / 2008
Mailing Address 106 School Street		Transaction ID: C4648443
City Wayland	State MA	Zip Code 01778
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 109.13
Name of Employer Town of Concord	Occupation Budget Analyst	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1625.97	
		* In-Kind: Travel 2/13

SUBTOTAL of Receipts This Page (optional)	409.28
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

<p>A. Full Name (Last, First, Middle Initial) Michael Ward</p> <p>Mailing Address 106 School Street</p> <p>City State Zip Code Wayland MA 01778</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Town of Concord Occupation Budget Analyst</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1625.97</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 05 / 2008</p> <p>Transaction ID: C4648420</p> <p>Amount of Each Receipt this Period 42.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> <p>* In-Kind: Copying at Lea County Clerk's Office</p>
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<p>B. Full Name (Last, First, Middle Initial) Michael Ward</p> <p>Mailing Address 106 School Street</p> <p>City State Zip Code Wayland MA 01778</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Town of Concord Occupation Budget Analyst</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1625.97</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 06 / 2008</p> <p>Transaction ID: C4648426</p> <p>Amount of Each Receipt this Period 89.50</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> <p>* In-Kind: Purchase of st-amps</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) Michael Ward</p> <p>Mailing Address 106 School Street</p> <p>City State Zip Code Wayland MA 01778</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Town of Concord Occupation Budget Analyst</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1625.97</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 07 / 2008</p> <p>Transaction ID: C4648430</p> <p>Amount of Each Receipt this Period 74.95</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> <p>* In-Kind: Stamps</p>
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SUBTOTAL of Receipts This Page (optional)	206.45
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 139

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Michael Ward

Mailing Address 106 School Street

City State Zip Code
Wayland MA 01778

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

Name of Employer Occupation
Town of Concord Budget Analyst

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1625.97

Date of Receipt

M M / D D / Y Y Y Y
03 / 15 / 2008

Transaction ID: C4648444

Amount of Each Receipt this Period

240.08

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

* In-Kind: Travel 3/15

B.

Full Name (Last, First, Middle Initial)
Michael Ward

Mailing Address 106 School Street

City State Zip Code
Wayland MA 01778

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

Name of Employer Occupation
Town of Concord Budget Analyst

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1625.97

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2008

Transaction ID: C4648429

Amount of Each Receipt this Period

410.00

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

* In-Kind: Stamps

C.

Full Name (Last, First, Middle Initial)
Michael Ward

Mailing Address 106 School Street

City State Zip Code
Wayland MA 01778

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

Name of Employer Occupation
Town of Concord Budget Analyst

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1625.97

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2008

Transaction ID: C4648421

Amount of Each Receipt this Period

4.60

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

* In-Kind: Postage for mailing package

SUBTOTAL of Receipts This Page (optional)

654.68

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Michael Ward

Mailing Address 106 School Street

City State Zip Code
Wayland MA 01778

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

Name of Employer Occupation
Town of Concord Budget Analyst

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1625.97

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2008

Transaction ID: C4648445

Amount of Each Receipt this Period
191.58

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

* In-Kind: Travel 3/31

B.

Full Name (Last, First, Middle Initial)
Renee West

Mailing Address 1105 Ocotillo Canyon Dr.

City State Zip Code
Carlsbad NM 88220

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

Name of Employer Occupation
USDOI National Park Service biologist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 15 / 2008

Transaction ID: C4640504

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)
Renee West

Mailing Address 1105 Ocotillo Canyon Dr.

City State Zip Code
Carlsbad NM 88220

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

Name of Employer Occupation
USDOI National Park Service biologist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 21 / 2008

Transaction ID: C4642968

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) ► **591.58**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Thomas Whatley

Mailing Address 2818 Carretas Ct.

City State Zip Code
Las Cruces NM 88007

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

Name of Employer Occupation
S & H RV & HOME CENTER Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: C4640187

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)
Victor Williams

Mailing Address 528 Breech Drive SW

City State Zip Code
Los Lunas NM 87031

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

Name of Employer Occupation
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
02 / 09 / 2008

Transaction ID: C4574782

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)
Victor Williams

Mailing Address 528 Breech Drive SW

City State Zip Code
Los Lunas NM 87031

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

Name of Employer Occupation
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: C4642966

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Gary Yabumoto

Mailing Address 8517 S. Highway 28

City State Zip Code
Anthony NM 88021

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

Name of Employer Self Occupation Architect

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 8

Transaction ID: C4635089

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)
Jim Baca

Mailing Address 2309 Via Madrid NW

City State Zip Code
Albuquerque NM 87104

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

Name of Employer State of New Mexico Occupation State Natural Resource Trustee

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 8 / 2 0 0 8

Transaction ID: C4642873A

Amount of Each Receipt this Period
100.00

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

* Earmarked Contribution:
See Below

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

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

16116.82

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 8

Transaction ID: C4642873AB

Amount of Each Receipt this Period
100.00

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

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Ken Biberaj

Mailing Address 234 West 56th St, Ste 400

City State Zip Code
New York NY 10019

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

Name of Employer Occupation
RTR Funding Group, Inc. Real Estate

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 25 / 2008

Transaction ID: C4646251A

Amount of Each Receipt this Period
200.00

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

* Earmarked Contribution:
See Below

B.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 16116.82

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2008

Transaction ID: C4646251AB

Amount of Each Receipt this Period
200.00

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

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C.

Full Name (Last, First, Middle Initial)
Samuel Bregman

Mailing Address 9600 Eagle Rock NE

City State Zip Code
Albuquerque NM 87122

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

Name of Employer Occupation
Self Lawyer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2008

Transaction ID: C4642882A

Amount of Each Receipt this Period
500.00

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

* Earmarked Contribution:
See Below

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2008

Transaction ID: C4642882AB

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]
Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)
Reed Burn

Mailing Address 6955 Camino Nuevo Mejico

City State Zip Code
Las Cruces NM 88007

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

Name of Employer Occupation
None Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: C4646272A

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
*** Earmarked Contribution:
See Below**

C.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2008

Transaction ID: C4646272AB

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional) ► **250.00**

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

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

Use separate schedule(s) for 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 56 / 139
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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) David Chavez Jr		Date of Receipt MM / DD / YYYY 03 / 16 / 2008
	Mailing Address PO Box 1475		Transaction ID: C4644983A
	City State Zip Code Santa Teresa NM 88008	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 130.00
	Name of Employer none Occupation not employed	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼		280.00	* Earmarked Contribution: See Below

B.	Full Name (Last, First, Middle Initial) ActBlue		Date of Receipt MM / DD / YYYY 03 / 16 / 2008
	Mailing Address P.O. Box 382110		Transaction ID: C4644983AB
	City State Zip Code Cambridge MA 02238	FEC ID number of contributing federal political committee. C C00401224	Amount of Each Receipt this Period 130.00
	Name of Employer Occupation	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼		16116.82	[MEMO ITEM] Note: Above Contribution earmarked through this organization.

C.	Full Name (Last, First, Middle Initial) peter cooper		Date of Receipt MM / DD / YYYY 03 / 26 / 2008
	Mailing Address 200 S BELVIDERE APT 1038		Transaction ID: C4646255A
	City State Zip Code EL PASO TX 79912	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00
	Name of Employer EL PASO COUNTY Occupation COMPUTER MANAGER	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼		300.00	* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)	▶	230.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address P.O. Box 382110
City State Zip Code
Cambridge MA 02238
FEC ID number of contributing federal political committee. **C** C00401224
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 16116.82
Date of Receipt: 03 / 30 / 2008
Transaction ID: C4646255AB
Amount of Each Receipt this Period: 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Carmel Davis
Mailing Address 508 Harvard Ave.
City State Zip Code
Swarthmore PA 19081
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
roger holdings, inc. restaurants
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 300.00
Date of Receipt: 03 / 20 / 2008
Transaction ID: C4642885A
Amount of Each Receipt this Period: 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Earmarked Contribution:
See Below

C. Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address P.O. Box 382110
City State Zip Code
Cambridge MA 02238
FEC ID number of contributing federal political committee. **C** C00401224
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 16116.82
Date of Receipt: 03 / 23 / 2008
Transaction ID: C4642885AB
Amount of Each Receipt this Period: 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

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

FOR LINE NUMBER: PAGE 58 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Robert Detweiler
Mailing Address 1605 Burgundy Ave
City Carlsbad State NM Zip Code 88220
FEC ID number of contributing federal political committee. **C**
Name of Employer Constructors Inc. Occupation General Contractor
Receipt For: 2008 Election Cycle-to-Date
 Primary General Other (specify) ▼
1000.00
Date of Receipt 03 / 06 / 2008
Transaction ID: C4640509A
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address P.O. Box 382110
City Cambridge State MA Zip Code 02238
FEC ID number of contributing federal political committee. **C** C00401224
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date
 Primary General Other (specify) ▼
16116.82
Date of Receipt 03 / 09 / 2008
Transaction ID: C4640509AB
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Roger Flemming
Mailing Address 613 Sheryl Way
City Las Cruces State NM Zip Code 88001
FEC ID number of contributing federal political committee. **C**
Name of Employer none Occupation not employed
Receipt For: 2008 Election Cycle-to-Date
 Primary General Other (specify) ▼
300.00
Date of Receipt 03 / 24 / 2008
Transaction ID: C4646249A
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional) ▶ 1100.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 59 / 139

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
16116.82

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2008

Transaction ID: C4646249AB

Amount of Each Receipt this Period

100.00

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

[MEMO ITEM]

Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)

Nick Franklin

Mailing Address 318 Snug Harbor Rd

City State Zip Code
Newport Beach CA 92663

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

Name of Employer Occupation
Self Retired

Receipt For: 2008

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: C4646271A

Amount of Each Receipt this Period

500.00

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

* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
16116.82

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2008

Transaction ID: C4646271AB

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]

