

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

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FEC MAIL ROOM

1/28

2800 JUL 17 P 1:39

<b>1. NAME OF COMMITTEE (in full)</b> <b>MARTHA WALKER FOR CONGRESS</b>		<b>2. FEC IDENTIFICATION NUMBER</b> C00345789
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported P. O. BOX 643		
<b>CITY, STATE, and ZIP CODE</b> CHARLESTON WV 25323-0643	<b>STATE / DISTRICT</b> WV 2	<b>3. IS THIS REPORT AN AMENDMENT?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

## 4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> Twelfth day report preceding _____ (election type) _____ in the State of _____
<input checked="" type="checkbox"/> July 15 Quarterly Report	<input type="checkbox"/> Thirtieth day report following the General Election on _____ in the State of _____
<input type="checkbox"/> October 15 Quarterly Report	
<input type="checkbox"/> January 31 Year End Report	
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> Termination report

This report contains activity for  Primary election  General election  Runoff election  Special election

## SUMMARY

5. Covering period <u>04/20/2009</u> through <u>06/30/2009</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net contributions (other than loans)		
(a) Total Contributions (other than loans) (from line 11(e))	61890.52	427093.18
(b) Total Contribution Refunds (from line 20(d))	1000.00	1500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	60890.52	425593.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from line 17)	145033.71	545422.80
(b) Total Offsets to Operating Expenditures (from line 14)	4082.20	4082.20
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	140951.51	541340.60
8. Cash on Hand at Close of Reporting Period (from line 27)	57951.93	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-218-3420
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

Type or Print Name of Treasurer  
**Electronically Filed by Becky Chandler**

Signature of Treasurer

*Becky Chandler, Asst. Treasurer*

Date

07/15/2009

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

**DETAILED SUMMARY PAGE**  
**of Receipts and Disbursements**  
 (Page 2, FEC Form 3)

Name of Committee (In Full) <b>MARTHA WALKER FOR CONGRESS</b>	Report Covering the Period	
	From: <b>04/20/2000</b>	To: <b>06/30/2000</b>
<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-To-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) <b>Individuals/Persons Other Than Political Committees</b> .....		
(i) Itemized (use Schedule A) .....	33166.00	
(ii) Unitemized .....	19745.00	
(iii) Total of contributions from individuals .....	52911.00	395553.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	8779.52	31540.18
(d) The Candidate .....	0.00	0.00
(e) <b>TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i)(ii), (b), (c) and (d))</b> .....	61690.52	427093.18
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b> .....	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate .....	20000.00	20000.00
(b) All Other Loans .....	0.00	0.00
(c) <b>TOTAL LOANS (add 13(a) and (b))</b> .....	20000.00	20000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b> .....	4092.20	4092.20
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b> .....	257.60	751.13
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b> .....	86040.32	451936.51
<b>II. DISBURSEMENTS</b>		
<b>17. OPERATING EXPENDITURES</b> .....	146033.71	545422.60
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b> .....	0.00	0.00
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate .....	20000.00	20000.00
(b) Of All Other Loans .....	0.00	0.00
(c) <b>TOTAL LOAN REPAYMENTS (add 19(a) and (b))</b> .....	20000.00	20000.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees .....	1000.00	1500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) <b>TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))</b> .....	1000.00	1500.00
<b>21. OTHER DISBURSEMENTS</b> .....	0.00	0.00
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b> .....	166033.71	566922.60

**III. CASH SUMMARY**

<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b> .....	137955.32	23.
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b> .....	86040.32	24.
<b>25. SUBTOTAL (add Line 23 and Line 24)</b> .....	223995.64	25.
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</b> .....	166033.71	26.
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)</b> .....	57961.93	27.

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER  
11A1

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**NAME OF COMMITTEE (In Full)**  
**MARTHA WALKER FOR CONGRESS**

<b>Full Name, Mailing Address, and ZIP Code</b> Ms Beatrice Booth 5521 171st Ave NE  Seattle WA 98105	<b>Name of Employer</b> University of Washington  <b>Occupation</b> Oceanographer	<b>Date (month, day, year)</b> 04/20/2000	<b>Amount of Each Receipt this Period</b> 250.00 Emily's List
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms Sandra Eskin 1047 Woodlawn  Iowa City IA 52243	<b>Name of Employer</b>  <b>Occupation</b> Homemaker	<b>Date (month, day, year)</b> 04/20/2000	<b>Amount of Each Receipt this Period</b> 250.00 Emily's List
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Allegheny Power PAC 10435 Downsview Pike  Hagerstown MD 21740-1786	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr John Allen Jr 150 Grady Ave  Athens GA 30601	<b>Name of Employer</b> Self  <b>Occupation</b> Composer	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mrs Elizabeth Bloch 1601 Connell Rd  Charleston WV 25314	<b>Name of Employer</b> Better Homes and Gardens  <b>Occupation</b> Realtor	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms John Canfield 5411 Staunton Avenue SE  Charleston WV 25304	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms Beth Carenbauer 33 Brittany Woods Rd  Charleston WV 25314-1601	<b>Name of Employer</b> WV Public Broadcasting  <b>Occupation</b> Development Associate	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 500.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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**NAME OF COMMITTEE (in Full)**  
**MARTHA WALKER FOR CONGRESS**

