



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**NUNNELEE FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

	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))....	107000.00	172575.00
(b) Total Contribution Refunds (from Line 20(d)) .....	425.00	525.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	106575.00	172050.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	72299.46	174033.99
(b) Total Offsets to Operating Expenditures (from Line 14).....	179.58	229.58
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	72119.88	173804.41
8. Cash on Hand at Close of Reporting Period (from Line 27).....	156718.97	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**NUNNELEE FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	62000.00	85050.00
(ii) Unitemized .....	500.00	825.00
(iii) TOTAL of contributions from individuals .....	62500.00	85875.00
(b) Political Party Committees.....	0.00	700.00
(c) Other Political Committees (such as PACs).....	44500.00	86000.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	107000.00	172575.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	179.58	229.58
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	107179.58	172804.58

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	72299.46	174033.99
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	425.00	525.00
(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)).....	425.00	525.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	72724.46	174558.99

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	122263.85
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	107179.58
25. SUBTOTAL (add Line 23 and Line 24).....	229443.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	72724.46
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	156718.97

**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 5 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)  
**NUNNELEE FOR CONGRESS**

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

Mailing Address 4330 Ridgeway Dr.

City Belden	State MS	Zip Code 38826
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FEC ID number of contributing federal political committee. **C**

Name of Employer A R Row Management	Occupation Principal
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Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2011

**Transaction ID : SA11Al.11619**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Ricky Calhoun**

Mailing Address 4211 Eastover Place

City Jackson	State MS	Zip Code 39211
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pruet Oil	Occupation Executive
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Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2011

**Transaction ID : SA11Al.11695**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Ricky Calhoun**

Mailing Address 4211 Eastover Place

City Jackson	State MS	Zip Code 39211
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pruet Oil	Occupation Executive
-------------------------------	-------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2011

**Transaction ID : SA11Al.11696**

Amount of Each Receipt this Period  
500.00

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

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

3000.00

**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 6 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ricky Calhoun**

Mailing Address 4211 Eastover Place

City Jackson State MS Zip Code 39211

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

Name of Employer Pruet Oil Occupation Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 10 / 2011**

**Transaction ID : SA11AI.12169**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 5400 Macomb Street, NW

City Washington State DC Zip Code 20016

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

Name of Employer Fierce Isakowitz & Blalock Occupation Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2011**

**Transaction ID : SA11AI.11692**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Chickasaw Nation**

Mailing Address 2020 Lonnie Abbott Blvd

City Ada State OK Zip Code 74820

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2011**

**Transaction ID : SA11AI.11641**

Amount of Each Receipt this Period  
**2500.00**

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

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

**3500.00**

**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 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Albert C Clark**

Mailing Address Post Office Box 966

City Starkville State MS Zip Code 39760

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

Name of Employer C C Clark, Inc Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.11644**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Albert C Clark**

Mailing Address Post Office Box 966

City Starkville State MS Zip Code 39760

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

Name of Employer C C Clark, Inc Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.11682**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Glenda Clark**

Mailing Address Post Office Box 966

City Starkville State MS Zip Code 39760

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.11683**

Amount of Each Receipt this Period  
 2500.00

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

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

7500.00

**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 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Glenda Clark**

Mailing Address Post Office Box 966

City Starkville State MS Zip Code 39760

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.11684**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Federal Solutions, LLC**

Mailing Address 828 West Briar Lake Drive

City Starkville State MS Zip Code 39759

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2011

**Transaction ID : SA11AI.11621**

Amount of Each Receipt this Period  
2000.00

See attribution below.