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional) ▶

500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 139
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Albert Galves

Mailing Address 2711 Sunrise Point Road

City State Zip Code
Las Cruces NM 88011

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

Name of Employer Occupation
None Not employed

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: C4646270A

Amount of Each Receipt this Period
100.00

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

* Earmarked Contribution:
See Below

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

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 16116.82

Date of Receipt
M M / D D / Y Y Y Y
03 / 30 / 2008

Transaction ID: C4646270AB

Amount of Each Receipt this Period
100.00

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

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

Mailing Address 303 Paseo De Peralta # A

City State Zip Code
Santa Fe NM 87501

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

Name of Employer Occupation
Montoya, Murphy & Garcia attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 25 / 2008

Transaction ID: C4646252A

Amount of Each Receipt this Period
1000.00

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

* Earmarked Contribution:
See Below

SUBTOTAL of Receipts This Page (optional) ► 1100.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2008

Transaction ID: C4646252AB

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)
Stewart Gardner

Mailing Address 11 Soleado Lane

City State Zip Code
Santa Fe NM 87508

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

Name of Employer Occupation
The Stoneharbor Group, LLC Investment Advisor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 20 / 2008

Transaction ID: C4636633A

Amount of Each Receipt this Period
1300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 24 / 2008

Transaction ID: C4636633AB

Amount of Each Receipt this Period
1300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional) ► **1300.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Robert Garrett

Mailing Address PO Box 53149

City Pinos Altos State NM Zip Code 88053

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

Name of Employer none Occupation Physician retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2008

Transaction ID: C4566817A

Amount of Each Receipt this Period 250.00

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

* Earmarked Contribution: See Below

B.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

Date of Receipt 01 / 13 / 2008

Transaction ID: C4566817AB

Amount of Each Receipt this Period 250.00

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

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C.

Full Name (Last, First, Middle Initial)
Sonya Gettinger

Mailing Address 1133 Dolores Street Apt. 12

City San Francisco State CA Zip Code 94110

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

Name of Employer Google Inc. Occupation Corporate Communications Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 17 / 2008

Transaction ID: C4642869A

Amount of Each Receipt this Period 350.00

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

* Earmarked Contribution: See Below

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2008

Transaction ID: C4642869AB

Amount of Each Receipt this Period
350.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)
Maxine Goad

Mailing Address P. O. Box 2502

City State Zip Code
Santa Fe NM 87504

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

Name of Employer Occupation
Retired Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2008

Transaction ID: C4646286A

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
*** Earmarked Contribution:
See Below**

C.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2008

Transaction ID: C4646286AB

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional) ► **100.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Stephen Grossman
 Mailing Address 908 Sunset Drive
 City Socorro State NM Zip Code 87801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation consultant
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 430.00
 Date of Receipt 03 / 08 / 2008
Transaction ID: C4640510A
 Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 * Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue
 Mailing Address P.O. Box 382110
 City Cambridge State MA Zip Code 02238
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer Occupation
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 16116.82
 Date of Receipt 03 / 09 / 2008
Transaction ID: C4640510AB
 Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Stephen Grossman
 Mailing Address 908 Sunset Drive
 City Socorro State NM Zip Code 87801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation consultant
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 430.00
 Date of Receipt 03 / 19 / 2008
Transaction ID: C4642881A
 Amount of Each Receipt this Period 30.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional) ► 130.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 65 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address P.O. Box 382110
City State Zip Code
Cambridge MA 02238
FEC ID number of contributing federal political committee. **C** C00401224
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 16116.82
Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 8
Transaction ID: C4642881AB
Amount of Each Receipt this Period
30.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Shaun Hayeslip
Mailing Address 2511 Q St. NW #8
City State Zip Code
Washington DC 20007
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
U.S. Government Foreign Affairs Officer
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 7 / 2 0 0 8
Transaction ID: C4566814A
Amount of Each Receipt this Period
150.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Earmarked Contribution:
See Below

C. Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address P.O. Box 382110
City State Zip Code
Cambridge MA 02238
FEC ID number of contributing federal political committee. **C** C00401224
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 16116.82
Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 1 3 / 2 0 0 8
Transaction ID: C4566814AB
Amount of Each Receipt this Period
150.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

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

FOR LINE NUMBER: PAGE 66 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Shaun Hayeslip
Mailing Address 2511 Q St. NW #8
City Washington State DC Zip Code 20007
FEC ID number of contributing federal political committee. **C**
Name of Employer U.S. Government Occupation Foreign Affairs Officer
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 03 / 31 / 2008
Transaction ID: C4646295A
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address P.O. Box 382110
City Cambridge State MA Zip Code 02238
FEC ID number of contributing federal political committee. **C** C00401224
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 16116.82
Date of Receipt 03 / 31 / 2008
Transaction ID: C4646295AB
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Pamela Hilty
Mailing Address 501 Ridgecrest Dr. SE
City Albuquerque State NM Zip Code 87108
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 700.00
Date of Receipt 02 / 15 / 2008
Transaction ID: C4635104A
Amount of Each Receipt this Period 200.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Earmarked Contribution: See Below

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

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

Transaction ID: C4635104AB

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)
Richard Homans

Mailing Address 9 Arroyo Canyon Drive

City State Zip Code
Santa Fe NM 87508

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

Name of Employer State of New Mexico Occupation Government manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 3 0 / 2 0 0 8

Transaction ID: C4646276A

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 3 0 / 2 0 0 8

Transaction ID: C4646276AB

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional) ► **250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Royal Jones

Mailing Address 4263 Escondido Ln

City State Zip Code
Las Cruces NM 88005

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

Name of Employer Self Occupation Mesilla Valley Transportation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	8	/	2	0	0	8

Transaction ID: C4642872A

Amount of Each Receipt this Period
500.00

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

* Earmarked Contribution: See Below

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

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	8

Transaction ID: C4642872AB

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]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Michelle Giger Karl Johnson

Mailing Address 4808 College Heights Dr NW

City State Zip Code
Albuquerque NM 87120

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

Name of Employer Occupation
Center for Civic Values / Luebben John Nonprofit CEO / Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	0	8

Transaction ID: C4640513A

Amount of Each Receipt this Period
250.00

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

* Earmarked Contribution: See Below

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address P.O. Box 382110
City State Zip Code
Cambridge MA 02238
FEC ID number of contributing federal political committee. **C** C00401224
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 16116.82
Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2008
Transaction ID: C4640513AB
Amount of Each Receipt this Period
250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Deborah C Kastron
Mailing Address 3940 Falmingo
City State Zip Code
El Paso TX 79902
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self Consultant
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2008
Transaction ID: C4642884A
Amount of Each Receipt this Period
300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Earmarked Contribution:
See Below

C. Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address P.O. Box 382110
City State Zip Code
Cambridge MA 02238
FEC ID number of contributing federal political committee. **C** C00401224
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 16116.82
Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2008
Transaction ID: C4642884AB
Amount of Each Receipt this Period
300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Hugh E. Killin III

Mailing Address 1413 Morningside Dr NE

City State Zip Code
Albuquerque NM 87110

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

Name of Employer Occupation
New Mexico Wilderness Alliance Manager

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 500.00

Transaction ID: C4640289A

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

* Earmarked Contribution: See Below

Amount of Each Receipt this Period: 1000.00

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

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 500.00

Transaction ID: C4640289AB

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

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

Amount of Each Receipt this Period: 16116.82

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

Mailing Address 190 Prospect Street

City State Zip Code
Belmont MA 02478

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

Name of Employer Occupation
Harvard University Professor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 50.00

Transaction ID: C4646289A

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

* Earmarked Contribution: See Below

Amount of Each Receipt this Period: 600.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 139
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2008

Transaction ID: C4646289AB

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)
Kay Krehbiel

Mailing Address 705 Fitch Street

City State Zip Code
Socorro NM 87801

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

Name of Employer Occupation
none retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2008

Transaction ID: C4646297A

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
*** Earmarked Contribution:
See Below**

C.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2008

Transaction ID: C4646297AB

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional) ► **250.00**

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

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

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

FOR LINE NUMBER: PAGE 72 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

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

Mailing Address 705 Fitch St

City State Zip Code
Socorro NM 87801

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

Name of Employer Occupation
New Mexico Tech Professor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 22 / 2008

Transaction ID: C4642889A

Amount of Each Receipt this Period
250.00

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

* Earmarked Contribution:
See Below

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

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 16116.82

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2008

Transaction ID: C4642889AB

Amount of Each Receipt this Period
250.00

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

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Stephen Love

Mailing Address 851 Paseo de Don Carlos

City State Zip Code
Santa Fe NM 87501

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

Name of Employer Occupation
BGK Properties Lawyer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: C4646268A

Amount of Each Receipt this Period
250.00

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

* Earmarked Contribution:
See Below

SUBTOTAL of Receipts This Page (optional) ▶ **500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 139

(check only one)

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

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)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. C C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

Date of Receipt M M / D D / Y Y Y Y
03 / 30 / 2008

Transaction ID: C4646268AB

Amount of Each Receipt this Period 250.00

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

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)
Fleisher Mark

Mailing Address 9451 Thonton Ave NE

City State Zip Code
Albuquerque NM 87109

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Vistory Group Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
03 / 19 / 2008

Transaction ID: C4642878A

Amount of Each Receipt this Period 250.00

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

* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. C C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