<b>Full Name, Mailing Address, and ZIP Code</b> Ms Tricia Dexter 7 Stony Point Road  Charleston WV 25314	Name of Employer  Occupation Requested	Date (month, day, year) 04/25/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Joe Ellison 740 Lower Donnelly Rd.  Charleston WV 25304	Name of Employer  Occupation Banker	Date (month, day, year) 04/25/2000	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Robert Fluharty PO Box 553  Charleston WV 25322-0553	Name of Employer  Occupation	Date (month, day, year) 04/25/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Karl Gattlieb 813 Donnelly Rd  Charleston WV 25301	Name of Employer BugZ Cleaners Inc  Occupation Marketing	Date (month, day, year) 04/25/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Geraldine Harrison 102 Oakdale Lane  Elkview WV 25071	Name of Employer  Occupation Retired	Date (month, day, year) 04/25/2000	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 275.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Geraldine Harrison 102 Oakdale Lane  Elkview WV 25071	Name of Employer  Occupation Retired	Date (month, day, year) 04/25/2000	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 375.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms Kate Kond 57 Brompton Square  London	Name of Employer  Occupation Homemaker	Date (month, day, year) 04/25/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		

**SUBTOTALS of Receipts This Page (Optional)** .....

**SCHEDULE A**

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**NAME OF COMMITTEE (in Full)  
MARTHA WALKER FOR CONGRESS**

<b>Full Name, Mailing Address, and ZIP Code</b> Mr William Kilgore Jr PO Box 1761  Grundy VA 24814	<b>Name of Employer</b> Kanawha Eagle LLC	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> President	<b>Aggregate Year-to-Date</b> > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Ray McCormick PO Box 4548  Charleston WV 25364	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Requested	<b>Aggregate Year-to-Date</b> > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Bill McFarland 2601 Winter Street  St. Albans WV 25177	<b>Name of Employer</b> Loop Plaza Pharmacy	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Owner	<b>Aggregate Year-to-Date</b> > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Sen Robert Pymale PO Box 543  Carado WV 25507-0543	<b>Name of Employer</b> State of West Virginia	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Legislator	<b>Aggregate Year-to-Date</b> > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr F Robertson PO Box 1580  Grundy VA 24814	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Retired	<b>Aggregate Year-to-Date</b> > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Richard Stevens 5 Players Club Dr  Charleston WV 25311	<b>Name of Employer</b> WV Dental Association	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Lobbyist	<b>Aggregate Year-to-Date</b> > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Ms Tobitha Thompson 306 51 Street  Vienna WV 26105	<b>Name of Employer</b> Self	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Ophthalmologist	<b>Aggregate Year-to-Date</b> > \$ 150.00	

**SUBTOTALS of Receipts This Page (Optional)** .....

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**NAME OF COMMITTEE (In Full)**  
**MARTHA WALKER FOR CONGRESS**

<b>Full Name, Mailing Address, and ZIP Code</b> Mrs Anna Yeager 4205 Staunton Ave SE  Charleston WV 25304  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  Occupation Homemaker  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mrs Judith Maxwell 2411 Broadway St  San Francisco CA 94115  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Self  Occupation Art Historian  Aggregate Year-to-Date > \$ 250.00	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 250.00 Emily's List
<b>Full Name, Mailing Address, and ZIP Code</b> Ms Tobitha Thompson 306 51 Street  Vienna WV 26105  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Self  Occupation Ophthalmologist  Aggregate Year-to-Date > \$ 400.00	<b>Date (month, day, year)</b> 04/26/2000	<b>Amount of Each Receipt this Period</b> 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mrs Elizabeth Bloch 1501 Cornell Rd  Charleston WV 25314  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Better Homes and Gardens  Occupation Realtor  Aggregate Year-to-Date > \$ 475.00	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 225.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Riley Brothers PO Box 8602  South Charleston WV 26303  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Charleston Marine Inc.  Occupation Manager  Aggregate Year-to-Date > \$ 350.00	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 200.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mr David Dicklson PO Box 1  Ripley WV 25271  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> The Dicklson Group  Occupation Manufacturing  Aggregate Year-to-Date > \$ 500.00	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Raymond Gibson 7 Marburn Road  Charleston WV 25314  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> none  Occupation retired  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 750.00

**SUBTOTALS** of Receipts This Page (Optional) .....

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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FOR LINE NUMBER  
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**NAME OF COMMITTEE (in Full)**  
**MARTHA WALKER FOR CONGRESS**