**C.** Full Name (Last, First, Middle Initial)  
**Marty Fuller**

Mailing Address 828 West Briar Lake Drive

City Starkville State MS Zip Code 39759

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

Name of Employer Occupation  
Federal Solutions, LLC President and owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2011

**Transaction ID : SA11AI.11621.0**

Amount of Each Receipt this Period  
2000.00

partnership attribution

**[MEMO ITEM]**

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

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

4500.00



**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 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Daniel E Fleming**

Mailing Address 6488 Crayford Street

City State Zip Code  
Burke VA 23015

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

Name of Employer Occupation  
Cornerstone Government Affairs Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2011

**Transaction ID : SA11AI.11685**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address Post Office Box 2020

City State Zip Code  
Oxford MS 38655

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

Name of Employer Occupation  
JPB Pathology Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2011

**Transaction ID : SA11AI.11573**

Amount of Each Receipt this Period  
 2400.00

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

Mailing Address 217 West Capital Street, Ste 201

City State Zip Code  
Jackson MS 39201

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

Name of Employer Occupation  
Pruet Production Oil & Gas

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2011

**Transaction ID : SA11AI.11697**

Amount of Each Receipt this Period  
 2000.00

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

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

4900.00

**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 10 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

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

Mailing Address 12594 Spiller Lake

City Manassas State VA Zip Code 20112

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

Name of Employer Cornerstone Govt Affairs Occupation Govt Affairs Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2011

**Transaction ID : SA11AI.11687**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Leslie B Lampton, III**

Mailing Address Post Office Box 2401

City Jackson State MS Zip Code 39225

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

Name of Employer Ergon Occupation President of Petroleum Specialties

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2011

**Transaction ID : SA11AI.11718**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Lee Crum Lampton**

Mailing Address Post Office Box 2401

City Jackson State MS Zip Code 39225

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

Name of Employer Ergon Occupation President of Operations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2011

**Transaction ID : SA11AI.11720**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

**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 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Leslie B Lampton**

Mailing Address Post Office Box 1308

City Jackson State MS Zip Code 39215

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

Name of Employer Ergon Occupation CFO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2011

**Transaction ID : SA11AI.11716**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert H Lampton**

Mailing Address Post Office Box 2401

City Jackson State MS Zip Code 39225

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

Name of Employer Ergon Occupation President of Supply

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2011

**Transaction ID : SA11AI.11714**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**William W Lampton**

Mailing Address Post Office Box 2401

City Jackson State MS Zip Code 39225

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

Name of Employer Ergon Occupation President of Asphalt Marketing

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2011

**Transaction ID : SA11AI.11712**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

**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 12 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

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

Mailing Address 700 13th Street NW Ste 350

City Washington State DC Zip Code 20005

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

Name of Employer The Rhoads Group Occupation consulting

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2011

**Transaction ID : SA11AI.11678**

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
**James E Long**

Mailing Address Post Office Box 907

City Starkville State MS Zip Code 39760

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2011

**Transaction ID : SA11AI.11572**

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
**Jeffrey M MacKinnon**

Mailing Address 3753 Oliver Street NW

City Washington State DC Zip Code 20015

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

Name of Employer Ryan MacKinnon Vasapoli & Berz Occupation Principal

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2011

**Transaction ID : SA11AI.11668**

Amount of Each Receipt this Period  
 500.00

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

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

1100.00

**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 13 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>Jan Mounger</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2011
Mailing Address 3833 Old Canton Rd		<b>Transaction ID : SA11AI.11647</b>
City Jackson	State MS	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer homemaker	Occupation homemaker	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>Jan Mounger</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2011
Mailing Address 3833 Old Canton Rd		<b>Transaction ID : SA11AI.11648</b>
City Jackson	State MS	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer homemaker	Occupation homemaker	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>William Mounger</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2011
Mailing Address 200 E Capitol St Ste 1601		<b>Transaction ID : SA11AI.11645</b>
City Jackson	State MS	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer self	Occupation oil investments	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> 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 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**William Mounger**

Mailing Address 200 E Capitol St Ste 1601

City Jackson State MS Zip Code 39201

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

Name of Employer self Occupation oil investments

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2011**

**Transaction ID : SA11AI.11646**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Old Waverly Properties, LLC**

Mailing Address 5895 Ridgeway Center Parkway Suite 106

City Memphis State TN Zip Code 38120

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2011**

**Transaction ID : SA11AI.11635**

Amount of Each Receipt this Period  
**2500.00**

See attribution below.