Date of Receipt M M / D D / Y Y Y Y
03 / 23 / 2008

Transaction ID: C4642878AB

Amount of Each Receipt this Period 250.00

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

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional) 250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Fred Nugent
Mailing Address 952 Santander Lane
City Santa Fe State NM Zip Code 87505
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Not employed
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1250.00
Date of Receipt 01 / 06 / 2008
Transaction ID: C4553661A
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address P.O. Box 382110
City Cambridge State MA Zip Code 02238
FEC ID number of contributing federal political committee. **C** C00401224
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 16116.82
Date of Receipt 01 / 01 / 2008
Transaction ID: C4553661AB
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Fred Nugent
Mailing Address 952 Santander Lane
City Santa Fe State NM Zip Code 87505
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Not employed
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1250.00
Date of Receipt 03 / 19 / 2008
Transaction ID: C4642879A
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Earmarked Contribution: See Below

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address P.O. Box 382110
City State Zip Code
Cambridge MA 02238
FEC ID number of contributing federal political committee. **C** C00401224
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 16116.82
Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2008
Transaction ID: C4642879AB
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]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Michael OHara
Mailing Address 1498 Challenger Ave.
City State Zip Code
Alamogordo NM 88310
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self Property Claims Adjuster
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00
Date of Receipt
M M / D D / Y Y Y Y Y
02 / 07 / 2008
Transaction ID: C4636631A
Amount of Each Receipt this Period
200.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Earmarked Contribution:
See Below

C. Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address P.O. Box 382110
City State Zip Code
Cambridge MA 02238
FEC ID number of contributing federal political committee. **C** C00401224
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 16116.82
Date of Receipt
M M / D D / Y Y Y Y Y
02 / 10 / 2008
Transaction ID: C4636631AB
Amount of Each Receipt this Period
200.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Michael OHara
 Mailing Address 1498 Challenger Ave.
 City Alamogordo State NM Zip Code 88310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Property Claims Adjuster
 Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Amount: 400.00
 Date of Receipt: 03 / 07 / 2008
Transaction ID: C4640511A
 Amount of Each Receipt this Period: 200.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 * Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue
 Mailing Address P.O. Box 382110
 City Cambridge State MA Zip Code 02238
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer Occupation
 Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Amount: 16116.82
 Date of Receipt: 03 / 09 / 2008
Transaction ID: C4640511AB
 Amount of Each Receipt this Period: 200.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Vic Poulos
 Mailing Address 5915 Silver Springs Dr Bldg 1
 City El Paso State TX Zip Code 79912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Lawyer
 Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Amount: 300.00
 Date of Receipt: 03 / 20 / 2008
Transaction ID: C4642883A
 Amount of Each Receipt this Period: 300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 * Earmarked Contribution: See Below

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 139

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. C C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2008

Transaction ID: C4642883AB

Amount of Each Receipt this Period
300.00

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

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)
Leonard R. Sanchez

Mailing Address 9204 Pebble Beach Dr. N.E.

City State Zip Code
Albuquerque NM 87111

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Moss Adams LLP CPA - Partner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 02 / 2008

Transaction ID: C4574639A

Amount of Each Receipt this Period
200.00

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

* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. C C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

Date of Receipt
M M / D D / Y Y Y Y
02 / 03 / 2008

Transaction ID: C4574639AB

Amount of Each Receipt this Period
200.00

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

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
William Siegal

Mailing Address 540 S guadalupe st

City santa fe State NM Zip Code 87501

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

Name of Employer self Occupation art sales

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 02 / 20 / 2008

Transaction ID: C4636632A

Amount of Each Receipt this Period 100.00

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

* Earmarked Contribution: See Below

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

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 16116.82

Date of Receipt 02 / 24 / 2008

Transaction ID: C4636632AB

Amount of Each Receipt this Period 100.00

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

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

Mailing Address 540 S. Guadalupe Street

City Santa Fe State NM Zip Code 87501

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

Name of Employer Self Occupation Art

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 22 / 2008

Transaction ID: C4642888A

Amount of Each Receipt this Period 250.00

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

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional) ▶ **350.00**

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

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

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

FOR LINE NUMBER: PAGE 79 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address P.O. Box 382110
City State Zip Code
Cambridge MA 02238
FEC ID number of contributing federal political committee. **C** C00401224
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 16116.82
Date of Receipt: 03 / 23 / 2008
Transaction ID: C4642888AB
Amount of Each Receipt this Period: 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Stephen Thomas
Mailing Address 510 W 52nd Street Apt 17N
City State Zip Code
New York NY 10019
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
BlueMountain Capital Management Developer
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt: 03 / 17 / 2008
Transaction ID: C4642871A
Amount of Each Receipt this Period: 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* Earmarked Contribution:
See Below

C. Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address P.O. Box 382110
City State Zip Code
Cambridge MA 02238
FEC ID number of contributing federal political committee. **C** C00401224
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 16116.82
Date of Receipt: 03 / 23 / 2008
Transaction ID: C4642871AB
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]
Note: Above Contribution earmarked through this organization.

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

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

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

FOR LINE NUMBER: PAGE 80 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

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

Mailing Address 106 School St

City State Zip Code
Wayland MA 01778

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

Name of Employer Occupation
US Dept of Transportation Engineer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 1200.00

Date of Receipt: 03 / 30 / 2008
Transaction ID: C4646277A
 Amount of Each Receipt this Period: 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 * Earmarked Contribution: See Below

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

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 16116.82

Date of Receipt: 03 / 30 / 2008
Transaction ID: C4646277AB
 Amount of Each Receipt this Period: 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Renee West

Mailing Address 1105 Ocotillo Canyon Dr.

City State Zip Code
Carlsbad NM 88220

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

Name of Employer Occupation
USDOI National Park Service biologist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 600.00

Date of Receipt: 03 / 31 / 2008
Transaction ID: C4646284A
 Amount of Each Receipt this Period: 200.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**

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

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

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

FOR LINE NUMBER: PAGE 81 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
16116.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	8

Transaction ID: C4646284AB

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	67823.04

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 139
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Bill McCamley		Date of Receipt MM / DD / YYYY 01 / 16 / 2008
	Mailing Address PO Box 6552		Transaction ID: C4648406
	City Las Cruces	State NM	Zip Code 88006
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.06
Name of Employer Dona Ana County		Occupation Comissioner	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 8717.62		
* In-Kind: Travel expenses			

B.	Full Name (Last, First, Middle Initial) Bill McCamley		Date of Receipt MM / DD / YYYY 01 / 29 / 2008
	Mailing Address PO Box 6552		Transaction ID: C4648407
	City Las Cruces	State NM	Zip Code 88006
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 423.89
Name of Employer Dona Ana County		Occupation Comissioner	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 8717.62		
* In-Kind: Travel 1/28-1-29			

C.	Full Name (Last, First, Middle Initial) Bill McCamley		Date of Receipt MM / DD / YYYY 02 / 23 / 2008
	Mailing Address PO Box 6552		Transaction ID: C4648408
	City Las Cruces	State NM	Zip Code 88006
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 112.04
Name of Employer Dona Ana County		Occupation Comissioner	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 8717.62		
* In-Kind: Travel 2/23			

SUBTOTAL of Receipts This Page (optional)	▶	727.99
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 139
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Bill McCamley

Mailing Address PO Box 6552

City State Zip Code
Las Cruces NM 88006

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

Name of Employer Occupation
Dona Ana County Comissioner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 8717.62

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

Transaction ID: C4648409

Amount of Each Receipt this Period
66.93

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

* In-Kind: Travel 2/28

B.

Full Name (Last, First, Middle Initial)
Bill McCamley

Mailing Address PO Box 6552

City State Zip Code
Las Cruces NM 88006

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

Name of Employer Occupation
Dona Ana County Comissioner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 8717.62

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: C4648410

Amount of Each Receipt this Period
88.16

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

* In-Kind: Travel 2/29

C.

Full Name (Last, First, Middle Initial)
Bill McCamley

Mailing Address PO Box 6552

City State Zip Code
Las Cruces NM 88006

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

Name of Employer Occupation
Dona Ana County Comissioner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 8717.62

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 4 / 2 0 0 8

Transaction ID: C4648411

Amount of Each Receipt this Period
273.54

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

* In-Kind: Travel 3/4

SUBTOTAL of Receipts This Page (optional) ► **428.63**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial)
Bill McCamley
Mailing Address PO Box 6552
City Las Cruces State NM Zip Code 88006
FEC ID number of contributing federal political committee. **C**
Name of Employer Dona Ana County Occupation Comissioner
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 8717.62
Date of Receipt 03 / 07 / 2008
Transaction ID: C4648412
Amount of Each Receipt this Period 70.81
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Travel 3/7

B. Full Name (Last, First, Middle Initial)
Bill McCamley
Mailing Address PO Box 6552
City Las Cruces State NM Zip Code 88006
FEC ID number of contributing federal political committee. **C**
Name of Employer Dona Ana County Occupation Comissioner
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 8717.62
Date of Receipt 03 / 09 / 2008
Transaction ID: C4648413
Amount of Each Receipt this Period 118.34
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Travel 3/9

C. Full Name (Last, First, Middle Initial)
Bill McCamley
Mailing Address PO Box 6552
City Las Cruces State NM Zip Code 88006
FEC ID number of contributing federal political committee. **C**
Name of Employer Dona Ana County Occupation Comissioner
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 8717.62
Date of Receipt 03 / 12 / 2008
Transaction ID: C4648414
Amount of Each Receipt this Period 85.36
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Travel 3/12

SUBTOTAL of Receipts This Page (optional) ► 274.51
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 139
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Bill McCamley

Mailing Address PO Box 6552

City State Zip Code
Las Cruces NM 88006

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

Name of Employer Occupation
Dona Ana County Comissioner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

8717.62

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2008

Transaction ID: C4648417

Amount of Each Receipt this Period
206.13

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

* In-Kind: Travel 3/18

B.