<b>Full Name, Mailing Address, and ZIP Code</b> Mr James Harless P.O. Box 1210  Gilbert WV 25621	<b>Name of Employer</b> Harless Industries	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Business Owner	<b>Aggregate Year-to-Date</b> > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr James Kassel Five Chimney Hill  Charleston WV 25311	<b>Name of Employer</b> Requested	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Physician	<b>Aggregate Year-to-Date</b> > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr H Mooney Jr 1673 Woodvale Dr  Charleston WV 25314	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Requested	<b>Aggregate Year-to-Date</b> > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mrs Antonette Morrison RT 2 Box 330R  Charleston WV 25314	<b>Name of Employer</b> Counselor	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 800.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Self	<b>Aggregate Year-to-Date</b> > \$ 800.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Holmes Morrison RT 2 Box 330R  Charleston WV 25314	<b>Name of Employer</b> Banker	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 800.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> One Valley Bank	<b>Aggregate Year-to-Date</b> > \$ 800.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Rev Margaret Schmitz 388 Galhoun Street  Grantsville WV 26147	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b>	<b>Aggregate Year-to-Date</b> > \$ 800.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Bob Stanley 4 Blossom Way  Hurricane WV 25828	<b>Name of Employer</b> Bob Stanley Associates	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Owner	<b>Aggregate Year-to-Date</b> > \$ 250.00	

**SUBTOTALS of Receipts This Page (Optional)** .....

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**NAME OF COMMITTEE (in Full)**  
**MARTHA WALKER FOR CONGRESS**

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr Gerard Stowers 9 Quail Cove Rd Charleston WV 25314-1634		04/27/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250.00	
Ms Fredia Tomblin PO Box 116 Chapmanville WV 25808-0118		04/27/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 250.00	
Mr R Wilhoit 1816 Rolling Hills Road Charleston WV 25314		04/27/2000	249.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date > \$ 249.00	
Ms Cheryl Wolfe 1026 Forest Rd Charleston WV 25314		04/27/2000	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250.00	
Ms Cheryl Wolfe 1026 Forest Rd Charleston WV 25314		04/27/2000	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 350.00	
Mr Fielding Archer 10727 Arsenal Dr Midlothian VA 23113	Self-Employed	04/28/2000	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Artist	Aggregate Year-to-Date > \$ 1000.00	
Mrs Meredith Archer 10727 Arsenal Dr Midlothian VA 23113	Colormark Printing	04/28/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sales Rep	Aggregate Year-to-Date > \$ 500.00	

**SUBTOTALS of Receipts This Page (Optional)** .....



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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**NAME OF COMMITTEE (in Full)  
MARTHA WALKER FOR CONGRESS**

<b>Full Name, Mailing Address, and ZIP Code</b> Ms Carolyn Cook 1406 Somerlayton Rd.  Charleston WV 25914	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 04/26/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 350.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Clyde Ransom Jr 534 Burrell Dr  Charleston WV 25302-3511	<b>Name of Employer</b> Judys Lockemaths  <b>Occupation</b> CEO	<b>Date (month, day, year)</b> 04/26/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms Catherine Grant Route 76 Box 24  Glenville WV 26351-9402	<b>Name of Employer</b> Primary Care Assoc  <b>Occupation</b> Physician	<b>Date (month, day, year)</b> 04/29/2000	<b>Amount of Each Receipt this Period</b> 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 450.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms Alberta Ashworth 239 Kenna Drive  South Charleston WV 25309	<b>Name of Employer</b>  <b>Occupation</b> Retired	<b>Date (month, day, year)</b> 05/01/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms Phoebe Bender 6 Lower Sage Hill Lane  Albany NY 12204	<b>Name of Employer</b>  <b>Occupation</b> Homemaker	<b>Date (month, day, year)</b> 05/01/2000	<b>Amount of Each Receipt this Period</b> 500.00 Emily's List
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms Phoebe Bender 6 Lower Sage Hill Lane  Albany NY 12204	<b>Name of Employer</b>  <b>Occupation</b> Homemaker	<b>Date (month, day, year)</b> 05/01/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr James Bunn Box 2088  Grandy VA 24614	<b>Name of Employer</b> Eaglehawk Carbon Inc.  <b>Occupation</b> Mining	<b>Date (month, day, year)</b> 05/01/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 500.00		

**SUBTOTALS of Receipts This Page (Optional)** .....

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (in Full)**  
**MARTHA WALKER FOR CONGRESS**