**C.** Full Name (Last, First, Middle Initial)  
**Marcia L Bryan**

Mailing Address 860 Beau Pre South

City Memphis State TN Zip Code 38120

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2011**

**Transaction ID : SA11AI.11635.0**

Amount of Each Receipt this Period  
**2500.00**

partnership attribution  
**[MEMO ITEM]**

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

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

**5000.00**

**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 15 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Old Waverly Properties, LLC**

Mailing Address 5895 Ridgeway Center Parkway  
Suite 106

City Memphis State TN Zip Code 38120

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.11637**

Amount of Each Receipt this Period  
2500.00

See attribution below.

**B.** Full Name (Last, First, Middle Initial)  
**George Bryan**

Mailing Address 860 Beau Pre South

City Memphis State TN Zip Code 38120

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

Name of Employer Occupation  
retired retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.11637.0**

Amount of Each Receipt this Period  
2500.00

Partnership attribution  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Poarch Creek Indians**

Mailing Address 5811 Jack Springs Road

City Atmore State AL Zip Code 36502

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.11631**

Amount of Each Receipt this Period  
2000.00

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

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

4500.00

**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 16 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Kelly Segars**

Mailing Address 52 CR 150

City luka State MS Zip Code 38852

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

Name of Employer retired Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.11653**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Kelly Segars**

Mailing Address 52 CR 150

City luka State MS Zip Code 38852

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

Name of Employer retired Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.11654**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Martha Segars**

Mailing Address 52 CR 150

City luka State MS Zip Code 38852

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

Name of Employer Homemaker Occupation Momemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.11655**

Amount of Each Receipt this Period  
 2500.00

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

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

7500.00



**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 17 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Martha Segars**

Mailing Address 52 CR 150

City State Zip Code  
Iuka MS 38852

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

Name of Employer Occupation  
Homemaker Momemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.11657**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mark D Skiles**

Mailing Address 4231 Monument Wall Way, Apt 52

City State Zip Code  
Fairfax VA 22030

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

Name of Employer Occupation  
MSHA Director of Tech Support

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2011

**Transaction ID : SA11AI.11706**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Lawrence Spivey**

Mailing Address 424 Argyle Dr.

City State Zip Code  
Alexandria VA 22305

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

Name of Employer Occupation  
Alpine Group Government Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.11664**

Amount of Each Receipt this Period  
500.00

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

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

3500.00

**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 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Tunica-Biloxi Tribe of LA**

Mailing Address Post Office Box 1589

City Marksville State LA Zip Code 71351

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2011

**Transaction ID : SA11AI.11698**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Garnett B. West**

Mailing Address PO Box 39

City Olive Branch State MS Zip Code 38654

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

Name of Employer Occupation  
 State Farm Insurance Insurance agent

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2011

**Transaction ID : SA11AI.11574**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address PO Box 160

City Grenada State MS Zip Code 38902

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

Name of Employer Occupation  
 Willis Engineering Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2011

**Transaction ID : SA11AI.11617**

Amount of Each Receipt this Period  
 500.00

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

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

3500.00

62000.00

**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 19 OF 47
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
AMERICAN ACADEMY OF PEDIATRIC DENTISTRY POLITICAL ACTION COMMITTEE

Mailing Address 211 E CHICAGO AVE  
SUITE 700

City State Zip Code  
CHICAGO IL 60611

FEC ID number of contributing federal political committee. **C** C00365965

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

Transaction ID : SA11C.11649

Amount of Each Receipt this Period  
 2000.00

B. Full Name (Last, First, Middle Initial)  
AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)

Mailing Address 1015 15TH ST. NW  
SUITE 802

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2011

Transaction ID : SA11C.11672

Amount of Each Receipt this Period  
 2000.00

C. Full Name (Last, First, Middle Initial)  
AMERICAN DENTAL ASSOCIATION PAC INDEPENDENT EXPENDITURES COMMITTEE

Mailing Address 1111 14TH STREET NW SUITE 1100

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00488338

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2011

Transaction ID : SA11C.11568

Amount of Each Receipt this Period  
 2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> 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 20 OF 47
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1505 PRINCE STREET  
SUITE 300

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C C00024968**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 02 / 2011

**Transaction ID : SA11C.11710**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 5430 LBJ FREEWAY  
SUITE 160

City State Zip Code  
DALLAS TX 75240

FEC ID number of contributing federal political committee. **C C00381954**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 14 / 2011