Full Name (Last, First, Middle Initial)
Bill McCamley

Mailing Address PO Box 6552

City State Zip Code
Las Cruces NM 88006

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

Name of Employer Occupation
Dona Ana County Comissioner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

8717.62

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: C4648415

Amount of Each Receipt this Period
215.34

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

* In-Kind: Travel 3/14

C.

Full Name (Last, First, Middle Initial)
Bill McCamley

Mailing Address PO Box 6552

City State Zip Code
Las Cruces NM 88006

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

Name of Employer Occupation
Dona Ana County Comissioner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

8717.62

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 15 / 2008

Transaction ID: C4648416

Amount of Each Receipt this Period
313.80

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

* In-Kind: Travel 3/15

SUBTOTAL of Receipts This Page (optional) ► **735.27**

TOTAL This Period (last page this line number only) ► **2166.40**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 86 / 139	
	(check only one)			
<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 checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial) Citizen's Bank		Date of Receipt
Mailing Address PO Box 2108		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
City	State	Zip Code
Las Cruces	NM	88004
FEC ID number of contributing federal political committee.		Transaction ID: C4648393
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="124.99"/>
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008	Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="344.36"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="124.99"/>
TOTAL This Period (last page this line number only)	<input type="text" value="124.99"/>

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)
Bill McCamley for Congress

<p>A. Full Name (Last, First, Middle Initial) Affordable Accounting</p> <p>Mailing Address 2270 D Wyoming Blvd NE 295</p> <p>City Albuquerque State NM Zip Code 87112</p> <p>Purpose of Disbursement Payment for accounting services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D200166 Date of Disbursement 01 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 150.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Affordable Accounting</p> <p>Mailing Address 2270 D Wyoming Blvd NE 295</p> <p>City Albuquerque State NM Zip Code 87112</p> <p>Purpose of Disbursement Payment for accounting services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D200168 Date of Disbursement 02 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Affordable Accounting</p> <p>Mailing Address 2270 D Wyoming Blvd NE 295</p> <p>City Albuquerque State NM Zip Code 87112</p> <p>Purpose of Disbursement Payment for accounting services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D200169 Date of Disbursement 03 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

250.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Auburn Quad Mailing Address P.O. Box 390728 City Cambridge State MA Zip Code 02139 Purpose of Disbursement Online processing fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D201546 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 8 Amount of Each Disbursement this Period 636.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Bare Bones Graphics, Inc. Mailing Address 2901 Girard NE City Albuquerque State NM Zip Code 87107 Purpose of Disbursement Walk cards Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D200156 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 442.46 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Bare Bones Graphics, Inc. Mailing Address 2901 Girard NE City Albuquerque State NM Zip Code 87107 Purpose of Disbursement Walk cards Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D200157 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 8 Amount of Each Disbursement this Period 483.08 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1562.36
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Bill McCamley	Transaction ID: D201627 Date of Disbursement 01 / 05 / 2008
	Mailing Address PO Box 6552	Amount of Each Disbursement this Period 184.30
	City Las Cruces State NM Zip Code 88006	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement for travel expense Candidate Name Bill McCamley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Bill McCamley	Transaction ID: D201628 Date of Disbursement 01 / 09 / 2008
	Mailing Address PO Box 6552	Amount of Each Disbursement this Period 191.09
	City Las Cruces State NM Zip Code 88006	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement for travel expense Candidate Name Bill McCamley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Bill McCamley	Transaction ID: D201629 Date of Disbursement 01 / 10 / 2008
	Mailing Address PO Box 6552	Amount of Each Disbursement this Period 113.00
	City Las Cruces State NM Zip Code 88006	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement for travel expense Candidate Name Bill McCamley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	488.39
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Bill McCamley <hr/> Mailing Address PO Box 6552 <hr/> City Las Cruces State NM Zip Code 88006 <hr/> Purpose of Disbursement Reimbursement for travel expense <hr/> Candidate Name Bill McCamley <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D201630 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 252.20 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Bill McCamley <hr/> Mailing Address PO Box 6552 <hr/> City Las Cruces State NM Zip Code 88006 <hr/> Purpose of Disbursement Reimbursement for travel expense <hr/> Candidate Name Bill McCamley <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D201631 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 281.79 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Bill McCamley <hr/> Mailing Address PO Box 6552 <hr/> City Las Cruces State NM Zip Code 88006 <hr/> Purpose of Disbursement Travel expenses <hr/> Candidate Name Bill McCamley <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D201632 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 192.06 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received

SUBTOTAL of Disbursements This Page (optional)	726.05
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Bill McCamley Mailing Address PO Box 6552 City Las Cruces State NM Zip Code 88006 Purpose of Disbursement Travel 1/28-1/29 Candidate Name Bill McCamley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D201633 Date of Disbursement 01 / 29 / 2008 Amount of Each Disbursement this Period 423.89 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received
B.	Full Name (Last, First, Middle Initial) Bill McCamley Mailing Address PO Box 6552 City Las Cruces State NM Zip Code 88006 Purpose of Disbursement Travel 2/23 Candidate Name Bill McCamley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D201634 Date of Disbursement 02 / 23 / 2008 Amount of Each Disbursement this Period 112.04 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received
C.	Full Name (Last, First, Middle Initial) Bill McCamley Mailing Address PO Box 6552 City Las Cruces State NM Zip Code 88006 Purpose of Disbursement Travel 2/28 Candidate Name Bill McCamley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D201635 Date of Disbursement 02 / 28 / 2008 Amount of Each Disbursement this Period 66.93 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received

SUBTOTAL of Disbursements This Page (optional) ▶

602.86

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Bill McCamley <hr/> Mailing Address PO Box 6552 <hr/> City Las Cruces State NM Zip Code 88006 <hr/> Purpose of Disbursement Travel 2/29 <hr/> Candidate Name Bill McCamley <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D201636 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 88.16 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received
B.	Full Name (Last, First, Middle Initial) Bill McCamley <hr/> Mailing Address PO Box 6552 <hr/> City Las Cruces State NM Zip Code 88006 <hr/> Purpose of Disbursement Travel 3/4 <hr/> Candidate Name Bill McCamley <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D201637 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 273.54 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received
C.	Full Name (Last, First, Middle Initial) Bill McCamley <hr/> Mailing Address PO Box 6552 <hr/> City Las Cruces State NM Zip Code 88006 <hr/> Purpose of Disbursement Travel 3/7 <hr/> Candidate Name Bill McCamley <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D201638 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 70.81 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received

SUBTOTAL of Disbursements This Page (optional) ▶

432.51

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Bill McCamley	Transaction ID: D201639
	Mailing Address PO Box 6552	Date of Disbursement 03 / 09 / 2008
	City Las Cruces State NM Zip Code 88006	Amount of Each Disbursement this Period 118.34
	Purpose of Disbursement Travel 3/9	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name Bill McCamley	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NM District: 02	* in-kind received

B.	Full Name (Last, First, Middle Initial) Bill McCamley	Transaction ID: D201640
	Mailing Address PO Box 6552	Date of Disbursement 03 / 12 / 2008
	City Las Cruces State NM Zip Code 88006	Amount of Each Disbursement this Period 85.36
	Purpose of Disbursement Travel 3/12	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name Bill McCamley	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NM District: 02	* in-kind received

C.	Full Name (Last, First, Middle Initial) Bill McCamley	Transaction ID: D201641
	Mailing Address PO Box 6552	Date of Disbursement 03 / 14 / 2008
	City Las Cruces State NM Zip Code 88006	Amount of Each Disbursement this Period 215.34
	Purpose of Disbursement Travel 3/14	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name Bill McCamley	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NM District: 02	* in-kind received

SUBTOTAL of Disbursements This Page (optional)	419.04
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Bill McCamley

Transaction ID: D201642

Mailing Address PO Box 6552

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	0	8

City Las Cruces State NM Zip Code 88006

Amount of Each Disbursement this Period

313.80

Purpose of Disbursement
Travel 3/15

Category/
Type

Candidate Name
Bill McCamley

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

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

* in-kind received

State: NM District: 02

B.

Full Name (Last, First, Middle Initial)
Bill McCamley

Transaction ID: D201643

Mailing Address PO Box 6552

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	8

City Las Cruces State NM Zip Code 88006

Amount of Each Disbursement this Period

206.13

Purpose of Disbursement
Travel 3/18

Category/
Type

Candidate Name
Bill McCamley

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

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

* in-kind received

State: NM District: 02

C.

Full Name (Last, First, Middle Initial)
Citizens Bank of Las Cruces

Transaction ID: D201626

Mailing Address P.O. Box 2108

Date of Disbursement

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

City Las Cruces State NM Zip Code 88004

Amount of Each Disbursement this Period

15.75

Purpose of Disbursement
New checks

Category/
Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

535.68

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

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**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)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Citizens Bank of Las Cruces

Mailing Address P.O. Box 2108

City Las Cruces State NM Zip Code 88004

Purpose of Disbursement
Wire transfer fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D201393

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

B.

Full Name (Last, First, Middle Initial)
Democratic Party of New Mexico

Mailing Address 1301 San Pedro NE

City Albuquerque State NM Zip Code 87110

Purpose of Disbursement
Voter file access

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D200974

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

C.

Full Name (Last, First, Middle Initial)
El Paseo Plaza, LLC

Mailing Address 145 South Fairfax Ave, Suite 401

City Los Angeles State CA Zip Code 90036

Purpose of Disbursement
Lease for headquarters

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D200135

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
El Paso Electric

Transaction ID: D201375
Date of Disbursement

Mailing Address PO Box 910

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	0	8

City State Zip Code
Las Cruces NM 88004

Amount of Each Disbursement this Period

102.56

Purpose of Disbursement
Electricity set-up

Category/ Type

Candidate Name

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

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

State: District:

B.