<b>Full Name, Mailing Address, and ZIP Code</b> Mr Walter Dial Jr 1211 Colonial Way  Charleston WV 25314	<b>Name of Employer</b> Appalachian Tire	<b>Date (month, day, year)</b> 05/01/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Business Executive	<b>Aggregate Year-to-Date</b> > \$ 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr James Kessel Five Chimney Hill  Charleston WV 25311	<b>Name of Employer</b> Requested	<b>Date (month, day, year)</b> 05/01/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Physician	<b>Aggregate Year-to-Date</b> > \$ 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr M Mueller 100 Roscommon Road  Charleston WV 25314	<b>Name of Employer</b> Self	<b>Date (month, day, year)</b> 05/01/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Attorney	<b>Aggregate Year-to-Date</b> > \$ 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Ms M Mueller 100 Roscommon Road  Charleston WV 25314	<b>Name of Employer</b> McJunkin Corporation	<b>Date (month, day, year)</b> 05/01/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Human Resources Manager	<b>Aggregate Year-to-Date</b> > \$ 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mrs June Sale 1502 Hampton Rd.  Charleston WV 25314	<b>Name of Employer</b> none	<b>Date (month, day, year)</b> 05/01/2000	<b>Amount of Each Receipt this Period</b> 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Physical Therapist	<b>Aggregate Year-to-Date</b> > \$ 1025.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mrs Debra Simon Rt. 1 Box 18A  Walkersville WV 25447	<b>Name of Employer</b> Requested	<b>Date (month, day, year)</b> 05/01/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Requested	<b>Aggregate Year-to-Date</b> > \$ 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Richard Simon Rt 1 Box 18A  Walkersville WV 25447	<b>Name of Employer</b> Requested	<b>Date (month, day, year)</b> 05/01/2000	<b>Amount of Each Receipt this Period</b> 800.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Requested	<b>Aggregate Year-to-Date</b> > \$ 800.00	

**SUBTOTALS** of Receipts This Page (Optional) .....

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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**NAME OF COMMITTEE (in Full)**  
**MARTHA WALKER FOR CONGRESS**

<b>Full Name, Mailing Address, and ZIP Code</b> Ma Gayla Twigger Shaw 206 Beauregard St  Charleston WV 25304  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Twigger Shaw Design  <b>Occupation</b> President  <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 05/01/2000	<b>Amount of Each Receipt this Period</b> 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Ralph Ballard III 403 Quary Pointe  Charleston WV 25309-8737  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Asset Management Group Inc  <b>Occupation</b> President  <b>Aggregate Year-to-Date</b> > \$ 500.00	<b>Date (month, day, year)</b> 05/02/2000	<b>Amount of Each Receipt this Period</b> 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mrs Elizabeth Bloch 1601 Connel Rd  Charleston WV 25314  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Better Homes and Gardens  <b>Occupation</b> Realtor  <b>Aggregate Year-to-Date</b> > \$ 675.00	<b>Date (month, day, year)</b> 05/02/2000	<b>Amount of Each Receipt this Period</b> 200.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mr John Chambers 1980 Alpha Rd  Charleston WV 25304  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b> Retired  <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 06/02/2000	<b>Amount of Each Receipt this Period</b> 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> Ma Louise Dickinson 1 Park Ave  Dallas PA 18812  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b> Retired  <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 05/02/2000	<b>Amount of Each Receipt this Period</b> 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mrs Susan Jones 47-B92-7 Hui Kulu St  Kaneohe HI 96744  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> none  <b>Occupation</b>   <b>Aggregate Year-to-Date</b> > \$ 350.00	<b>Date (month, day, year)</b> 05/02/2000	<b>Amount of Each Receipt this Period</b> 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> Ms Mary Neff 2013 Prairie Ave  Chicago IL 60616  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b> Retired  <b>Aggregate Year-to-Date</b> > \$ 530.00	<b>Date (month, day, year)</b> 05/02/2000	<b>Amount of Each Receipt this Period</b> 30.00

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (in Full)**  
**MARTHA WALKER FOR CONGRESS**

<b>Full Name, Mailing Address, and ZIP Code</b> Mr Richard Stevens PO Box 1301  Charleston WV 25325	<b>Name of Employer</b> WV Dental Association	<b>Date (month, day, year)</b> 05/02/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Lobbyist	<b>Aggregate Year-to-Date</b> > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Dr Julia Vargas 818 Park Street  Morgantown WV 26505	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 05/02/2000	<b>Amount of Each Receipt this Period</b> 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> WVU Professor	<b>Aggregate Year-to-Date</b> > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Keith Burdette 6 Westwood Drive  Parkersburg WV 26101	<b>Name of Employer</b> Mountain State Int.	<b>Date (month, day, year)</b> 05/03/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Lobbyist	<b>Aggregate Year-to-Date</b> > \$ 400.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Dr Stephen Cassis 301 4th St SE  Charleston WV 25304	<b>Name of Employer</b> Self-employed	<b>Date (month, day, year)</b> 05/03/2000	<b>Amount of Each Receipt this Period</b> 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Ophthalmologist	<b>Aggregate Year-to-Date</b> > \$ 350.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Lofgren For Congress 111 W. Saint John Street Suite 400 San Jose CA 95113	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 05/03/2000	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>	<b>Aggregate Year-to-Date</b> > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Hon Zoe Lofgren 105 S 14th Street  San Jose CA 95112	<b>Name of Employer</b> Voters of 16th District CA	<b>Date (month, day, year)</b> 05/03/2000	<b>Amount of Each Receipt this Period</b> 1000.00 Emily's List
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Congresswoman	<b>Aggregate Year-to-Date</b> > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Edward Atkins 1425 Longridge Rd  Charleston WV 25314	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 05/04/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Requested	<b>Aggregate Year-to-Date</b> > \$ 500.00	