**Transaction ID : SA11C.11623**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**CATERPILLAR INC. EMPLOYEE POLITICAL ACTION COMMITTEE, THE**

Mailing Address 100 N.E. Adams

City State Zip Code  
Peoria IL 61629

FEC ID number of contributing federal political committee. **C C00148031**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2011

**Transaction ID : SA11C.11667**

Amount of Each Receipt this Period  
5000.00

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

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

8000.00

**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 21 OF 47
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
EADS NORTH AMERICA AMERICANS FOR COMPETITION IN AEROSPACE PAC

Mailing Address 1616 North Ft. Myer Drive  
Suite 1600

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00421230

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2011

**Transaction ID : SA11C.11616**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
EADS NORTH AMERICA AMERICANS FOR COMPETITION IN AEROSPACE PAC

Mailing Address 1616 North Ft. Myer Drive  
Suite 1600

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00421230

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11C.11662**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
FARM CREDIT COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 50 F STREET NW  
SUITE 900

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00193631

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2011

**Transaction ID : SA11C.11704**

Amount of Each Receipt this Period  
2000.00

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

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

4000.00

**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 22 OF 47
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FREE AND STRONG AMERICA PAC INC.**

Mailing Address 80 Hayden Avenue

City Lexington State MA Zip Code 02421

FEC ID number of contributing federal political committee. **C** C00449280

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11C.11634**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN (GDVPCP)**

Mailing Address 2941 FAIRVIEW PARK DR.  
SUITE 100

City FALLS CHURCH State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2011

**Transaction ID : SA11C.11674**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)**

Mailing Address 1299 PENNSYLVANIA AVE NW  
SUITE 900W

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2011

**Transaction ID : SA11C.11700**

Amount of Each Receipt this Period  
 1000.00

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

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

4000.00

**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 23 OF 47
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)**

Mailing Address 1299 PENNSYLVANIA AVE NW  
SUITE 900W

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2011

**Transaction ID : SA11C.11688**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**GLAXOSMITHKLINE LLC PAC (GSK PAC)**

Mailing Address Five Moore Drive  
P.O. Box 13358

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C** C00199703

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2011

**Transaction ID : SA11C.11627**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**GULF STATES TOYOTA INC FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 1375 ENCLAVE PARKWAY

City HOUSTON State TX Zip Code 77077

FEC ID number of contributing federal political committee. **C** C00349373

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11C.11665**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 24 OF 47  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**INGRAM BARGE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address **ONE BELLE MEADE PL 4400 HARDING RD**

City **NASHVILLE** State **TN** Zip Code **37205**

FEC ID number of contributing federal political committee. **C C00364471**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2011**

**Transaction ID : SA11C.11670**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**INTERNATIONAL COUNCIL OF SHOPPING CENTERS INC POLITICAL ACTION COMMITTEE (ICSC PAC)**

Mailing Address **1399 NEW YORK AVENUE SUITE 720**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00217638**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 02 / 2011**

**Transaction ID : SA11C.11722**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**K&L GATES LLP POLITICAL ACTION COMMITTEE (DC)**

Mailing Address **1601 K Street, NW Suite 500**

City **Washington** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00213173**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2011**

**Transaction ID : SA11C.11680**

Amount of Each Receipt this Period  
 500.00

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

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

2500.00



**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 25 OF 47
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address 600 14TH STREET, NW  
SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2011

**Transaction ID : SA11C.11690**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE**

Mailing Address 1550 CRYSTAL DRIVE  
SUITE 300

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11C.11651**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MAJORITY COMMITTEE PAC--MC PAC**

Mailing Address P.O. BOX 10134

City BAKERSFIELD State CA Zip Code 93389

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11C.11633**

Amount of Each Receipt this Period  
2500.00

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

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

6000.00

**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 26 OF 47		
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL CHICKEN COUNCIL POLITICAL ACTION COMMITTEE**

Mailing Address 1015 FIFTEENTH STREET NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00034272

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2011

**Transaction ID : SA11C.11628**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL FUNERAL DIRECTORS ASSOCIATION OF THE UNITED STATES INC**

