

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Eric Roberson for Congress

Report Covering the Period:

From:

| | |
|---|---|
| M | M |
| 0 | 4 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

To:

| | |
|---|---|
| M | M |
| 0 | 6 |

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

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 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))..... | 46641.19 | 64366.19 |
| (b) Total Contribution Refunds (from Line 20(d))..... | 500.00 | 500.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 46141.19 | 63866.19 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17)..... | 28386.89 | 49504.31 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 96.05 | 96.05 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 28290.84 | 49408.26 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 24087.01 | |
| 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)..... | 3874.00 | |

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
Eric Roberson for Congress

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 4 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

 To:

| | |
|---|---|
| M | M |
| 0 | 6 |

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

| | | | |
|---|---|---|---|
| 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).....

44351.19

61041.19

(ii) Unitemized.....

2290.00

3325.00

(iii) TOTAL of contributions

46641.19

64366.19

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

46641.19

64366.19

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

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

0.00

5200.00

13. LOANS

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

1224.00

4124.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

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

1224.00

4124.00

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

96.05

96.05

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

555.08

555.08

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

48516.32

74341.32

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|---------------------------------------|--|
| 17. OPERATING EXPENDITURES..... | 28386.89 | 49504.31 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES..... | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 250.00 | 250.00 |
| (b) Of all Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 250.00 | 250.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees..... | 500.00 | 500.00 |
| (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))..... | 500.00 | 500.00 |
| 21. OTHER DISBURSEMENTS..... | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 29136.89 | 50254.31 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 4707.58 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)..... | 48516.32 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 53223.90 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 29136.89 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 24087.01 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

| | |
|---|------------------------------|
| FOR LINE NUMBER: | PAGE 5 / 49 |
| (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)
Eric Roberson for Congress

| | | | |
|--|---|----------------------------------|--|
| A. | Full Name (Last, First, Middle Initial) Robert L Book | | Date of Receipt |
| | Mailing Address 14003 Highmark Sq | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 06 / 30 / 2008 |
| | City | State | Zip Code |
| | Dallas | TX | 75254-8505 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: C1802845 |
| Name of Employer Information Requested | | Occupation Information Requested | Amount of Each Receipt this Period |
| Receipt For: 2008 | | Election Cycle-to-Date ▼ | <input type="text"/> 250.00 |
| <input type="checkbox"/> Primary <input checked="" 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) ▼ | | <input type="text"/> 750.00 | |

| | | | |
|--|---|------------------------------|--|
| B. | Full Name (Last, First, Middle Initial) James R Boud | | Date of Receipt |
| | Mailing Address 6 Birchtree Ln | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 04 / 14 / 2008 |
| | City | State | Zip Code |
| | Sandy | UT | 84092-4844 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: C1807443 |
| Name of Employer Braunberger Baud Draper | | Occupation Attorney | Amount of Each Receipt this Period |
| Receipt For: 2008 | | Election Cycle-to-Date ▼ | <input type="text"/> 2300.00 |
| <input type="checkbox"/> Primary <input checked="" 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) ▼ | | <input type="text"/> 2300.00 | |

| | | | |
|--|---|-----------------------------|--|
| C. | Full Name (Last, First, Middle Initial) George Bramblett, Jr. | | Date of Receipt |
| | Mailing Address 4515 Highland Dr | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 05 / 21 / 2008 |
| | City | State | Zip Code |
| | Dallas | TX | 75205-3818 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: C1807732 |
| Name of Employer Haynes & Boone | | Occupation Attorney | Amount of Each Receipt this Period |
| Receipt For: 2008 | | Election Cycle-to-Date ▼ | <input type="text"/> 500.00 |
| <input type="checkbox"/> Primary <input checked="" 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) ▼ | | <input type="text"/> 500.00 | |

| | |
|--|------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 3050.00 |
| 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 6 / 49
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Eric Roberson for Congress

A. Full Name (Last, First, Middle Initial)
Frank L Branson

Mailing Address 4514 Cole Ave
Ste 1800

City State Zip Code
Dallas TX 75205-4185

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

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

Transaction ID: C1802830

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)
Wayne H Braunberger

Mailing Address 2509 Oak Grove Dr

City State Zip Code
Sandy UT 84092

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

Name of Employer Braunberger Baud Draper Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4400.00

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

Transaction ID: C1807498

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)
Skye Brewer

Mailing Address 5210 Deloache Ave

City State Zip Code
Dallas TX 75220-2214

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

Name of Employer Law Firm of Bickel and Brewer Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

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

Transaction ID: C1925467

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) ► **6900.00**

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 7 / 49 |
| | <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)
Eric Roberson for Congress

| | | | |
|--|--|--------------------------|--|
| A. | Full Name (Last, First, Middle Initial) William Brewer, III | | Date of Receipt |
| | Mailing Address 4800 Bank 1 Ctr 1717 Main St | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 10 / 2008 |
| | City | State | Zip Code |
| | Dallas | TX | 75201-4821 |
| | FEC ID number of contributing federal political committee. | | Transaction ID: C1807199 |
| | C <input type="text"/> | | Amount of Each Receipt this Period |
| Name of Employer self | | 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 type="checkbox"/> Primary | <input checked="" type="checkbox"/> General | <input type="text"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | 2300.00 | |

| | | | |
|--|--|--------------------------|--|
| B. | Full Name (Last, First, Middle Initial) Tad Draper | | Date of Receipt |
| | Mailing Address 13969 Maple Hollow Cir | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 14 / 2008 |
| | City | State | Zip Code |
| | Draper | UT | 84020-9026 |
| | FEC ID number of contributing federal political committee. | | Transaction ID: C1807450 |
| | C <input type="text"/> | | Amount of Each Receipt this Period |
| Name of Employer Braunberger Bond Draper | | 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 type="checkbox"/> Primary | <input checked="" type="checkbox"/> General | <input type="text"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | 4400.00 | |

| | | | |
|--|--|--------------------------|--|
| C. | Full Name (Last, First, Middle Initial) Suzan E Fenner | | Date of Receipt |
| | Mailing Address 600 Goodwin Dr | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 29 / 2008 |
| | City | State | Zip Code |
| | Richardson | TX | 75081-5603 |
| | FEC ID number of contributing federal political committee. | | Transaction ID: C1807949 |
| | C <input type="text"/> | | Amount of Each Receipt this Period |
| Name of Employer retired | | 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 type="checkbox"/> Primary | <input checked="" type="checkbox"/> General | <input type="text"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | 500.00 | |

| | | |
|--|----------------------|---------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> | 5100.00 |
| 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: (check only one) | PAGE 8 / 49 |
| | <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)
Eric Roberson for Congress