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<b>NAME OF COMMITTEE (In Full)</b> <b>MARTHA WALKER FOR CONGRESS</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Ms Edna Fillinger 315 Ray St  Newcomerstown OH 43832-1247		<b>Name of Employer</b>  <b>Occupation</b>		<b>Date (month, day, year)</b> 05/04/2000	<b>Amount of Each Receipt this Period</b> 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 300.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Richard Stevens 5 Players Club Dr  Charleston WV 25311		<b>Name of Employer</b> WV Dental Association  <b>Occupation</b> Lobbyist		<b>Date (month, day, year)</b> 05/04/2000	<b>Amount of Each Receipt this Period</b> 325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 575.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Eleanor Stockwell 5718 Montour Dr.  Falls Church VA 22043-1746		<b>Name of Employer</b>  <b>Occupation</b> Retired		<b>Date (month, day, year)</b> 05/04/2000	<b>Amount of Each Receipt this Period</b> 750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Thomas Wilkerson 150 Whispering Woods Rd  Charleston WV 25304		<b>Name of Employer</b>  <b>Occupation</b>		<b>Date (month, day, year)</b> 05/04/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Ms Constance Duprey 4312 Lealand Ln  Nashville TN 37204		<b>Name of Employer</b>  <b>Occupation</b> Retired		<b>Date (month, day, year)</b> 05/06/2000	<b>Amount of Each Receipt this Period</b> 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Jason Burnett 200 Morgan St NW  Washington DC 20001		<b>Name of Employer</b> American Enterprise Institute for Public Policy Research  <b>Occupation</b> Researcher		<b>Date (month, day, year)</b> 05/06/2000	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Mr Walter Gezar PO BOX 383  Calverton NY 11833		<b>Name of Employer</b> Stidd Systems Incorporated  <b>Occupation</b> Business Executive		<b>Date (month, day, year)</b> 05/08/2000	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1000.00			
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....					

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (In Full)**  
**MARTHA WALKER FOR CONGRESS**

<b>Full Name, Mailing Address, and ZIP Code</b> Mr Robert Harris 3601 L. Street  Lincoln NE 68510	<b>Name of Employer</b>  Occupation Retired	<b>Date (month, day, year)</b> 05/08/2000	<b>Amount of Each Receipt this Period</b> 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 400.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Dr Mark Hatfield 1621 Woodvale Drive  Charleston WV 25314	<b>Name of Employer</b> Self	<b>Date (month, day, year)</b> 05/06/2000	<b>Amount of Each Receipt this Period</b> 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 400.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms Marilyn Williamson 2275 Oakway  West Bloomfield MI 48324	<b>Name of Employer</b> Wayne State University	<b>Date (month, day, year)</b> 05/08/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr David Dunn 21211 Powers Street SW  Mc Coole MD 21562	<b>Name of Employer</b>  Occupation Requested	<b>Date (month, day, year)</b> 05/09/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr David Huffman 517 Shearwood Forest Drive  Bridgeport WV 26330	<b>Name of Employer</b> Beckwith Machinery	<b>Date (month, day, year)</b> 05/08/2000	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms Susan Clark 1108 C Street  Juneau AK 99801	<b>Name of Employer</b> Self	<b>Date (month, day, year)</b> 05/12/2000	<b>Amount of Each Receipt this Period</b> 308.00 Emily's List
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 308.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms Susan Clark 1109 C Street  Juneau AK 99801	<b>Name of Employer</b> Self	<b>Date (month, day, year)</b> 05/12/2000	<b>Amount of Each Receipt this Period</b> 30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 338.00		

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**NAME OF COMMITTEE (in Full)**  
**MARTHA WALKER FOR CONGRESS**

Full Name, Mailing Address, and ZIP Code

SANDRA GRAFF

CHARLESTON

WV

Name of Employer

Occupation

Date (month,  
day, year)

05/15/2000

Amount of Each  
Receipt this Period

51.00

Receipt For:

 Primary General Other (specify):

Aggregate Year-to-Date &gt; \$ 576.00

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (in Full)**  
**MARTHA WALKER FOR CONGRESS**