Full Name (Last, First, Middle Initial)
FedEx Kinkos

Transaction ID: D201377
Date of Disbursement

Mailing Address 1001 E University

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	0	8

City State Zip Code
Las Cruces NM 88001

Amount of Each Disbursement this Period

30.82

Purpose of Disbursement
Copying pre-primary ballots

Category/ Type

Candidate Name

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

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

State: District:

C.

Full Name (Last, First, Middle Initial)
First Comp

Transaction ID: D201384
Date of Disbursement

Mailing Address Central Park Plaza South
222 South 15th Street, Ste 1200

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	0	8

City State Zip Code
Omaha NE 68102

Amount of Each Disbursement this Period

738.00

Purpose of Disbursement
Workers compensation insurance

Category/ Type

Candidate Name

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

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

State: District:

SUBTOTAL of Disbursements This Page (optional)

871.38

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

<p>A. Full Name (Last, First, Middle Initial) First Impression</p> <p>Mailing Address 3401 Girard Blvd NE</p> <p>City Albuquerque State NM Zip Code 87107</p> <p>Purpose of Disbursement Remit envelopes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D201376 Date of Disbursement 03 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 339.86</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Ms. Jennifer Foss</p> <p>Mailing Address 5475 Porter Drive #25</p> <p>City Las Cruces State NM Zip Code 88012</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D201369 Date of Disbursement 01 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 184.70</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Ms. Jennifer Foss</p> <p>Mailing Address 5475 Porter Drive #25</p> <p>City Las Cruces State NM Zip Code 88012</p> <p>Purpose of Disbursement Ink cartridge for printer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D201714 Date of Disbursement 03 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 16.06</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>* in-kind received</p>

SUBTOTAL of Disbursements This Page (optional) ▶

540.62

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Dr. Gerald Gammell

Transaction ID: D201754

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	0	8

Mailing Address 4975 Mother Lode Trail

Amount of Each Disbursement this Period

42.73

City Las Cruces State NM Zip Code 88011

Purpose of Disbursement
Beverages for event

Category/ Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

* in-kind received

State: District:

B.

Full Name (Last, First, Middle Initial)
Dr. Gerald Gammell

Transaction ID: D201755

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	0	8

Mailing Address 4975 Mother Lode Trail

Amount of Each Disbursement this Period

18.05

City Las Cruces State NM Zip Code 88011

Purpose of Disbursement
Beverages for event

Category/ Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

* in-kind received

State: District:

C.

Full Name (Last, First, Middle Initial)
Dr. Gerald Gammell

Transaction ID: D201757

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	8

Mailing Address 4975 Mother Lode Trail

Amount of Each Disbursement this Period

38.44

City Las Cruces State NM Zip Code 88011

Purpose of Disbursement
Gas for driving candidate

Category/ Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

* in-kind received

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

99.22

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

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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)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Dr. Gerald Gammell

Transaction ID: D201761
Date of Disbursement

Mailing Address 4975 Mother Lode Trail

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	0	8

City State Zip Code
Las Cruces NM 88011

Amount of Each Disbursement this Period

32.72

Purpose of Disbursement
Gas for driving candidate
Candidate Name

Category/ Type

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

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

* in-kind received

B.

Full Name (Last, First, Middle Initial)
Dr. Gerald Gammell

Transaction ID: D201764
Date of Disbursement

Mailing Address 4975 Mother Lode Trail

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

City State Zip Code
Las Cruces NM 88011

Amount of Each Disbursement this Period

22.81

Purpose of Disbursement
Gas for driving candidate
Candidate Name

Category/ Type

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

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

* in-kind received

C.

Full Name (Last, First, Middle Initial)
Dr. Gerald Gammell

Transaction ID: D201766
Date of Disbursement

Mailing Address 4975 Mother Lode Trail

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	0	8

City State Zip Code
Las Cruces NM 88011

Amount of Each Disbursement this Period

28.10

Purpose of Disbursement
Gas for driving candidate
Candidate Name

Category/ Type

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

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

* in-kind received

SUBTOTAL of Disbursements This Page (optional)

83.63

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Dr. Gerald Gammell

Transaction ID: D201768
Date of Disbursement

Mailing Address 4975 Mother Lode Trail

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	0	8

City State Zip Code
Las Cruces NM 88011

Amount of Each Disbursement this Period

34.12

Purpose of Disbursement
Gas for driving candidate

Category/ Type

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

* in-kind received

State: District:

B.

Full Name (Last, First, Middle Initial)
Dr. Gerald Gammell

Transaction ID: D201738
Date of Disbursement

Mailing Address 4975 Mother Lode Trail

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	0	8

City State Zip Code
Las Cruces NM 88011

Amount of Each Disbursement this Period

16.80

Purpose of Disbursement
Gas for driving to get supplies

Category/ Type

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

* in-kind received

State: District:

C.

Full Name (Last, First, Middle Initial)
Dr. Gerald Gammell

Transaction ID: D201649
Date of Disbursement

Mailing Address 4975 Mother Lode Trail

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	0	8

City State Zip Code
Las Cruces NM 88011

Amount of Each Disbursement this Period

39.74

Purpose of Disbursement
Gas for driving candidate

Category/ Type

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

* in-kind received

State: District:

SUBTOTAL of Disbursements This Page (optional)

90.66

TOTAL This Period (last page this line number only)

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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)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Dr. Gerald Gammell

Transaction ID: D201650
Date of Disbursement

Mailing Address 4975 Mother Lode Trail

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	0	8

City Las Cruces State NM Zip Code 88011

Amount of Each Disbursement this Period

45.20

Purpose of Disbursement
Gas for driving candidate

Category/ Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

* in-kind received

State: District:

B.

Full Name (Last, First, Middle Initial)
Dr. Gerald Gammell

Transaction ID: D200100
Date of Disbursement

Mailing Address 4975 Mother Lode Trail

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	0	8

City Las Cruces State NM Zip Code 88011

Amount of Each Disbursement this Period

52.49

Purpose of Disbursement
Table for headquarters

Category/ Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

* in-kind received

State: District:

C.

Full Name (Last, First, Middle Initial)
Dr. Gerald Gammell

Transaction ID: D200101
Date of Disbursement

Mailing Address 4975 Mother Lode Trail

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	0	8

City Las Cruces State NM Zip Code 88011

Amount of Each Disbursement this Period

46.55

Purpose of Disbursement
Food and related supplies for meet and greet

Category/ Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

* in-kind received

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

144.24

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

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**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 102 / 139

<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)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Dr. Gerald Gammell

Transaction ID: D200102

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	0	8

Mailing Address 4975 Mother Lode Trail

Amount of Each Disbursement this Period

3.16

City Las Cruces State NM Zip Code 88011

Purpose of Disbursement
Nametags for meet and greet

Category/ Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

* in-kind received

State: District:

B.

Full Name (Last, First, Middle Initial)
Dr. Gerald Gammell

Transaction ID: D200103

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	0	8

Mailing Address 4975 Mother Lode Trail

Amount of Each Disbursement this Period

12.20

City Las Cruces State NM Zip Code 88011

Purpose of Disbursement
Gas for driving candidate

Category/ Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

* in-kind received

State: District:

C.

Full Name (Last, First, Middle Initial)
Dr. Gerald Gammell

Transaction ID: D200105

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	0	8

Mailing Address 4975 Mother Lode Trail

Amount of Each Disbursement this Period

54.51

City Las Cruces State NM Zip Code 88011

Purpose of Disbursement
Gas for driving candidate

Category/ Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

* in-kind received

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

69.87

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

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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)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Dr. Gerald Gammell <hr/> Mailing Address 4975 Mother Lode Trail <hr/> City Las Cruces State NM Zip Code 88011 <hr/> Purpose of Disbursement Gas for driving candidate Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D200106 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 50.10 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received
B.	Full Name (Last, First, Middle Initial) Dr. Gerald Gammell <hr/> Mailing Address 4975 Mother Lode Trail <hr/> City Las Cruces State NM Zip Code 88011 <hr/> Purpose of Disbursement Motel room for candidate and staffer Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D200107 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 50.68 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received
C.	Full Name (Last, First, Middle Initial) Dr. Gerald Gammell <hr/> Mailing Address 4975 Mother Lode Trail <hr/> City Las Cruces State NM Zip Code 88011 <hr/> Purpose of Disbursement Gas for driving candidate Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D200109 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 29.56 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received

SUBTOTAL of Disbursements This Page (optional)	130.34
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Dr. Gerald Gammell	Transaction ID: D200110 Date of Disbursement 03 / 08 / 2008
	Mailing Address 4975 Mother Lode Trail	Amount of Each Disbursement this Period 11.96
	City Las Cruces State NM Zip Code 88011	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Gas for driving candidate Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		* in-kind received

B.	Full Name (Last, First, Middle Initial) Dr. Gerald Gammell	Transaction ID: D200112 Date of Disbursement 03 / 03 / 2008
	Mailing Address 4975 Mother Lode Trail	Amount of Each Disbursement this Period 29.00
	City Las Cruces State NM Zip Code 88011	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Gas for driving candidate Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		* in-kind received

C.	Full Name (Last, First, Middle Initial) Dr. Gerald Gammell	Transaction ID: D200113 Date of Disbursement 03 / 04 / 2008
	Mailing Address 4975 Mother Lode Trail	Amount of Each Disbursement this Period 33.16
	City Las Cruces State NM Zip Code 88011	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Pens, envelopes, and hanging folders Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		* in-kind received

SUBTOTAL of Disbursements This Page (optional)	74.12
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 105 / 139

<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)
Bill McCamley for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. John Gomez</p> <p>Mailing Address 607 Datil Court</p> <p>City Las Cruces State NM Zip Code 88007</p> <p>Purpose of Disbursement Printing at FedEx/Kinko's</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D201644 Date of Disbursement 03 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 12.03</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>* in-kind received</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. John Gomez</p> <p>Mailing Address 607 Datil Court</p> <p>City Las Cruces State NM Zip Code 88007</p> <p>Purpose of Disbursement Toner cartridge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D201645 Date of Disbursement 03 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 42.83</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>* in-kind received</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. John Gomez</p> <p>Mailing Address 607 Datil Court</p> <p>City Las Cruces State NM Zip Code 88007</p> <p>Purpose of Disbursement Clipboards</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D201648 Date of Disbursement 03 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 9.66</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>* in-kind received</p>

SUBTOTAL of Disbursements This Page (optional) ▶

64.52

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Matt Gotha

Mailing Address 495 Northwest 107th Ave

City State Zip Code
Coral Springs FL 33071

Purpose of Disbursement
Wages

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D200129
Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

1688.32

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

B.