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) Alister Fyfe | Date of Receipt MM / DD / YYYY 05 / 20 / 2008 |
| | Mailing Address 7777 Forest Ln Suite B432 | Transaction ID: C1925613 |
| | City State Zip Code Dallas TX 75230 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | Name of Employer Cardiac Associates of Dallas Occupation Doctor Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|-----------|---|---|
| B. | Full Name (Last, First, Middle Initial) W. Lewis Garrison, Jr. | Date of Receipt MM / DD / YYYY 06 / 30 / 2008 |
| | Mailing Address 3032 Brook Hollow Ln | Transaction ID: C1807213 |
| | City State Zip Code Birmingham AL 35243-5508 | Amount of Each Receipt this Period 2000.00 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | Name of Employer Heninger Garrison Davis LLC Occupation Attorney Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|-----------|---|---|
| C. | Full Name (Last, First, Middle Initial) David Griggs | Date of Receipt MM / DD / YYYY 05 / 29 / 2008 |
| | Mailing Address 14605 Dartmouth Ct | Transaction ID: C1807622 |
| | City State Zip Code Addison TX 75001-4438 | Amount of Each Receipt this Period 100.00 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | Name of Employer Canada Withrow LLP Occupation Attorney Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 571.19 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 3100.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 49 |
| | <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)
Eric Roberson for Congress

| | | | |
|---|--|------------------------|---|
| A. | Full Name (Last, First, Middle Initial) David Griggs | | Date of Receipt MM / DD / YYYY 06 / 30 / 2008 |
| | Mailing Address 14605 Dartmouth Ct | | Transaction ID: C1927313 |
| | City Addison | State TX | Zip Code 75001-4438 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 471.19 |
| | Name of Employer Canada Withrow LLP | Occupation Attorney | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 571.19 | | |

| | | | |
|---|--|------------------------|---|
| B. | Full Name (Last, First, Middle Initial) Rochelle Smith Horadam | | Date of Receipt MM / DD / YYYY 05 / 29 / 2008 |
| | Mailing Address 6054 Aberdeen Ave | | Transaction ID: C1807882 |
| | City Dallas | State TX | Zip Code 75230-5002 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| | Name of Employer UT Southwestern Medical School | Occupation Pharmacy | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | | |

| | | | |
|---|--|------------------------|---|
| C. | Full Name (Last, First, Middle Initial) Keith Jensen | | Date of Receipt MM / DD / YYYY 05 / 29 / 2008 |
| | Mailing Address 6808 Bellaire Ct | | Transaction ID: C1925601 |
| | City Fort Worth | State TX | Zip Code 76132 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2300.00 |
| | Name of Employer Self | Occupation Attorney | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 2300.00 | | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 3021.19 |
| 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 / 49

(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)
Eric Roberson for Congress

A.

Full Name (Last, First, Middle Initial)
Donald R Jones

Mailing Address 3109 Carlisle St Ste. 100

City State Zip Code
Dallas TX 75204

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Wilensky and Jones LLP Attorney

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

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 1 | 9 | | 2 | 0 | 0 | 8 |

Transaction ID: C1807759

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)
Thomas J Methvyn

Mailing Address 9829 Wynchase Cir

City State Zip Code
Montgomery AL 36117-5185

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Beasley Allen Crow Methvyn
Portis Mile Attorney

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

Date of Receipt

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

Transaction ID: C1807207

Amount of Each Receipt this Period
2000.00

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

C.

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

Mailing Address 6761 Country Club Cir

City State Zip Code
Dallas TX 75214-4021

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Keith Jensen Attorney

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

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 2 | 9 | | 2 | 0 | 0 | 8 |

Transaction ID: C1925654

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) 3000.00

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 11 / 49 |
| | <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)
Eric Roberson for Congress

| | | | |
|---|--|------------------------|---|
| A. | Full Name (Last, First, Middle Initial) Mark Mills | | Date of Receipt MM / DD / YYYY 06 / 11 / 2008 |
| | Mailing Address 6761 Country Club Cir | | Transaction ID: C1927326 |
| | City Dallas | State TX | Zip Code 75214-4021 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period -500.00 |
| | Name of Employer Keith Jensen | Occupation Attorney | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ -500.00 | | |

| | | | |
|---|--|------------------------|---|
| B. | Full Name (Last, First, Middle Initial) James Mitchell | | Date of Receipt MM / DD / YYYY 05 / 29 / 2008 |
| | Mailing Address 6605 Park Lane | | Transaction ID: C1807533 |
| | City Dallas | State TX | Zip Code 75225 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| | Name of Employer Self | Occupation Attorney | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | | |

| | | | |
|---|--|------------------------|---|
| C. | Full Name (Last, First, Middle Initial) Douglas C Monsour | | Date of Receipt MM / DD / YYYY 05 / 29 / 2008 |
| | Mailing Address 5 Spring Creek PI | | Transaction ID: C1807892 |
| | City Longview | State TX | Zip Code 75604-3600 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2300.00 |
| | Name of Employer Self9037585757 | Occupation Attorney | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 2300.00 | | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 2300.00 |
| 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 / 49
(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)
Eric Roberson for Congress

A.