Mailing Address 13625 BISHOPS DRIVE

City BROOKFIELD State WI Zip Code 53005

FEC ID number of contributing federal political committee. **C** C00204008

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2011

**Transaction ID : SA11C.11693**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**NAVISTAR, INC. GOOD GOVERNMENT COMMITTEE**

Mailing Address 4201 WINFIELD ROAD, P.O. BOX 1488

City WARRENVILLE State IL Zip Code 60555

FEC ID number of contributing federal political committee. **C** C00040840

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2011

**Transaction ID : SA11C.11570**

Amount of Each Receipt this Period  
 1000.00

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

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

4000.00

**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 27 OF 47
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I**

Mailing Address 1301 K STREET, NW  
SUITE 800W

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11C.11629**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**THE BABCOCK & WILCOX COMPANY POLITICAL ACTION COMMITTEE (B&W PAC)**

Mailing Address 2016 MT. ATHOS ROAD

City LYNCHBURG State VA Zip Code 24504

FEC ID number of contributing federal political committee. **C C00365502**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11C.11660**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11C.11658**

Amount of Each Receipt this Period  
 1000.00

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

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

4000.00

**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 28 OF 47
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE**

Mailing Address **P.O. BOX 22945**

City **HIALEAH** State **FL** Zip Code **33002**

FEC ID number of contributing federal political committee. **C C00387720**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 02 / 2011**

**Transaction ID : SA11C.11708**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**US RICE PRODUCERS PAC**

Mailing Address **C/O CORNERSTONE GOVERNMENT AFFAIRS  
300 INDEPENDENCE AVE., SE**

City **WASHINGTON** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00383661**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2011**

**Transaction ID : SA11C.11679**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**WATERPAC - NATIONAL RURAL WATER ASSOCIATION POLITICAL COMMITTEE**

Mailing Address **2915 SOUTH 13TH**

City **DUNCAN** State **OK** Zip Code **73533**

FEC ID number of contributing federal political committee. **C C00202184**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 10 / 2011**