Full Name (Last, First, Middle Initial)
Mr. Matt Gotha

Mailing Address 495 Northwest 107th Ave

City State Zip Code
Coral Springs FL 33071

Purpose of Disbursement
Wages

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D200130
Date of Disbursement

02 / 01 / 2008

Amount of Each Disbursement this Period

1688.32

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

C.

Full Name (Last, First, Middle Initial)
Mr. Matt Gotha

Mailing Address 495 Northwest 107th Ave

City State Zip Code
Coral Springs FL 33071

Purpose of Disbursement
Wages

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D200131
Date of Disbursement

02 / 15 / 2008

Amount of Each Disbursement this Period

1688.32

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

SUBTOTAL of Disbursements This Page (optional)

5064.96

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Matt Gotha	Transaction ID: D200132 Date of Disbursement 01 / 09 / 2008
	Mailing Address 495 Northwest 107th Ave	Amount of Each Disbursement this Period 1688.32
	City Coral Springs State FL Zip Code 33071	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Mr. Matt Gotha	Transaction ID: D200134 Date of Disbursement 02 / 10 / 2008
	Mailing Address 495 Northwest 107th Ave	Amount of Each Disbursement this Period 396.63
	City Coral Springs State FL Zip Code 33071	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Greenberg Quinlan Rosner	Transaction ID: D201383 Date of Disbursement 03 / 14 / 2008
	Mailing Address 10 G Street NE, Suite 500	Amount of Each Disbursement this Period 13100.00
	City Washington State DC Zip Code 20001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Consulting, research, and polling fee	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	15184.95
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Ms. Marjorie Griffin

Mailing Address 935 Flora Vista Drive

City Las Cruces State NM Zip Code 88005

Purpose of Disbursement
Food and related supplies for meet and greet

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D200096

Date of Disbursement

02 / 06 / 2008

Amount of Each Disbursement this Period

61.23

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

* in-kind received

B.

Full Name (Last, First, Middle Initial)
Las Cruces Utilities Department

Mailing Address PO Box 20000

City Las Cruces State NM Zip Code 88004

Purpose of Disbursement
Deposit for gas service

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D201382

Date of Disbursement

01 / 22 / 2008

Amount of Each Disbursement this Period

100.00

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

C.

Full Name (Last, First, Middle Initial)
Mike McCamley

Mailing Address 1540 Karrie Ln

City Las Cruces State NM Zip Code 88007

Purpose of Disbursement
Printer for headquarters

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D200114

Date of Disbursement

03 / 18 / 2008

Amount of Each Disbursement this Period

79.99

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

* in-kind received

SUBTOTAL of Disbursements This Page (optional) ▶

241.22

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

<p>A. Full Name (Last, First, Middle Initial) Mountain States Indemnity Co.</p> <p>Mailing Address 5051 Journal Center Blvd. NE</p> <p>City Albuquerque State NM Zip Code 87109</p> <p>Purpose of Disbursement Property and liability insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D201385</p> <p>Date of Disbursement 01 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 750.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) MRL Printing</p> <p>Mailing Address 2415 Rosemary Terr.</p> <p>City Tallahassee State FL Zip Code 32303</p> <p>Purpose of Disbursement Shirts</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D201387</p> <p>Date of Disbursement 01 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 674.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) New Mexico Tax and Revenue Department</p> <p>Mailing Address 1100 S. St. Francis Dr. P.O. Box 630</p> <p>City Santa Fe State NM Zip Code 87504</p> <p>Purpose of Disbursement 2007 unemployment insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D200970</p> <p>Date of Disbursement 01 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 116.20</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>1540.20</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

<p>A. Full Name (Last, First, Middle Initial) New Mexico Tax and Revenue Department</p> <p>Mailing Address 1100 S. St. Francis Dr. P.O. Box 630</p> <p>City Santa Fe State NM Zip Code 87504</p> <p>Purpose of Disbursement 4th quarter gross receipts tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D200971</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 8.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) New Mexico Tax and Revenue Department</p> <p>Mailing Address 1100 S. St. Francis Dr. P.O. Box 630</p> <p>City Santa Fe State NM Zip Code 87504</p> <p>Purpose of Disbursement State taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D200972</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 371.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) New Mexico Tax and Revenue Department</p> <p>Mailing Address 1100 S. St. Francis Dr. P.O. Box 630</p> <p>City Santa Fe State NM Zip Code 87504</p> <p>Purpose of Disbursement State taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D200973</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 301.60</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	681.59
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
New Mexico Young Democrats

Transaction ID: D201380

Mailing Address PO Box needed

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	8

City Albuquerque State NM Zip Code 87123

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
Table at Pre-Convention Party

Category/ Type

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

Candidate Name

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

State: District:

B.

Full Name (Last, First, Middle Initial)
NGP Software

Transaction ID: D200140

Mailing Address 1225 Eye Street, NW, Suite 1225

Date of Disbursement

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

City Washington State DC Zip Code 20005

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
Software fee

Category/ Type

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

Candidate Name

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

State: District:

C.

Full Name (Last, First, Middle Initial)
Qwest

Transaction ID: D201372

Mailing Address PO Box 2678

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	0	8

City Omaha State NE Zip Code 68103

Amount of Each Disbursement this Period

238.25

Purpose of Disbursement
Phones and internet for headquarters

Category/ Type

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

Candidate Name

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

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1838.25

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

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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)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Qwest

Transaction ID: D201373
Date of Disbursement

Mailing Address PO Box 2678

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	0	8

City Omaha State NE Zip Code 68103

Amount of Each Disbursement this Period

470.44

Purpose of Disbursement
Setup of internet and phones
Candidate Name

Category/
Type

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

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

B.

Full Name (Last, First, Middle Initial)
Qwest

Transaction ID: D201374
Date of Disbursement

Mailing Address PO Box 2678

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	8

City Omaha State NE Zip Code 68103

Amount of Each Disbursement this Period

400.00

Purpose of Disbursement
Deposit required for political account
Candidate Name

Category/
Type

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

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

C.

Full Name (Last, First, Middle Initial)
Kelly Siebe

Transaction ID: D200136
Date of Disbursement

Mailing Address 1211 Branson Ave.

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

City Las Cruces State NM Zip Code 88001

Amount of Each Disbursement this Period

1550.00

Purpose of Disbursement
Final payment for website design
Candidate Name

Category/
Type

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

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

SUBTOTAL of Disbursements This Page (optional)

2420.44

TOTAL This Period (last page this line number only)

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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)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Kelly Siebe

Mailing Address 1211 Branson Ave.

City Las Cruces State NM Zip Code 88001

Purpose of Disbursement
Wages

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D200137

Date of Disbursement

02 / 15 / 2008

Amount of Each Disbursement this Period

254.30

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

B.

Full Name (Last, First, Middle Initial)
Kelly Siebe

Mailing Address 1211 Branson Ave.

City Las Cruces State NM Zip Code 88001

Purpose of Disbursement
Wages

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D200138

Date of Disbursement

03 / 01 / 2008

Amount of Each Disbursement this Period

133.32

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

C.

Full Name (Last, First, Middle Initial)
Kelly Siebe

Mailing Address 1211 Branson Ave.

City Las Cruces State NM Zip Code 88001

Purpose of Disbursement
Wages

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D200139

Date of Disbursement

03 / 15 / 2008

Amount of Each Disbursement this Period

133.33

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

SUBTOTAL of Disbursements This Page (optional) ▶

520.95

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Sprint

Transaction ID: D200141

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	0	8

Mailing Address 3050 E. Lohman Ave Sutie G

Amount of Each Disbursement this Period

252.35

City State Zip Code
Las Cruces NM 88011

Purpose of Disbursement

Phone bill

Category/ Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Sprint

Transaction ID: D200142

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	0	8

Mailing Address 3050 E. Lohman Ave Sutie G

Amount of Each Disbursement this Period

250.95

City State Zip Code
Las Cruces NM 88011

Purpose of Disbursement

Phone bill

Category/ Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Sprint

Transaction ID: D200143

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	0	8

Mailing Address 3050 E. Lohman Ave Sutie G

Amount of Each Disbursement this Period

249.76

City State Zip Code
Las Cruces NM 88011

Purpose of Disbursement

Phone bill

Category/ Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

753.06

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

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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)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Staples

Transaction ID: D200975

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	0	8

Mailing Address 2260 E Lohman

Amount of Each Disbursement this Period

67.48

City State Zip Code
Las Cruces NM 88001

Purpose of Disbursement
Toner cartridge

Category/ Type

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

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Arturo Uribe

Transaction ID: D201381

Date of Disbursement

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

Mailing Address 114 Emerson Ave

Amount of Each Disbursement this Period

1500.00

City State Zip Code
Mesquite NM 88048

Purpose of Disbursement
For PACE advertising of Anthony candidate forum

Category/ Type

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

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
US Treasury

Transaction ID: D201390

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	0	8

Mailing Address 1500 Pennsylvania Avenue

Amount of Each Disbursement this Period

2374.00

City State Zip Code
Washington DC 20220

Purpose of Disbursement
Federal withholding taxes

Category/ Type

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

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

3941.48

TOTAL This Period (last page this line number only)