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

Mailing Address 5533 Winton St

City State Zip Code
Dallas TX 75206-5351

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

Name of Employer Occupation
Self-employed software co- CEO
pany

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 9 / 2 0 0 8

Transaction ID: C1807525

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)
Patrick Mulligan

Mailing Address 3701 Crescent Ave

City State Zip Code
Dallas TX 75205-3815

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 5 / 2 7 / 2 0 0 8

Transaction ID: C1807636

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)
Henry E Neely, II

Mailing Address 5537 Saint Andrews Ct

City State Zip Code
Plano TX 75093-4235

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

Name of Employer Occupation
Information Requested Information Requested

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

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

Transaction ID: C1807680

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) ► **5100.00**

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 / 49 |
| | (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)
Eric Roberson for Congress

| | | |
|---|--|---|
| A. | Full Name (Last, First, Middle Initial) Will Pryor | Date of Receipt MM / DD / YYYY 05 / 09 / 2008 |
| | Mailing Address 10450 Heather Lane | Transaction ID: C1807686 |
| | City State Zip Code Dallas TX 75229 | Amount of Each Receipt this Period 500.00 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | Name of Employer Self Occupation Mediator attorney | |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|---|--|---|
| B. | Full Name (Last, First, Middle Initial) Angel Reyes | Date of Receipt MM / DD / YYYY 05 / 21 / 2008 |
| | Mailing Address 9746 Hathaway St | Transaction ID: C1807672 |
| | City State Zip Code Dallas TX 75220-2114 | Amount of Each Receipt this Period 250.00 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | Name of Employer Heygood Orr Reyes Pearson Bartolomei Occupation Attorney | |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|---|--|---|
| C. | Full Name (Last, First, Middle Initial) Kasie M Roberson | Date of Receipt MM / DD / YYYY 05 / 29 / 2008 |
| | Mailing Address 100 Autumn Dr | Transaction ID: C1807702 |
| | City State Zip Code Oxford OH 45056-8758 | Amount of Each Receipt this Period 250.00 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | Name of Employer Miami University of Ohio Occupation Professor | |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | |
|--|----------------|
| 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 14 / 49 |
| | <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)
Eric Roberson for Congress

| | | | |
|---|---|---|--|
| A. | Full Name (Last, First, Middle Initial) Texas Democratic Party | | Date of Receipt |
| | Mailing Address 505 W 12th St Ste 200 | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 2 2 / 2 0 0 8 |
| | City Austin | State TX | Zip Code 78701-1818 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: C1927309 |
| | Name of Employer | | Occupation |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ | Amount of Each Receipt this Period 2000.00 |
| | | <input type="text"/> Election Cycle-to-Date | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | | 2000.00 | * In-Kind: Access to Data-base |

| | | | |
|---|---|---|--|
| B. | Full Name (Last, First, Middle Initial) Troy Walker | | Date of Receipt |
| | Mailing Address 765 E 9000 S Ste A1 | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 1 7 / 2 0 0 8 |
| | City Sandy | State UT | Zip Code 84094-3083 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: C1807490 |
| | Name of Employer Braunberger Boud Draper | | Occupation Attorney |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ | Amount of Each Receipt this Period 2300.00 |
| | | <input type="text"/> Election Cycle-to-Date | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | | 2300.00 | |

| | | | |
|---|---|---|--|
| C. | Full Name (Last, First, Middle Initial) Chris Wallace | | Date of Receipt |
| | Mailing Address 9809 Canyon Crest Cir | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 6 / 2 6 / 2 0 0 8 |
| | City Irving | State TX | Zip Code 75063-4668 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: C1802841 |
| | Name of Employer Information Requested | | Occupation Information Requested |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ | Amount of Each Receipt this Period 250.00 |
| | | <input type="text"/> Election Cycle-to-Date | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | | 250.00 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 4550.00 |
| 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 / 49
(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)
Eric Roberson for Congress

A.

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) Mary E Warren | | Date of Receipt MM / DD / YYYY 05 / 29 / 2008 |
| Mailing Address 4312 McKinney Ave Apt 16 | | Transaction ID: C1807598 |
| City Dallas | State Zip Code TX 75205-4549 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer None | Occupation volunteer | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

B.

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) Robert L Book | | Date of Receipt MM / DD / YYYY 05 / 21 / 2008 |
| Mailing Address 14003 Highmark Sq | | Transaction ID: C1807250 |
| City Dallas | State Zip Code TX 75254-8505 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| 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 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 750.00 | |

* Earmarked Contribution:
See Below

C.

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) ActBlue.com | | Date of Receipt MM / DD / YYYY 05 / 26 / 2008 |
| Mailing Address P O Box 382110 | | Transaction ID: C1807250B |
| City Cambridge | State Zip Code MA 02238 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer | Occupation Conduit total listed in Agg. field | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 7915.00 | |

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

| | |
|--|--------|
| 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 16 / 49
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Eric Roberson for Congress

A. Full Name (Last, First, Middle Initial)
Quentin Brogdon
Mailing Address 4529 Mockingbird Ln
City Dallas State TX Zip Code 75205-2619
FEC ID number of contributing federal political committee. **C**
Name of Employer Frank Branson Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 05 / 18 / 2008
Transaction ID: C1807240
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.com
Mailing Address P O Box 382110
City Cambridge State MA Zip Code 02238
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Conduit total listed in Agg. field
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 7915.00
Date of Receipt 05 / 18 / 2008
Transaction ID: C1807240B
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)
Mitchell Burgess
Mailing Address 1000 Broadway Ste. 400
City Kansas City State MO Zip Code 64105
FEC ID number of contributing federal political committee. **C**
Name of Employer Burgess Lamb Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 05 / 19 / 2008
Transaction ID: C1807242
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 17 / 49
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Eric Roberson for Congress

A. Full Name (Last, First, Middle Initial)
ActBlue.com
Mailing Address P O Box 382110

City State Zip Code
Cambridge MA 02238

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 7915.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 2 | 6 | / | 2 | 0 | 0 | 8 |

Transaction ID: C1807242B
 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)
Ross Feinberg
Mailing Address 1855 Port Manleigh Pl