**Transaction ID : SA11C.11701**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

44500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 47			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Baldwin &amp; Associates, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2011
Mailing Address Post Office Box 905		Amount of Each Disbursement this Period 8000.00 <b>Transaction ID : SB17.11728</b>
City Tupelo	State MS	
Zip Code 38802	Purpose of Disbursement campaign strategy	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Baldwin &amp; Associates, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2011
Mailing Address Post Office Box 905		Amount of Each Disbursement this Period 8000.00 <b>Transaction ID : SB17.11726</b>
City Tupelo	State MS	
Zip Code 38802	Purpose of Disbursement campaign strategy	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Baldwin &amp; Associates, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2011
Mailing Address Post Office Box 905		Amount of Each Disbursement this Period 644.22 <b>Transaction ID : SB17.11730</b>
City Tupelo	State MS	
Zip Code 38802	Purpose of Disbursement travel reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16644.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Hilton Garden Inn</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2011
Mailing Address 363 East Main Street		Amount of Each Disbursement this Period 423.79
City Tupelo	State MS	
Zip Code 38801	Purpose of Disbursement rental for election night	Transaction ID : <b>SB17.11730.0</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Baldwin &amp; Associates, Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2011
Mailing Address Post Office Box 905		Amount of Each Disbursement this Period 8000.00
City Tupelo	State MS	
Zip Code 38802	Purpose of Disbursement campaign strategy	Transaction ID : <b>SB17.11727</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Breazeale Saunders &amp; O'Neil, Ltd.</b>		Date of Disbursement MM / DD / YYYY 01 / 27 / 2011
Mailing Address Post Office Box 80		Amount of Each Disbursement this Period 1588.13
City Jackson	State MS	
Zip Code 39205	Purpose of Disbursement accounting and FEC reporting	Transaction ID : <b>SB17.11731</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9588.13
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Breazeale Saunders &amp; O'Neil, Ltd.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2011
Mailing Address Post Office Box 80		Amount of Each Disbursement this Period 1481.00 <b>Transaction ID : SB17.11732</b>
City Jackson	State MS	
Zip Code 39205	Purpose of Disbursement accounting and FEC reporting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Breazeale Saunders &amp; O'Neil, Ltd.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2011
Mailing Address Post Office Box 80		Amount of Each Disbursement this Period 1520.00 <b>Transaction ID : SB17.11733</b>
City Jackson	State MS	
Zip Code 39205	Purpose of Disbursement accounting and FEC reporting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Cadley Burns</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2011
Mailing Address 1286 North Second Street		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.11734</b>
City Baldwyn	State MS	
Zip Code 38824	Purpose of Disbursement campaign strategy	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3501.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Cardmember Service</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2011
Mailing Address Post Office Box 790408		Amount of Each Disbursement this Period 2448.00
City St. Louis	State MO	
Zip Code 63179	Purpose of Disbursement credit card payment	<b>Transaction ID : SB17.11737</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Courtyard by Marriott</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2011
Mailing Address 900 F Street NW		Amount of Each Disbursement this Period 683.58
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement hotel	<b>Transaction ID : SB17.11737.0</b> <b>[MEMO ITEM]</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Vidalia Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2011
Mailing Address 1990 M Street NW		Amount of Each Disbursement this Period 748.20
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement dinner for campaign event	<b>Transaction ID : SB17.11737.1</b> <b>[MEMO ITEM]</b>
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2448.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Hotel George</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2011
Mailing Address 15 E Street NW		Amount of Each Disbursement this Period 683.58
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement hotel	Transaction ID : SB17.11737.2
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Ugly Mug</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2011
Mailing Address 723 8th Street Southeast		Amount of Each Disbursement this Period 288.45
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement campaign dinner	Transaction ID : SB17.11737.3
Candidate Name	007 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Cardmember Service</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2011
Mailing Address Post Office Box 790408		Amount of Each Disbursement this Period 3565.00
City St. Louis	State MO	
Zip Code 63179	Purpose of Disbursement credit card payment	Transaction ID : SB17.11738
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3565.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Hotel George</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2011
Mailing Address 15 E Street NW		Amount of Each Disbursement this Period 2414.99
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement hotel	Transaction ID : SB17.11738.0
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Filomena Ristorante</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2011
Mailing Address 1063 Washington Avenue NW		Amount of Each Disbursement this Period 333.80
City Washington	State DC	
Zip Code 20007	Purpose of Disbursement campaign dinner	Transaction ID : SB17.11738.1
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Delta</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2011
Mailing Address Post Office Box 20706		Amount of Each Disbursement this Period 50.00
City Atlanta	State GA	
Zip Code 30320	Purpose of Disbursement luggage fee	Transaction ID : SB17.11738.2
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 47			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Cardmember Service</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2011
Mailing Address Post Office Box 790408		Amount of Each Disbursement this Period 240.13 <b>Transaction ID : SB17.11739</b>
City St. Louis	State MO	
Zip Code 63179	Purpose of Disbursement credit card payment non itemized	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Cardmember Service</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2011
Mailing Address Post Office Box 790408		Amount of Each Disbursement this Period 222.65 <b>Transaction ID : SB17.11740</b>
City St. Louis	State MO	
Zip Code 63179	Purpose of Disbursement credit card payment	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. My Office Products</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2011
Mailing Address 105 Westwood Place Suite 210		Amount of Each Disbursement this Period 155.51 <b>Transaction ID : SB17.11740.0</b> <b>[MEMO ITEM]</b>
City Brentwood	State TN	
Zip Code 37027	Purpose of Disbursement office supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	462.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Coleman R. Hughes</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2011
Mailing Address 74 Aspen Loop		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.11744</b>
City Oxford	State MS Zip Code 38655	
Purpose of Disbursement campaign strategy	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. John Bee McNamara</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2011
Mailing Address 2419 Culleywood Road		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.11747</b>
City Jackson	State MS Zip Code 39211	
Purpose of Disbursement campaign strategy	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Tara Morgan</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2011
Mailing Address Post Office Box 802		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.11748</b>
City Tupelo	State MS Zip Code 38802	
Purpose of Disbursement campaign strategy	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MS State Tax Commission</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2011
Mailing Address Post Office Box 960		Amount of Each Disbursement this Period 693.00 <b>Transaction ID : SB17.11749</b>
City Jackson	State MS	
Zip Code 39205	Purpose of Disbursement payroll taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mabel Murphree</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2011
Mailing Address 3268 Old Town Estate		Amount of Each Disbursement this Period 3191.00 <b>Transaction ID : SB17.11750</b>
City Tupelo	State MS	
Zip Code 38804	Purpose of Disbursement net payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Mabel Murphree</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2011