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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)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) US Treasury Mailing Address 1500 Pennsylvania Avenue City Washington State DC Zip Code 20220 Purpose of Disbursement Federal corporate taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D201391 Date of Disbursement 03 / 10 / 2008 Amount of Each Disbursement this Period 30.02 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) US Treasury Mailing Address 1500 Pennsylvania Avenue City Washington State DC Zip Code 20220 Purpose of Disbursement Federal withholding taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D201392 Date of Disbursement 03 / 14 / 2008 Amount of Each Disbursement this Period 2408.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) US Treasury Mailing Address 1500 Pennsylvania Avenue City Washington State DC Zip Code 20220 Purpose of Disbursement Unemployment tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D201386 Date of Disbursement 01 / 04 / 2008 Amount of Each Disbursement this Period 16.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	2454.32
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: D201378 Date of Disbursement 03 / 18 / 2008
	Mailing Address University Park	Amount of Each Disbursement this Period 436.00
	City Las Cruces State NM Zip Code 88003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Stamps Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: D201379 Date of Disbursement 03 / 19 / 2008
	Mailing Address University Park	Amount of Each Disbursement this Period 28.00
	City Las Cruces State NM Zip Code 88003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Post office box Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Michael Ward	Transaction ID: D201646 Date of Disbursement 03 / 05 / 2008
	Mailing Address 106 School Street	Amount of Each Disbursement this Period 42.00
	City Wayland State MA Zip Code 01778	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Copying at Lea County Clerk's Office Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	506.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Michael Ward	Transaction ID: D201647 Date of Disbursement 03 / 19 / 2008
	Mailing Address 106 School Street	Amount of Each Disbursement this Period 4.60
	City Wayland State MA Zip Code 01778	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage for mailing package	* in-kind received
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Michael Ward	Transaction ID: D200120 Date of Disbursement 01 / 01 / 2008
	Mailing Address 106 School Street	Amount of Each Disbursement this Period 1192.36
	City Wayland State MA Zip Code 01778	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Wages	
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Michael Ward	Transaction ID: D200122 Date of Disbursement 01 / 15 / 2008
	Mailing Address 106 School Street	Amount of Each Disbursement this Period 1192.36
	City Wayland State MA Zip Code 01778	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Wages	
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2389.32
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Michael Ward	Transaction ID: D200123 Date of Disbursement 02 / 01 / 2008
	Mailing Address 106 School Street	Amount of Each Disbursement this Period 1192.36
	City Wayland State MA Zip Code 01778	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Wages Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Michael Ward	Transaction ID: D200124 Date of Disbursement 02 / 15 / 2008
	Mailing Address 106 School Street	Amount of Each Disbursement this Period 1192.36
	City Wayland State MA Zip Code 01778	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Wages Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Michael Ward	Transaction ID: D200125 Date of Disbursement 03 / 01 / 2008
	Mailing Address 106 School Street	Amount of Each Disbursement this Period 1192.36
	City Wayland State MA Zip Code 01778	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Wages Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3577.08
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Michael Ward

Transaction ID: D200126
Date of Disbursement

Mailing Address 106 School Street

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	0	8

City State Zip Code
Wayland MA 01778

Amount of Each Disbursement this Period

1192.36

Purpose of Disbursement
Wages

Category/Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Michael Ward

Transaction ID: D201659
Date of Disbursement

Mailing Address 106 School Street

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	8

City State Zip Code
Wayland MA 01778

Amount of Each Disbursement this Period

89.50

Purpose of Disbursement
Purchase of stamps

Category/Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

* in-kind received

C.

Full Name (Last, First, Middle Initial)
Michael Ward

Transaction ID: D201660
Date of Disbursement

Mailing Address 106 School Street

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	0	8

City State Zip Code
Wayland MA 01778

Amount of Each Disbursement this Period

14.00

Purpose of Disbursement
DVDs of TV appearances

Category/Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

* in-kind received

SUBTOTAL of Disbursements This Page (optional)

1295.86

TOTAL This Period (last page this line number only)

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**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)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Michael Ward Mailing Address 106 School Street City Wayland State MA Zip Code 01778 Purpose of Disbursement Stamps Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D201711 Date of Disbursement 03 / 17 / 2008 Amount of Each Disbursement this Period 410.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received
B.	Full Name (Last, First, Middle Initial) Michael Ward Mailing Address 106 School Street City Wayland State MA Zip Code 01778 Purpose of Disbursement Stamps Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D201712 Date of Disbursement 03 / 07 / 2008 Amount of Each Disbursement this Period 74.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received
C.	Full Name (Last, First, Middle Initial) Michael Ward Mailing Address 106 School Street City Wayland State MA Zip Code 01778 Purpose of Disbursement Travel 1/23 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D201815 Date of Disbursement 01 / 23 / 2008 Amount of Each Disbursement this Period 113.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received

SUBTOTAL of Disbursements This Page (optional) ▶

598.93

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Michael Ward	Transaction ID: D201816 Date of Disbursement 02 / 12 / 2008
	Mailing Address 106 School Street	Amount of Each Disbursement this Period 286.15
	City Wayland State MA Zip Code 01778	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel 2/12 Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		* in-kind received

B.	Full Name (Last, First, Middle Initial) Michael Ward	Transaction ID: D201817 Date of Disbursement 02 / 13 / 2008
	Mailing Address 106 School Street	Amount of Each Disbursement this Period 109.13
	City Wayland State MA Zip Code 01778	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel 2/13 Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		* in-kind received

C.	Full Name (Last, First, Middle Initial) Michael Ward	Transaction ID: D201818 Date of Disbursement 03 / 15 / 2008
	Mailing Address 106 School Street	Amount of Each Disbursement this Period 240.08
	City Wayland State MA Zip Code 01778	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel 3/15 Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		* in-kind received

SUBTOTAL of Disbursements This Page (optional)	▶	635.36
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Michael Ward Mailing Address 106 School Street City Wayland State MA Zip Code 01778 Purpose of Disbursement Travel 3/31 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D201819 Date of Disbursement 03 / 31 / 2008 Amount of Each Disbursement this Period 191.58 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received
B.	Full Name (Last, First, Middle Initial) Zia Specialties Mailing Address 121 Wyatt Drive, #8 City Las Cruces State NM Zip Code 88005 Purpose of Disbursement Bumper stickers Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D201370 Date of Disbursement 01 / 16 / 2008 Amount of Each Disbursement this Period 228.69 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Zia Specialties Mailing Address 121 Wyatt Drive, #8 City Las Cruces State NM Zip Code 88005 Purpose of Disbursement Buttons and signs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D201371 Date of Disbursement 02 / 07 / 2008 Amount of Each Disbursement this Period 499.92 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	920.19
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Matt Gotha

Mailing Address 495 Northwest 107th Ave

City State Zip Code
Coral Springs FL 33071

Purpose of Disbursement
Reimbursement for purchase of stamps

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D200133

Date of Disbursement

02 / 07 / 2008

Amount of Each Disbursement this Period

41.00

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

B.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address University Park

City State Zip Code
Las Cruces NM 88003

Purpose of Disbursement
Stamps

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D201394

Date of Disbursement

02 / 07 / 2008

Amount of Each Disbursement this Period

41.00

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Cat Looper

Mailing Address 294 N Virginia St

City State Zip Code
Las Cruces NM 88001

Purpose of Disbursement
Reimbursement for office equipment

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D201388

Date of Disbursement

01 / 18 / 2008

Amount of Each Disbursement this Period

32.14

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

SUBTOTAL of Disbursements This Page (optional)

73.14

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial) Nick's Office Furniture Mailing Address 1126 S Solano Dr City Las Cruces State NM Zip Code 88001 Purpose of Disbursement Office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D201389 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 0 8 Amount of Each Disbursement this Period 32.14 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Category/ Type

B. Full Name (Last, First, Middle Initial) Mr. Geoff Pershing Mailing Address 406 Yale Drive City Las Cruces State NM Zip Code 88005 Purpose of Disbursement Reimbursement for stamps Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D201395 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 15.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type

C. Full Name (Last, First, Middle Initial) USPS Mailing Address University Park City Las Cruces State NM Zip Code 88003 Purpose of Disbursement Stamps Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D201396 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 15.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	15.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

<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)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Geoff Pershing	Transaction ID: D201397 Date of Disbursement 03 / 21 / 2008
	Mailing Address 406 Yale Drive	Amount of Each Disbursement this Period 100.65
	City Las Cruces State NM Zip Code 88005	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement for phones Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: D201398 Date of Disbursement 03 / 21 / 2008
	Mailing Address 2260 E Lohman	Amount of Each Disbursement this Period 100.65
	City Las Cruces State NM Zip Code 88001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Phones Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Dr. Gerald Gammell	Transaction ID: D201651 Date of Disbursement 03 / 04 / 2008
	Mailing Address 4975 Mother Lode Trail	Amount of Each Disbursement this Period 24.99
	City Las Cruces State NM Zip Code 88011	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement for videotapes Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	125.64
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A. Full Name (Last, First, Middle Initial) Costco Mailing Address 6101 Gateway West Blvd City El Paso State TX Zip Code 79925 Purpose of Disbursement Video cassettes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D201652 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 8
	Amount of Each Disbursement this Period 24.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Nick Salcido Mailing Address 206 Plum St City Carlsbad State NM Zip Code 88220 Purpose of Disbursement Reimbursement for travel expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D201653 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 51.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial) Windmill Chevron Mailing Address 628 National Parks Highway City Carlsbad State NM Zip Code 88220 Purpose of Disbursement Purchase of gas Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D201656 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 51.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	51.73
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