City State Zip Code
Newport Beach CA 92660-6627

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

Name of Employer Occupation
Self Mediator

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

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 2 | 1 | / | 2 | 0 | 0 | 8 |

Transaction ID: C1807245
 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.com
Mailing Address P O Box 382110

City State Zip Code
Cambridge MA 02238

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 7915.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 2 | 6 | / | 2 | 0 | 0 | 8 |

Transaction ID: C1807245B
 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: (check only one) | PAGE 18 / 49 |
| | <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)
Eric Roberson for Congress

| | | |
|---|--|---|
| A. | Full Name (Last, First, Middle Initial) W. David George | Date of Receipt MM / DD / YYYY 04 / 29 / 2008 |
| | Mailing Address 4019 Browning St | Transaction ID: C1807239 |
| | City State Zip Code Houston TX 77005-1951 | Amount of Each Receipt this Period 230.00 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Connelly Baker Wotring | Occupation Attorney | * Earmarked Contribution: See Below |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 920.00 | |

| | | |
|---|--|---|
| B. | Full Name (Last, First, Middle Initial) ActBlue.com | Date of Receipt MM / DD / YYYY 05 / 04 / 2008 |
| | Mailing Address P O Box 382110 | Transaction ID: C1807239B |
| | City State Zip Code Cambridge MA 02238 | Amount of Each Receipt this Period 230.00 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation Conduit total listed in Agg. field | [MEMO ITEM] Note: Above Contribution earmarked through this organization. |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 7915.00 | |

| | | |
|---|--|---|
| C. | Full Name (Last, First, Middle Initial) Paul E Kiesel | Date of Receipt MM / DD / YYYY 06 / 27 / 2008 |
| | Mailing Address 8648 Wilshire Blvd | Transaction ID: C1807264 |
| | City State Zip Code Beverly Hills CA 90211 | Amount of Each Receipt this Period 1500.00 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Boucher Larson | Occupation Attorney | * Earmarked Contribution: See Below |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1730.00 |
| 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 19 / 49
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Eric Roberson for Congress

A. Full Name (Last, First, Middle Initial)
ActBlue.com
Mailing Address P O Box 382110

City State Zip Code
Cambridge MA 02238

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 7915.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 8

Transaction ID: C1807264B

Amount of Each Receipt this Period
1500.00

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)
Charles Litt
Mailing Address 1700 Bayonne Dr

City State Zip Code
Las Vegas NV 89134-6187

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

Name of Employer Occupation
Feinberg Grant Mayfield Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 0 8

Transaction ID: C1807258

Amount of Each Receipt this Period
2000.00

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.com
Mailing Address P O Box 382110

City State Zip Code
Cambridge MA 02238

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 7915.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 8

Transaction ID: C1807258B

Amount of Each Receipt this Period
2000.00

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) ► 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 20 / 49
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Eric Roberson for Congress

A. Full Name (Last, First, Middle Initial)
Rex Spivey
Mailing Address 3841 Colgate Ave
City Dallas State TX Zip Code 75225-5224
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 05 / 19 / 2008
Transaction ID: C1807244
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.com
Mailing Address P O Box 382110
City Cambridge State MA Zip Code 02238
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Conduit total listed in Agg. field
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 7915.00
Date of Receipt 05 / 26 / 2008
Transaction ID: C1807244B
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)
Jeff Tillotson
Mailing Address 5604 Lobello
City Dallas State TX Zip Code 75229
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 06 / 30 / 2008
Transaction ID: C1807303
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) ► 1500.00
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 21 / 49 | |
| | (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)
Eric Roberson for Congress

A.

| | | |
|--|------------------------------|---|
| Full Name (Last, First, Middle Initial) ActBlue.com | | Date of Receipt |
| Mailing Address P O Box 382110 | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2008 |
| City | State | Zip Code |
| Cambridge | MA | 02238 |
| FEC ID number of contributing federal political committee. | | Transaction ID: C1807303B |
| C <input type="text"/> | | Amount of Each Receipt this Period |
| Name of Employer | | <input type="text"/> 1000.00 |
| Occupation | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] Note: Above Contribution earmarked through this organization. |
| Conduit total listed in Agg. field | | |
| Receipt For: 2008 | Election Cycle-to-Date ▼ | |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | <input type="text"/> 7915.00 | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 0.00 |
| TOTAL This Period (last page this line number only) | <input type="text"/> 44351.19 |

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

| | | |
|---|--|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 22 / 49 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 11d | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| <input type="checkbox"/> 13b | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Eric Roberson for Congress

A.

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) Eric N Roberson | | Date of Receipt |
| Mailing Address 1521 Pagewynne Dr | | <input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2008"/> |
| City | State | Zip Code |
| Plano | TX | 75093-2635 |
| FEC ID number of contributing federal political committee. | | Transaction ID: C2150003 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="1224.00"/> |
| Name of Employer Patrick Mulligan Law Firm | Occupation Attorney | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff | Election Cycle-to-Date ▼ <input type="text" value="4124.00"/> | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="1224.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text" value="1224.00"/> |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | | | |
|---|------------------------------|------------------------------|------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | | PAGE 23 / 49 | |
| | (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)
Eric Roberson for Congress

A.

| | | | | | | | | | | | | | | | | | | | | | | | |
|--|--------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| Full Name (Last, First, Middle Initial) Mikal Watts for Senate | | Date of Receipt | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P O Box 792747 | | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 1 | 7 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 4 | | 1 | 7 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | | | |
| City | State | Zip Code | | | | | | | | | | | | | | | | | | | | | |
| San Antonio | TX | 78279 | | | | | | | | | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. | | Transaction ID: C2154566 | | | | | | | | | | | | | | | | | | | | | |
| C | | Amount of Each Receipt this Period | | | | | | | | | | | | | | | | | | | | | |
| | | 555.08 | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer | Occupation | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| Receipt For: 2008 | Election Cycle-to-Date ▼ | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Other (specify) ▼ | 555.08 | | | | | | | | | | | | | | | | | | | | | | |

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

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 555.08 |
| TOTAL This Period (last page this line number only) | 555.08 |

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)
Eric Roberson for Congress

A.