<b>Full Name, Mailing Address, and ZIP Code</b> BUILD PAC 1201 15th Street NW  Washington DC 20006-2800	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> PFIZER PAC 235 East 42nd Street  New York NY 10017	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 06/01/2000	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> DEALERS ELECTRON ACTION COMMITTEE 8400 Westpark Dr  McLean VA 22102	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 05/02/2000	<b>Amount of Each Receipt this Period</b> 2500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 2500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Committee to Elect Bob Kias 343 Prince St PO Box AU  Beckley WV 25802	<b>Name of Employer</b> Inactive Campaign Account  <b>Occupation</b>	<b>Date (month, day, year)</b> 05/03/2000	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> UNION CARBIDE CORPORATION 801 Pennsylvania Ave NW STE 230  Washington DC 20004	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 05/03/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> NARAL PAC 1158 15th Street NW 7th Floor  Washington DC 20006	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 05/08/2000	<b>Amount of Each Receipt this Period</b> 1500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 1500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> NEMA PAC 1300 17th Street N Ste 1847  Arlington VA 22208	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 05/08/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 500.00		

**SUBTOTALS** of Receipts This Page (Optional) .....



<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		17 / 28
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER <b>11C</b>	
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.				
<b>NAME OF COMMITTEE (in Full)</b> <b>MARTHA WALKER FOR CONGRESS</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> NEMPAC PO Box 619911  Dallas TX 75261	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 05/08/2000	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> EMILY'S LIST 805 15TH STREET, NW SUITE 400 WASHINGTON DC 20005	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 05/09/2000	<b>Amount of Each Receipt this Period</b> 187.06 IN-KIND	
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 187.06			
<b>Full Name, Mailing Address, and ZIP Code</b> BUSINESS-INDUSTRY PAC 888 16TH STREET, NW SUITE 905 WASHINGTON DC 20006-4103	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 05/16/2000	<b>Amount of Each Receipt this Period</b> 92.46 IN-KIND	
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 92.46			
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....				

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER  
13A

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**NAME OF COMMITTEE (in Full)**  
**MARTHA WALKER FOR CONGRESS**

<b>Full Name, Mailing Address, and ZIP Code</b> Mrs Martha Walker 11 Quail Cove Rd  Charleston WV 25314	<b>Name of Employer</b>  	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 10000.00
	<b>Occupation</b>  		
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 10000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mrs Martha Walker 11 Quail Cove Rd  Charleston WV 25314	<b>Name of Employer</b>  	<b>Date (month, day, year)</b> 05/09/2000	<b>Amount of Each Receipt this Period</b> 10000.00
	<b>Occupation</b>  		
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 20000.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER  
14

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**NAME OF COMMITTEE (in Full)  
MARTHA WALKER FOR CONGRESS**

<b>Full Name, Mailing Address, and ZIP Code</b> COLLETT GARSON P. O. BOX 6275  CHARLESTON WV 25362	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 05/23/2000	<b>Amount of Each Receipt this Period</b> 269.32 RENT REFUND
	<b>Occupation</b>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 269.32		
<b>Full Name, Mailing Address, and ZIP Code</b> STROTHER, DUFFY, STROTHER 1400 EYE STREET, NW SUITE 450 WASHINGTON DC 20005	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 06/30/2000	<b>Amount of Each Receipt this Period</b> 3710.20 REFUND
	<b>Occupation</b>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 3710.20		

**SUBTOTALS** of Receipts This Page (Optional) .....

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

20 / 28

FOR LINE NUMBER  
15

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**NAME OF COMMITTEE (in Full)**  
**MARTHA WALKER FOR CONGRESS**

Full Name, Mailing Address, and ZIP Code

CITY NATIONAL BANK  
P. O. BOX 7077

CROSS LANES WV 25356

Name of Employer

Occupation

Date (month,  
day, year)  
08/30/2000

Amount of Each  
Receipt this Period  
257.60  
INTEREST

Receipt For:  Primary  General

Other (specify):

Aggregate Year-to-Date \$ 257.60

**SUBTOTALS** of Receipts This Page (Optional) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER  
17

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**NAME OF COMMITTEE (In Full)  
MARTHA WALKER FOR CONGRESS**

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JASON BURKE P. O. BOX 643 CHARLESTON WV 25323-0643	PHONE BANKS SNACKS Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/25/2000	23.00
CITY NATIONAL BANK P. O. BOX 7077 CROSS LANES WV 25356	SUPPLIES Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/25/2000	351.00
Mammen, Pritchard & Associates 1245 Independence Ave., SE Washington DC 20003	COPYWRITE & DESIGN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/25/2000	7835.00
SPRINT CONFERENCING SERVICES P. O. BOX 101343 ATLANTA GA 30392-1343	TELEPHONE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/25/2000	424.19
VOTERLINK DATA SYSTEMS ONE PRESIDENTIAL BOULEVARD SUITE 208 BALA CYNWYD PA 19004	VOTER FILES Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/25/2000	2500.00
AT&T P. O. BOX 6001309 LOUISVILLE KY 40290-1309	CELL PHONES Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/26/2000	131.11
JASON BURKE CHARLESTON WV	SALARY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/28/2000	1075.68
CITY NATIONAL BANK P. O. BOX 7077 CROSS LANES WV 25356	941 DEPOSIT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/28/2000	2557.38
CITY NATIONAL BANK P. O. BOX 7077 CROSS LANES WV 25356	940 DEPOSIT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/28/2000	214.56