Mailing Address 3268 Old Town Estate		Amount of Each Disbursement this Period 1165.82 <b>Transaction ID : SB17.11751</b>
City Tupelo	State MS	
Zip Code 38804	Purpose of Disbursement hotel, airline ticket, taxi, luggage fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5049.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Tori Nunnelee</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2011
Mailing Address 1816 Woodside		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.11784</b>
City Tupelo	State MS	
Zip Code 38801	Purpose of Disbursement reimb for First Lady's luncheon with 3 guests	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Old Style Bar-B-Q</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2011
Mailing Address 8920 Expressway Drive		Amount of Each Disbursement this Period 441.00 <b>Transaction ID : SB17.11752</b>
City Olive Branch	State MS	
Zip Code 38654	Purpose of Disbursement catering	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Coby Parker</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2011
Mailing Address 109 Pine hill Cove		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.11754</b>
City Pearl	State MS	
Zip Code 39208	Purpose of Disbursement campaign strategy	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1341.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Politicap, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2011
Mailing Address 110 Providence Drive		Amount of Each Disbursement this Period 1014.75
City Madison	State MS Zip Code 39110	
Purpose of Disbursement Campaign strategy	001	<b>Transaction ID : SB17.11741</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Politicap, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2011
Mailing Address 110 Providence Drive		Amount of Each Disbursement this Period 3000.00
City Madison	State MS Zip Code 39110	
Purpose of Disbursement campaign strategy	001	<b>Transaction ID : SB17.11755</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Politicap, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2011
Mailing Address 110 Providence Drive		Amount of Each Disbursement this Period 3046.70
City Madison	State MS Zip Code 39110	
Purpose of Disbursement campaign strategy	001	<b>Transaction ID : SB17.11756</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7061.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Politicap, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2011
Mailing Address 110 Providence Drive		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.11757</b>
City Madison	State MS	
Zip Code 39110	Purpose of Disbursement campaign strategy	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Quickbooks Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2011
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 97.88 <b>Transaction ID : SB17.11758</b>
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement check order	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Quickbooks Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2011
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 1.25 <b>Transaction ID : SB17.11768</b>
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement payroll processing fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3099.13
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Quickbooks Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2011
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 1.25 <b>Transaction ID : SB17.11769</b>
City Mountain View	State CA Zip Code 94043	
Purpose of Disbursement payroll processing fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Quickbooks Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2011
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 1.25 <b>Transaction ID : SB17.11770</b>
City Mountain View	State CA Zip Code 94043	
Purpose of Disbursement payroll processing fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Quickbooks Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2011
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 1.25 <b>Transaction ID : SB17.11771</b>
City Mountain View	State CA Zip Code 94043	
Purpose of Disbursement payroll processing fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Quickbooks Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2011
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 0.43 <b>Transaction ID : SB17.11759</b>
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Quickbooks direct deposit set up withdrawals Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Quickbooks Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2011
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 0.73 <b>Transaction ID : SB17.11760</b>
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Quickbooks direct deposit set up withdrawals Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Rose Strategies, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2011
Mailing Address 631 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.11774</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement campaign strategy Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2001.16
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Rose Strategies, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2011	
Mailing Address 631 Pennsylvania Avenue SE			Amount of Each Disbursement this Period 470.34	
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.11777	
Purpose of Disbursement catering for event		Category/ Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Rose Strategies, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2011	
Mailing Address 631 Pennsylvania Avenue SE			Amount of Each Disbursement this Period 2000.00	
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.11778	
Purpose of Disbursement campaign strategy		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Rose Strategies, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2011	
Mailing Address 631 Pennsylvania Avenue SE			Amount of Each Disbursement this Period 2000.00	
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.11779	
Purpose of Disbursement campaign strategy		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4470.34
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 47			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Rose Strategies, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2011
Mailing Address 631 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 387.19 <b>Transaction ID : SB17.11780</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement reimburse for catering expense 007 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jordan L Russell</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2011
Mailing Address 109 Patti Lane		Amount of Each Disbursement this Period 1967.75 <b>Transaction ID : SB17.11781</b>
City Oxford State MS Zip Code 38655	Purpose of Disbursement net payroll 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Transfirst LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2011
Mailing Address 371 Centennial Parkway		Amount of Each Disbursement this Period 96.00 <b>Transaction ID : SB17.11786</b>
City Louisville State CO Zip Code 80207	Purpose of Disbursement credit card fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2450.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Transfirst LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2011
Mailing Address 371 Centennial Parkway		Amount of Each Disbursement this Period 5.35 <b>Transaction ID : SB17.11787</b>
City Louisville	State CO	
Zip Code 80207	Purpose of Disbursement credit card fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Transfirst LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2011
Mailing Address 371 Centennial Parkway		Amount of Each Disbursement this Period 5.00 <b>Transaction ID : SB17.11788</b>
City Louisville	State CO	
Zip Code 80207	Purpose of Disbursement credit card fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Transfirst LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2011
Mailing Address 371 Centennial Parkway		Amount of Each Disbursement this Period 5.00 <b>Transaction ID : SB17.11789</b>
City Louisville	State CO	
Zip Code 80207	Purpose of Disbursement credit card fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>A. US Treasury</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>12</td> <td></td> <td>2011</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		12		2011
M M	/	D D	/	Y Y Y Y								
01		12		2011								
Mailing Address Internal Revenue Service		Amount of Each Disbursement this Period										
City	State		Zip Code									
Washington	DC	20224	<table border="1"> <tr> <td>3,000.00</td> </tr> </table> 112.00 <b>Transaction ID : SB17.11794</b>	3,000.00								
3,000.00												
Purpose of Disbursement payroll taxes		Category/ Type										
Candidate Name												
Office Sought:	House	Disbursement For: 2012										
	Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General										
	President	<input type="checkbox"/> Other (specify)										
State:	District:											