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

Mailing Address P O Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
credit card fee

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D109879
Date of Disbursement

04 / 13 / 2008

Amount of Each Disbursement this Period

5.93

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

B.

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

Mailing Address P O Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
credit card fee

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D109880
Date of Disbursement

05 / 06 / 2008

Amount of Each Disbursement this Period

9.09

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

C.

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

Mailing Address P O Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
credit card fee

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D109881
Date of Disbursement

05 / 18 / 2008

Amount of Each Disbursement this Period

9.88

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

SUBTOTAL of Disbursements This Page (optional) ▶

24.90

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)
Eric Roberson for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) ActBlue.com | Transaction ID: D109882 Date of Disbursement 05 / 26 / 2008 |
| | Mailing Address P O Box 382110 | Amount of Each Disbursement this Period 79.00 |
| | City Cambridge State MA Zip Code 02238 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement credit card fee Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) ActBlue.com | Transaction ID: D109883 Date of Disbursement 06 / 01 / 2008 |
| | Mailing Address P O Box 382110 | Amount of Each Disbursement this Period 5.93 |
| | City Cambridge State MA Zip Code 02238 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement credit card fee Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) ActBlue.com | Transaction ID: D109884 Date of Disbursement 06 / 08 / 2008 |
| | Mailing Address P O Box 382110 | Amount of Each Disbursement this Period 3.95 |
| | City Cambridge State MA Zip Code 02238 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement credit card fee Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|--------------|
| SUBTOTAL of Disbursements This Page (optional) | 88.88 |
| 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)
Eric Roberson for Congress

A.

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

Mailing Address P O Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D109885
Date of Disbursement

06 / 15 / 2008

Amount of Each Disbursement this Period

1.98

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

B.

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

Mailing Address P O Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D109886
Date of Disbursement

06 / 22 / 2008

Amount of Each Disbursement this Period

0.99

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

C.

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

Mailing Address P O Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D109887
Date of Disbursement

06 / 29 / 2008

Amount of Each Disbursement this Period

150.31

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

SUBTOTAL of Disbursements This Page (optional) ▶

153.28

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)
Eric Roberson for Congress

A.

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

Mailing Address P O Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
credit card fee

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D109888
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 0 | | 2 | 0 | 0 | 8 |

Amount of Each Disbursement this Period

| |
|------|
| 0.99 |
|------|

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

B.

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

Mailing Address P O Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
credit card fee

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D109790
Date of Disbursement

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

Amount of Each Disbursement this Period

| |
|-------|
| 45.63 |
|-------|

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

C.

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

Mailing Address P O Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
credit card fee

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134054
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 0 | 4 | | 2 | 0 | 0 | 8 |

Amount of Each Disbursement this Period

| |
|------|
| 9.09 |
|------|

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

SUBTOTAL of Disbursements This Page (optional) ▶

55.71

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)
Eric Roberson for Congress

| | |
|---|--|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Audioacrobot.com</p> <p>Mailing Address 2533 N Carson St # 3003</p> <p>City Carson City State NV Zip Code 89706-0242</p> <p>Purpose of Disbursement Web site</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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D108814</p> <p>Date of Disbursement 05 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 19.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Audioacrobot.com</p> <p>Mailing Address 2533 N Carson St # 3003</p> <p>City Carson City State NV Zip Code 89706-0242</p> <p>Purpose of Disbursement Web site</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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D108815</p> <p>Date of Disbursement 04 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 19.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Audioacrobot.com</p> <p>Mailing Address 2533 N Carson St # 3003</p> <p>City Carson City State NV Zip Code 89706-0242</p> <p>Purpose of Disbursement Web site</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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D108806</p> <p>Date of Disbursement 06 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 19.95</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) ▶

59.85

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)
Eric Roberson for Congress

A.

Full Name (Last, First, Middle Initial)
Booker Industries

Transaction ID: D109835
Date of Disbursement

Mailing Address 5415 Maple Ave
Ste 230

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 0 | 9 | | 2 | 0 | 0 | 8 |

City Dallas State TX Zip Code 75235-7479

Amount of Each Disbursement this Period

| |
|--------|
| 324.75 |
|--------|

Purpose of Disbursement
Robo calls

| |
|--|
| |
|--|

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)
Mr. Tim Bueler

Transaction ID: D108894
Date of Disbursement

Mailing Address 24338 El Toro Rd E #108

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 0 | 9 | | 2 | 0 | 0 | 8 |

City Laguna Woods State CA Zip Code 92637

Amount of Each Disbursement this Period

| |
|---------|
| 1250.00 |
|---------|

Purpose of Disbursement
Media Bookings

| |
|--|
| |
|--|

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)
Chips Hamburgers

Transaction ID: D108818
Date of Disbursement

Mailing Address 4501 Cole Ave

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 1 | 6 | | 2 | 0 | 0 | 8 |

City Dallas State TX Zip Code 75205-4128

Amount of Each Disbursement this Period

| |
|-------|
| 25.28 |
|-------|

Purpose of Disbursement
Staff Meeting

| |
|--|
| |
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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)

| |
|---------|
| 1600.03 |
|---------|

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)
Eric Roberson for Congress

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) Chips Hamburgers | Transaction ID: D108819 |
| | Mailing Address 4501 Cole Ave | Date of Disbursement 04 / 28 / 2008 |
| | City Dallas State TX Zip Code 75205-4128 | Amount of Each Disbursement this Period 27.82 |
| | Purpose of Disbursement Staff Meeting | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Category/Type |
| | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial) Chips Hamburgers | Transaction ID: D108820 |
| | Mailing Address 4501 Cole Ave | Date of Disbursement 04 / 16 / 2008 |
| | City Dallas State TX Zip Code 75205-4128 | Amount of Each Disbursement this Period 26.74 |
| | Purpose of Disbursement Staff Meeting | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Category/Type |
| | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial) Chips Hamburgers | Transaction ID: D108821 |
| | Mailing Address 4501 Cole Ave | Date of Disbursement 04 / 14 / 2008 |
| | City Dallas State TX Zip Code 75205-4128 | Amount of Each Disbursement this Period 31.12 |
| | Purpose of Disbursement Staff Meeting | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Category/Type |
| | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|--------------|
| SUBTOTAL of Disbursements This Page (optional) | 85.68 |
| 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)
Eric Roberson for Congress