**SUBTOTALS of Disbursements This Page (Optional)** .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER  
17

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**NAME OF COMMITTEE (In Full)  
MARTHA WALKER FOR CONGRESS**

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
HEATHER FIDLER 230 1/2 HICKORY ROAD CHARLESTON WV 25314	SALARY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/28/2000	1520.58
SANDY GRAFF 32 BIRCHTREE LANE CHARLESTON WV 25314	SALARY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/28/2000	752.26
BRENDA KOLE P. O. BOX 643 CHARLESTON WV 25323-0643	SALARY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/28/2000	1079.43
Mammen, Pritchard & Associates 1245 Independence Ave., SE Washington DC 20003	COPYWRITING Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/28/2000	6100.00
CAROLINE MCLOUGHLIN P. O. BOX 643 CHARLESTON WV 25323-0643	SALARY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/28/2000	645.96
A. MARC MITCHELL P. O. BOX 643 CHARLESTON WV 25323-0643	SALARY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/28/2000	857.64
THOMAS PERRY P. O. BOX 643 CHARLESTON WV 25323-0643	SALARY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/28/2000	431.50
PETER D. HART RESEARCH ASSOC. 1724 CONNECTICUT AVE., NW WASHINGTON DC 20009	POLL COST Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/28/2000	1000.00
MOLLY SHINGERLAND P. O. BOX 643 CHARLESTON WV 25323-0643	SALARY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/28/2000	1089.96

**SUBTOTALS** of Disbursements This Page (Optional) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER  
17

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**NAME OF COMMITTEE (in Full)**  
**MARTHA WALKER FOR CONGRESS**

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
STROTHER, DUFFY, STROTHER 1400 EYE STREET, NW SUITE 450 WASHINGTON DC 20005	CONSULTING Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/28/2000	11053.59
A. MARC MITCHELL P. O. BOX 643 CHARLESTON WV 25323-0643	SALARY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/03/2000	771.80
BJW PRINTING & OFFICE SUPPLIES P. O. BOX 1309 BECKLEY WV 25802-1309	PRINTING Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/05/2000	4888.61
CAMC P. O. BOX 3229 CHARLESTON WV 25332	MEDICAL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/05/2000	520.18
CAMPAIGN TEAM 37 BROOKVIEW TERRACE PORTLAND ME 04102	CONSULTING & EXPENSES Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/05/2000	5115.13
COLLETT CARSON P. O. BOX 6273 CHARLESTON WV 25362	RENT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/05/2000	880.00
CHARLESTON MARRIOTT 200 LEE STREET, EAST CHARLESTON WV 25301	LUNCHEON Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/05/2000	2136.38
JARRETT/AM 900 CHRISTOPHER ST. CHARLESTON WV 25301	PRINTING & POSTAGE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/05/2000	9880.83
Media Strategies 318 Massachusetts Avenue NE Washington DC 20002	MEDIA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/05/2000	15000.00

**SUBTOTALS of Disbursements This Page (Optional)** .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER  
17

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**NAME OF COMMITTEE (In Full)**  
**MARTHA WALKER FOR CONGRESS**

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ADMIX BROADCAST SERVICE 980 WOODWARD DRIVE CHARLESTON WV 25312	RADIO SPOT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	05/08/2000	341.85
B/W PRINTING & OFFICE SUPPLIES P. O. BOX 1309 BECKLEY WV 25802-1309	PRINTING Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	05/08/2000	2741.53
JASON BURKE P. O. BOX 643 CHARLESTON WV 25323-0643	EXPENSE REIMBURSEMENT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	05/08/2000	77.59
HEATHER FIDLER 230 1/2 HICKORY ROAD CHARLESTON WV 25314	RALLY SUPPLIES Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	05/08/2000	576.71
PRECISION COMMUNICATIONS, INC. 10271 GREEN HOLLY TERRACE SILVER SPRING MD 20902	TELEPHONE CALLS Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	05/08/2000	21381.30
STROTHER, DUFFY, STROTHER 1400 EYE STREET, NW SUITE 450 WASHINGTON DC 20006	VIDEO Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	05/08/2000	3884.44
VOTERLINK DATA SYSTEMS ONE PRESIDENTIAL BOULEVARD SUITE 208 BALA CYNWYD PA 19004	VB17.8080 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
SPRINT CONFERENCING SERVICES P. O. BOX 101343 ATLANTA GA 30392-1343	TELEPHONE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	06/07/2000	569.27
SUMMIT CONFERENCE CENTER 129 SUMMERS STREET CHARLESTON WV 25301	RECEPTION Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	06/07/2000	772.17

**SUBTOTALS of Disbursements This Page (Optional)** .....



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER  
17

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**NAME OF COMMITTEE (in Full)**  
**MARTHA WALKER FOR CONGRESS**