<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)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Nick Salcido	Transaction ID: D201654 Date of Disbursement 03 / 14 / 2008
	Mailing Address 206 Plum St	Amount of Each Disbursement this Period 49.00
	City Carlsbad State NM Zip Code 88220	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement for travel expense	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Rio Rancho Chevron	Transaction ID: D201658 Date of Disbursement 03 / 14 / 2008
	Mailing Address 1475 Hwy 528	Amount of Each Disbursement this Period 49.00
	City Rio Rancho State NM Zip Code 87124	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Purchase of gas	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Nick Salcido	Transaction ID: D201655 Date of Disbursement 03 / 16 / 2008
	Mailing Address 206 Plum St	Amount of Each Disbursement this Period 45.00
	City Carlsbad State NM Zip Code 88220	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement for travel expense	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	94.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) KW Express	Transaction ID: D201657
	Mailing Address 3300 N Main Street	Date of Disbursement 03 / 16 / 2008
	City Roswell State NM Zip Code 88201	Amount of Each Disbursement this Period 45.00
	Purpose of Disbursement Purchase of gas	<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	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Monica Gomez	Transaction ID: D201661
	Mailing Address 400 Dawson Rd.	Date of Disbursement 02 / 29 / 2008
	City La Mesa State NM Zip Code 88044	Amount of Each Disbursement this Period 22.98
	Purpose of Disbursement Printing and supplies	<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	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) FedEx Kinkos	Transaction ID: D201666
	Mailing Address 1001 E University	Date of Disbursement 02 / 29 / 2008
	City Las Cruces State NM Zip Code 88001	Amount of Each Disbursement this Period 22.98
	Purpose of Disbursement Printing and supplies	<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	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	22.98
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Monica Gomez	Transaction ID: D201662 Date of Disbursement 03 / 06 / 2008
	Mailing Address 400 Dawson Rd.	Amount of Each Disbursement this Period 87.60
	City La Mesa State NM Zip Code 88044	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Purchase of printer	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: D201667 Date of Disbursement 03 / 06 / 2008
	Mailing Address 2260 E Lohman	Amount of Each Disbursement this Period 87.60
	City Las Cruces State NM Zip Code 88001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printer and supplies	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Monica Gomez	Transaction ID: D201663 Date of Disbursement 03 / 29 / 2008
	Mailing Address 400 Dawson Rd.	Amount of Each Disbursement this Period 4.98
	City La Mesa State NM Zip Code 88044	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Purchase of snacks	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	92.58
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

<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)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Albertsons	Transaction ID: D201668 Date of Disbursement 03 / 29 / 2008
	Mailing Address 6600 Central Ave SW	Amount of Each Disbursement this Period 4.98
	City Albuquerque State NM Zip Code 87121	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Purchase of snacks	<input type="checkbox"/> [MEMO ITEM]
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Monica Gomez	Transaction ID: D201664 Date of Disbursement 03 / 21 / 2008
	Mailing Address 400 Dawson Rd.	Amount of Each Disbursement this Period 5.36
	City La Mesa State NM Zip Code 88044	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Phone jacks	<input type="checkbox"/> [MEMO ITEM]
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Dollar Tree	Transaction ID: D201669 Date of Disbursement 03 / 21 / 2008
	Mailing Address 1701 E University Ave #2	Amount of Each Disbursement this Period 5.36
	City Las Cruces State NM Zip Code 88001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Phone jacks	<input type="checkbox"/> [MEMO ITEM]
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5.36
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Monica Gomez

Mailing Address 400 Dawson Rd.

City La Mesa State NM Zip Code 88044

Purpose of Disbursement
Cleaning supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D201665

Date of Disbursement

03 / 20 / 2008

Amount of Each Disbursement this Period

19.79

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

B.

Full Name (Last, First, Middle Initial)
Walmart

Mailing Address 1550 S Valley Dr

City Las Cruces State NM Zip Code 88005

Purpose of Disbursement
Cleaning supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D201670

Date of Disbursement

03 / 20 / 2008

Amount of Each Disbursement this Period

19.79

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Ms. Linda McCamley

Mailing Address 1540 Karrie Lane

City Las Cruces State NM Zip Code 88007

Purpose of Disbursement
Stickers for big signs

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D201671

Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

21.43

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

SUBTOTAL of Disbursements This Page (optional) ▶

41.22

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
GSI Graphic Services

Mailing Address PO Box 1161

City State Zip Code
Mesilla Park NM 88047

Purpose of Disbursement
Stickers for big signs
Candidate Name

Category/
Type

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

Transaction ID: D201674
Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

21.43

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Ms. Linda McCamley

Mailing Address 1540 Karrie Lane

City State Zip Code
Las Cruces NM 88007

Purpose of Disbursement
Reimbursement for food for event
Candidate Name

Category/
Type

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

Transaction ID: D201672
Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

39.09

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

C.

Full Name (Last, First, Middle Initial)
Southwest Cash and Carry

Mailing Address 2489 North Main

City State Zip Code
Las Cruces NM 88001

Purpose of Disbursement
Food for event
Candidate Name

Category/
Type

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

Transaction ID: D201675
Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

39.09

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

39.09

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Ms. Linda McCamley <hr/> Mailing Address 1540 Karrie Lane <hr/> City Las Cruces State NM Zip Code 88007 <hr/> Purpose of Disbursement Power chord for camera <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/> State: District:	Transaction ID: D201673 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 42.84 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Radioshack <hr/> Mailing Address 2513 N. Main <hr/> City Las Cruces State NM Zip Code 88001 <hr/> Purpose of Disbursement Power chord for camera <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/> State: District:	Transaction ID: D201676 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 42.84 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Lloyd Covens <hr/> Mailing Address 5862 Cliff Lane <hr/> City Las Cruces State NM Zip Code 88011 <hr/> Purpose of Disbursement Printing <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/> State: District:	Transaction ID: D201700 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 10.47 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ►

53.31

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) FedEx Kinkos	Transaction ID: D201704 Date of Disbursement 01 / 19 / 2008
	Mailing Address 1001 E University	Amount of Each Disbursement this Period 10.47
	City Las Cruces State NM Zip Code 88001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing	[MEMO ITEM]
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Lloyd Covens	Transaction ID: D201701 Date of Disbursement 01 / 24 / 2008
	Mailing Address 5862 Cliff Lane	Amount of Each Disbursement this Period 20.00
	City Las Cruces State NM Zip Code 88011	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Maps	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Dona Ana County Planning Department	Transaction ID: D201707 Date of Disbursement 01 / 24 / 2008
	Mailing Address 845 Motel Blvd	Amount of Each Disbursement this Period 20.00
	City Las Cruces State NM Zip Code 88007	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Maps	[MEMO ITEM]
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Cat Looper

Mailing Address 294 N Virginia St

City Las Cruces State NM Zip Code 88001

Purpose of Disbursement

Stamps

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D201709

Date of Disbursement

03 / 05 / 2008

Amount of Each Disbursement this Period

125.78

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

B.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address University Park

City Las Cruces State NM Zip Code 88003

Purpose of Disbursement

Stamps

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D201710

Date of Disbursement

03 / 05 / 2008

Amount of Each Disbursement this Period

125.78

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Bill Gomez

Mailing Address 400 Dawson Rd

City La Mesa State NM Zip Code 88044

Purpose of Disbursement

Food for event

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D201717

Date of Disbursement

03 / 14 / 2008

Amount of Each Disbursement this Period

140.25

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

SUBTOTAL of Disbursements This Page (optional) ▶

266.03

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Albertsons

Mailing Address 6600 Central Ave SW

City Albuquerque State NM Zip Code 87121

Purpose of Disbursement

Food for event

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D201719

Date of Disbursement

03 / 14 / 2008

Amount of Each Disbursement this Period

140.25

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Dr. Gerald Gammell

Mailing Address 4975 Mother Lode Trail

City Las Cruces State NM Zip Code 88011

Purpose of Disbursement

Food for event

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D201730

Date of Disbursement

03 / 15 / 2008

Amount of Each Disbursement this Period

251.89

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

C.

Full Name (Last, First, Middle Initial)
Costco

Mailing Address 6101 Gateway West Blvd

City El Paso State TX Zip Code 79925

Purpose of Disbursement

Food for event

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D201744

Date of Disbursement

03 / 15 / 2008

Amount of Each Disbursement this Period

251.89

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

251.89

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Bill McCamley for Congress

A.	Full Name (Last, First, Middle Initial) Dr. Gerald Gammell	Transaction ID: D201740 Date of Disbursement 03 / 08 / 2008
	Mailing Address 4975 Mother Lode Trail	Amount of Each Disbursement this Period 65.85
	City Las Cruces State NM Zip Code 88011	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement for drinks for event Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Costco	Transaction ID: D201746 Date of Disbursement 03 / 08 / 2008
	Mailing Address 6101 Gateway West Blvd	Amount of Each Disbursement this Period 65.85
	City El Paso State TX Zip Code 79925	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement for drinks for event Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Dr. Gerald Gammell	Transaction ID: D201741 Date of Disbursement 03 / 13 / 2008
	Mailing Address 4975 Mother Lode Trail	Amount of Each Disbursement this Period 88.69
	City Las Cruces State NM Zip Code 88011	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	154.54
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 139 / 139

<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)
Bill McCamley for Congress

A.

Full Name (Last, First, Middle Initial)
Costco

Mailing Address 6101 Gateway West Blvd

City State Zip Code
El Paso TX 79925

Purpose of Disbursement
Office supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D201748

Date of Disbursement

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
0	3		1	3		2	0	0	8

Amount of Each Disbursement this Period

88.69

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

61470.53