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) Dallas County Democratic Party</p> <p>Mailing Address 4209 Parry Ave.</p> <p>City Dallas State TX Zip Code 75223</p> <p>Purpose of Disbursement Political Advert at Senate 8th Convntn</p> <p>Candidate Name Dallas County Democratic Party</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D127034 Date of Disbursement 05 / 08 / 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>B. Full Name (Last, First, Middle Initial) Designer Graphics - PoliticalSign.com</p> <p>Mailing Address 12404 Hwy 155 South</p> <p>City Tyler State TX Zip Code 75703</p> <p>Purpose of Disbursement Campaign Literature</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: D108923 Date of Disbursement 06 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 1188.48</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) Embassy Inn</p> <p>Mailing Address 1627 16th St NW</p> <p>City Washington State DC Zip Code 20009-3063</p> <p>Purpose of Disbursement Travel</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: D108865 Date of Disbursement 06 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 477.48</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) ▶

1715.96

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)
Eric Roberson for Congress

| | |
|---|--|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Godaddy.com</p> <p>Mailing Address 14455 N Hayden Rd # 219</p> <p>City Scottsdale State AZ Zip Code 85260-6947</p> <p>Purpose of Disbursement Web Hosting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D108808</p> <p>Date of Disbursement 06 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 12.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Godaddy.com</p> <p>Mailing Address 14455 N Hayden Rd # 219</p> <p>City Scottsdale State AZ Zip Code 85260-6947</p> <p>Purpose of Disbursement Web Hosting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D108809</p> <p>Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 6.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Godaddy.com</p> <p>Mailing Address 14455 N Hayden Rd # 219</p> <p>City Scottsdale State AZ Zip Code 85260-6947</p> <p>Purpose of Disbursement Web Hosting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D108810</p> <p>Date of Disbursement 06 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 6.99</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) ▶

26.97

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Eric Roberson for Congress

A.

Full Name (Last, First, Middle Initial)
Godaddy.com

Transaction ID: D108811
Date of Disbursement

Mailing Address 14455 N Hayden Rd # 219

/ /

City State Zip Code
Scottsdale AZ 85260-6947

Amount of Each Disbursement this Period

Purpose of Disbursement
Web Hosting

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)
Godaddy.com

Transaction ID: D108812
Date of Disbursement

Mailing Address 14455 N Hayden Rd # 219

/ /

City State Zip Code
Scottsdale AZ 85260-6947

Amount of Each Disbursement this Period

Purpose of Disbursement
Web Hosting

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)
Godaddy.com

Transaction ID: D108813
Date of Disbursement

Mailing Address 14455 N Hayden Rd # 219

/ /

City State Zip Code
Scottsdale AZ 85260-6947

Amount of Each Disbursement this Period

Purpose of Disbursement
Web Hosting

Candidate Name

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

Office Sought: House Senate President

Disbursement For: 2008
 Other (specify) ▼

State: District: Runoff

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)
Eric Roberson for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Mr. David Griggs | Transaction ID: D109969 Date of Disbursement 06 / 30 / 2008 |
| | Mailing Address 14605 Dartmouth Ct | Amount of Each Disbursement this Period 471.19 |
| | City Addison State TX Zip Code 75001-4438 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Reception expenses Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | * In-Kind Received |

| | | |
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| B. | Full Name (Last, First, Middle Initial) IMPACT Consulting LLC | Transaction ID: D108896 Date of Disbursement 04 / 25 / 2008 |
| | Mailing Address 2101 16th St NW Ste 302 | Amount of Each Disbursement this Period 3694.00 |
| | City Washington State DC Zip Code 20009 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Consultant Fee 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) IMPACT Consulting LLC | Transaction ID: D108893 Date of Disbursement 05 / 29 / 2008 |
| | Mailing Address 2101 16th St NW Ste 302 | Amount of Each Disbursement this Period 3858.04 |
| | City Washington State DC Zip Code 20009 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Consultant Fee 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) ▼ |

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| SUBTOTAL of Disbursements This Page (optional) | 8023.23 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Eric Roberson for Congress

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) MADCO Mailing Address 1715 S 11th St City Saint Louis State MO Zip Code 63104-3403 Purpose of Disbursement printing brochures Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D109905 Date of Disbursement 05 / 19 / 2008 Amount of Each Disbursement this Period 2120.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| B. | Full Name (Last, First, Middle Initial) Mercado Juarez Mailing Address 1901 W Northwest Hwy City Dallas State TX Zip Code 75220 Purpose of Disbursement Fundraiser 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) ▼ | Transaction ID: D108922 Date of Disbursement 06 / 02 / 2008 Amount of Each Disbursement this Period 617.03 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| C. | Full Name (Last, First, Middle Initial) Mulligan Law Firm Mailing Address 4514 Cole Ave Ste. 300 City Dallas State TX Zip Code 75205 Purpose of Disbursement Virtual office space, 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) ▼ | Transaction ID: D124130 Date of Disbursement 06 / 30 / 2008 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | |
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| SUBTOTAL of Disbursements This Page (optional) | 3237.03 |
| 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)
Eric Roberson for Congress

| | |
|---|---|
| <p>A. Full Name (Last, First, Middle Initial) Painter Communications</p> <p>Mailing Address 309 Washington St # 309</p> <p>City Conshohocken State PA Zip Code 19428-1974</p> <p>Purpose of Disbursement Campaign communications</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>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: D109964</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1224.00</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) Painter Communications</p> <p>Mailing Address 309 Washington St # 309</p> <p>City Conshohocken State PA Zip Code 19428-1974</p> <p>Purpose of Disbursement Campaign communications</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D109965</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1129.86</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) Patrick Mulligan Law Firm</p> <p>Mailing Address 4514 Cole Ave Ste 300</p> <p>City Dallas State TX Zip Code 75205-4181</p> <p>Purpose of Disbursement Office Space</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D110137</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 500.00</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) ▶