<p>Full Name, Mailing Address, and ZIP Code CAMPAIGN TEAM 37 BROOKVIEW TERRACE  PORTLAND ME 04102</p>	<p>Purpose of Disbursement <b>EXPENSES</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p>Date (month, day, year) 08/15/2000</p>	<p>Amount of Each Disbursement This Period 524.33</p>
<p>Full Name, Mailing Address, and ZIP Code AT&amp;T P. O. BOX 9001309  LOUISVILLE KY 40290-1309</p>	<p>Purpose of Disbursement <b>TELEPHONES</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p>Date (month, day, year) 06/30/2000</p>	<p>Amount of Each Disbursement This Period 321.67</p>
<p>Full Name, Mailing Address, and ZIP Code AT&amp;T WIRELESS P. O. BOX 128  NEWARK NJ 07101</p>	<p>Purpose of Disbursement <b>CELL PHONES</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p>Date (month, day, year) 06/30/2000</p>	<p>Amount of Each Disbursement This Period 947.94</p>
<p>Full Name, Mailing Address, and ZIP Code CATERING UNLIMITED, INC. P. O. BOX 11248  CHARLESTON WV 25339</p>	<p>Purpose of Disbursement <b>LUNCHEON</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p>Date (month, day, year) 06/30/2000</p>	<p>Amount of Each Disbursement This Period 260.23</p>
<p>Full Name, Mailing Address, and ZIP Code CITY NATIONAL BANK P. O. BOX 7077  CROSS LANES WV 25358</p>	<p>Purpose of Disbursement <b>941 DEPOSIT</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p>Date (month, day, year) 06/30/2000</p>	<p>Amount of Each Disbursement This Period 344.86</p>
<p>Full Name, Mailing Address, and ZIP Code CITY NATIONAL BANK P. O. BOX 7077  CROSS LANES WV 25358</p>	<p>Purpose of Disbursement <b>SUPPLIES</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p>Date (month, day, year) 06/30/2000</p>	<p>Amount of Each Disbursement This Period 437.35</p>
<p>Full Name, Mailing Address, and ZIP Code SUMMIT CONFERENCE CENTER 129 SUMMERS STREET  CHARLESTON WV 25301</p>	<p>Purpose of Disbursement <b>RECEPTION</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p>Date (month, day, year) 08/30/2000</p>	<p>Amount of Each Disbursement This Period 228.86</p>

**SUBTOTALS** of Disbursements This Page (Optional) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER  
18A

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**NAME OF COMMITTEE (in Full)**  
**MARTHA WALKER FOR CONGRESS**

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mrs Martha Walker 11 Quail Cove Rd  Charleston WV 25314	LOAN REPAYMENT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/07/2000	10000.00
Mrs Martha Walker 11 Quail Cove Rd  Charleston WV 25314	LOAN REPAYMENT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/07/2000	10000.00

**SUBTOTALS** of Disbursements This Page (Optional) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER  
20A

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**NAME OF COMMITTEE (In Full)**  
**MARTHA WALKER FOR CONGRESS**

Full Name, Mailing Address, and ZIP Code

Ms Cynthia Walkwright  
1050 Park Avenue

New York NY 10028

Purpose of Disbursement

REFUND

Date (month,  
day, year)

05/15/2000

Amount of Each  
Disbursement This  
Period

1000.00

Disbursement for:  Primary  General  
 Other (specify):

**SUBTOTALS** of Disbursements This Page (Optional) .....

**SCHEDULE C****LOANS**

28 / 28

(Revised 3/80)

Use separate schedule(s)  
for each numbered lineFOR LINE NUMBER  
10**NAME OF COMMITTEE (In Full)**  
**MARTHA WALKER FOR CONGRESS**

Full Name, Mailing Address, and ZIP Code of Loan Source

Mrs Martha Walker  
11 Quail Cove Rd

Charleston WV 25314

Election:  Primary  General  Other (specify):

Original Amount of Loan

10000.00

Cumulative Payment  
to Date

10000.00

Balance Outstanding  
at Close of This Period

0.00

REF-ID: **SC/10.7984**

TERMS: Date Incurred: 04/27/2000

Date Due:

Interest Rate(%) =

 Secured

Full Name, Mailing Address, and ZIP Code of Loan Source

Mrs Martha Walker  
11 Quail Cove Rd

Charleston WV 25314

Election:  Primary  General  Other (specify):

Original Amount of Loan

10000.00

Cumulative Payment  
to Date

10000.00

Balance Outstanding  
at Close of This Period

0.00

REF-ID: **SC/10.7985**

TERMS: Date Incurred: 06/09/2000

Date Due:

Interest Rate(%) =

 Secured**SUBTOTALS** This Period This Page (Optional) .....**TOTALS** This Period (last page this line number only) .....

0.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input checked="" type="checkbox"/> Other ( Specify): <i>Express Mail</i>	Postmarked <u>7-15-00</u> and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>Jet</i> PREPARER	 <i>7-17-00</i> DATE PREPARED