2853.86

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)
Eric Roberson for Congress

| | |
|---|--|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Quik Trip</p> <p>Mailing Address 4608 W Plano Pkwy</p> <p>City Plano State TX Zip Code 75093-5305</p> <p>Purpose of Disbursement Gasoline</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D108876</p> <p>Date of Disbursement 06 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 18.05</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Quik Trip</p> <p>Mailing Address 4608 W Plano Pkwy</p> <p>City Plano State TX Zip Code 75093-5305</p> <p>Purpose of Disbursement Gasoline</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D108877</p> <p>Date of Disbursement 05 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 11.14</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Quik Trip</p> <p>Mailing Address 4608 W Plano Pkwy</p> <p>City Plano State TX Zip Code 75093-5305</p> <p>Purpose of Disbursement Gasoline</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>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: D108878</p> <p>Date of Disbursement 04 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 34.72</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) ▶

63.91

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)
Eric Roberson for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Quik Trip <hr/> Mailing Address 4608 W Plano Pkwy <hr/> City Plano State TX Zip Code 75093-5305 <hr/> Purpose of Disbursement Gasoline Candidate Name <hr/> 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: D108879 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 9.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| B. | Full Name (Last, First, Middle Initial) Quik Trip <hr/> Mailing Address 4608 W Plano Pkwy <hr/> City Plano State TX Zip Code 75093-5305 <hr/> Purpose of Disbursement Gasoline Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D108880 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 6.81 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| C. | Full Name (Last, First, Middle Initial) Quik Trip <hr/> Mailing Address 4608 W Plano Pkwy <hr/> City Plano State TX Zip Code 75093-5305 <hr/> Purpose of Disbursement Gasoline Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D108881 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 11.53 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

SUBTOTAL of Disbursements This Page (optional) ▶

27.94

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)
Eric Roberson for Congress

A.

Full Name (Last, First, Middle Initial)
Ms. Brynne Sissom

Mailing Address 3500 Gentry Rd

City Irving State TX Zip Code 75062

Purpose of Disbursement
Consultant Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D108888
Date of Disbursement

04 / 22 / 2008

Amount of Each Disbursement this Period

1000.00

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

B.

Full Name (Last, First, Middle Initial)
Ms. Brynne Sissom

Mailing Address 3500 Gentry Rd

City Irving State TX Zip Code 75062

Purpose of Disbursement
Consultant Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D108891
Date of Disbursement

05 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

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

C.

Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address P O Box 36647-1CR

City Dallas State TX Zip Code 75235-1647

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D108890
Date of Disbursement

05 / 30 / 2008

Amount of Each Disbursement this Period

217.50

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

SUBTOTAL of Disbursements This Page (optional) ▶

2217.50

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 40 / 49

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)
Eric Roberson for Congress

| | |
|--|--|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. John Tackaberry</p> <p>Mailing Address 415 Woolsey Dr</p> <p>City Dallas State TX Zip Code 75224</p> <p>Purpose of Disbursement Consultant Fee</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: D108892</p> <p>Date of Disbursement 05 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. John Tackaberry</p> <p>Mailing Address 415 Woolsey Dr</p> <p>City Dallas State TX Zip Code 75224</p> <p>Purpose of Disbursement Consultant Fee</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: D108887</p> <p>Date of Disbursement 04 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Texas Democratic Party</p> <p>Mailing Address 505 W 12th St Ste 200</p> <p>City Austin State TX Zip Code 78701-1818</p> <p>Purpose of Disbursement Convention Booth</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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D109908</p> <p>Date of Disbursement 05 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</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) ►

3500.00

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)
Eric Roberson for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Texas Democratic Party | Transaction ID: D109968 Date of Disbursement 05 / 22 / 2008 |
| | Mailing Address 505 W 12th St Ste 200 | Amount of Each Disbursement this Period 2000.00 |
| | City Austin State TX Zip Code 78701-1818 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Access to Database Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | * In-Kind Received |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Wal-Mart | Transaction ID: D108908 Date of Disbursement 04 / 07 / 2008 |
| | Mailing Address 1700 Dallas Pkwy | Amount of Each Disbursement this Period 46.24 |
| | City Plano State TX Zip Code 75093-4519 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Food for Watch Party 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) Washington Mutual Bank | Transaction ID: D109841 Date of Disbursement 06 / 11 / 2008 |
| | Mailing Address West Village #4049 | Amount of Each Disbursement this Period 9.00 |
| | City Dallas State TX Zip Code 75205 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Banking fee Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | 2055.24 |
| 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)
Eric Roberson for Congress

| | | |
|----|---|---|
| A. | Full Name (Last, First, Middle Initial) Washington Mutual Bank <hr/> Mailing Address West Village #4049 <hr/> City Dallas State TX Zip Code 75205 <hr/> Purpose of Disbursement ATM withdrawal fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D109845 Date of Disbursement 06 / 30 / 2008 <hr/> Amount of Each Disbursement this Period 2.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| B. | Full Name (Last, First, Middle Initial) Washington Mutual Bank <hr/> Mailing Address West Village #4049 <hr/> City Dallas State TX Zip Code 75205 <hr/> Purpose of Disbursement ATM Withdrawal fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D109846 Date of Disbursement 04 / 30 / 2008 <hr/> Amount of Each Disbursement this Period 2.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| C. | Full Name (Last, First, Middle Initial) Washington Mutual Bank <hr/> Mailing Address West Village #4049 <hr/> City Dallas State TX Zip Code 75205 <hr/> Purpose of Disbursement Petty cash for fundraising dinner supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D109909 Date of Disbursement 05 / 23 / 2008 <hr/> Amount of Each Disbursement this Period 112.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

SUBTOTAL of Disbursements This Page (optional) ▶

116.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Eric Roberson for Congress

A.

Full Name (Last, First, Middle Initial)
Washington Mutual Bank

Mailing Address West Village #4049

City Dallas State TX Zip Code 75205

Purpose of Disbursement Petty Cash for Runoff Party Reception
Candidate Name

Category/Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

Transaction ID: D109979
Date of Disbursement

04 / 08 / 2008

Amount of Each Disbursement this Period

100.00

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

B.

Full Name (Last, First, Middle Initial)
Mrs. Kris Roberson

Mailing Address 1521 Pagewynne Dr

City Plano State TX Zip Code 75093

Purpose of Disbursement Reimburse cell phone bill
Candidate Name

Category/Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

Transaction ID: D109966
Date of Disbursement

06 / 09 / 2008

Amount of Each Disbursement this Period

330.00

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

C.

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

Mailing Address 5976 W Parker Rd

City Plano State TX Zip Code 75093-7790

Purpose of Disbursement cell phone bill
Candidate Name

Category/Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

Transaction ID: D109967
Date of Disbursement

06 / 10 / 2008

Amount of Each Disbursement this Period

330.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

430.00

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)
Eric Roberson for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Eric N Roberson

Mailing Address 1521 Pagewynne Dr

City Plano State TX Zip Code 75093-2635

Purpose of Disbursement
Reimburse of long distance charges

Candidate Name
Mr. Eric N Roberson

Office Sought: House
 Senate
 President

State: TX District: 32

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D110138
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 5 | | 2 | 0 | 0 | 8 |

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

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

B.

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

Mailing Address 5976 W Parker Rd

City Plano State TX Zip Code 75093-7790

Purpose of Disbursement
Payment of long distance charges

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D138361
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 5 | | 2 | 0 | 0 | 8 |

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Mrs. Kris Roberson

Mailing Address 1521 Pagewynne Dr

City Plano State TX Zip Code 75093

Purpose of Disbursement
Staff Mtg Meal

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D124221
Date of Disbursement

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

Amount of Each Disbursement this Period

| |
|-------|
| 30.04 |
|-------|

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

SUBTOTAL of Disbursements This Page (optional)

530.04

TOTAL This Period (last page this line number only)

26898.98

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 45 / 49

| | | | | | | | |
|--------------------------|-----|--------------------------|-----|-------------------------------------|-----|--------------------------|-----|
| <input type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input checked="" 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)
Eric Roberson for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Eric N Roberson

Mailing Address 1521 Pagewynne Dr

City State Zip Code
Plano TX 75093-2635

Purpose of Disbursement
Repayment of loan

Candidate Name
Mr. Eric N Roberson

Category/
Type

Office Sought: House
 Senate
 President
State: TX District: 32

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D110016

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)

PAGE 46 / 49

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

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NAME OF COMMITTEE (In Full)
Eric Roberson for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Mark Mills

Mailing Address 6761 Country Club Cir

City State Zip Code
Dallas TX 75214-4021

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D109826

Date of Disbursement

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

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

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

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

500.00

SCHEDULE C (FEC Form 3)

LOANS

| | |
|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 47 / 49 |
| | FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b |

NAME OF COMMITTEE (In Full)
Eric Roberson for Congress

Transaction ID: L181

| | |
|--|--|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Mr. Eric N Roberson, PERS FUNDS - [PERSONAL FUNDS] | Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 1521 Pagewynne Dr | |
| City Plano State TX ZIP Code 75093-2635 | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 2900.00 | 250.00 | 2650.00 |

TERMS

| | | | |
|----------------------------|----------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| M M 03 D D 14 Y Y Y Y 2008 | none | 22.24 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|---|---|
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |

| | |
|---|----------------|
| SUBTOTALS This Period This Page (optional) | 2650.00 |
| TOTALS This Period (last page in this line only) | .00 |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
Eric Roberson for Congress

Transaction ID: L198

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. Eric N Roberson, PERS FUNDS - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼
Runoff

Mailing Address 1521 Pagewynne Dr

City Plano State TX ZIP Code 75093-2635

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|-------------------------|----------------------------|---|
| 1224.00 | 0.00 | 1224.00 |

TERMS

Date Incurred: Date Due: Interest Rate: % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| Full Name (Last, First, Middle Initial) | Name of Employer |
|---|---|
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |

| | |
|---|--------------------------------------|
| SUBTOTALS This Period This Page (optional) | <input type="text" value="1224.00"/> |
| TOTALS This Period (last page in this line only) | <input type="text" value="3874.00"/> |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Eric Roberson for Congress

| | | | |
|--|-------|----------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mulligan Law Firm | | | Nature of Debt (Purpose): Use of Virtual Office, supplies |
| Mailing Address 4514 Cole Ave Ste. 300 | | | |
| City | State | ZIP Code | |
| Dallas | TX | 75205 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D138345 | |
| 0.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 500.00 | 500.00 | 0.00 | |

| | | | |
|---|-------|------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Painter Communications | | | Nature of Debt (Purpose): Campaign communications |
| Mailing Address 309 Washington St # 309 | | | |
| City | State | ZIP Code | |
| Conshohocken | PA | 19428-1974 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D110054 | |
| 1224.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 1224.00 | 0.00 | |

| | | | |
|--|-------|------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Patrick Mulligan Law Firm | | | Nature of Debt (Purpose): Use of virtual office, physical office |
| Mailing Address 4514 Cole Ave Ste 300 | | | |
| City | State | ZIP Code | |
| Dallas | TX | 75205-4181 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID: D110055 | |
| 500.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 500.00 | 0.00 | |

| | |
|--|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | 0.00 |
| 2) TOTALS This Period (last page this line number only)..... | 0.00 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | 3874.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | 3874.00 |