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>B. US Treasury</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>18</td> <td></td> <td>2011</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		18		2011
M M	/	D D	/	Y Y Y Y								
01		18		2011								
Mailing Address Internal Revenue Service		Amount of Each Disbursement this Period										
City	State		Zip Code									
Washington	DC	20224	<table border="1"> <tr> <td>1,658.50</td> </tr> </table> 1658.50 <b>Transaction ID : SB17.11796</b>	1,658.50								
1,658.50												
Purpose of Disbursement payroll taxes		Category/ Type										
Candidate Name												
Office Sought:	House	Disbursement For: 2012										
	Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General										
	President	<input type="checkbox"/> Other (specify)										
State:	District:											

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>C. US Treasury</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>16</td> <td></td> <td>2011</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		16		2011
M M	/	D D	/	Y Y Y Y								
03		16		2011								
Mailing Address Internal Revenue Service		Amount of Each Disbursement this Period										
City	State		Zip Code									
Washington	DC	20224	<table border="1"> <tr> <td>1,607.50</td> </tr> </table> 1607.50 <b>Transaction ID : SB17.11797</b>	1,607.50								
1,607.50												
Purpose of Disbursement payroll taxes		Category/ Type										
Candidate Name												
Office Sought:	House	Disbursement For: 2012										
	Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General										
	President	<input type="checkbox"/> Other (specify)										
State:	District:											

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>3,378.00</td> </tr> </table>	3,378.00
3,378.00		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**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 47 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**NUNNELEE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Weatherall Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2011
Mailing Address Post Office Drawer 677		Amount of Each Disbursement this Period 3780.23 <b>Transaction ID : SB17.11799</b>
City Tupelo	State MS	
Zip Code 38802	Purpose of Disbursement printing and mailing	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Shadrack White</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2011
Mailing Address PO Box M		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.11801</b>
City Sandersville	State MS	
Zip Code 39477	Purpose of Disbursement campaign strategy	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4780.23
<b>TOTAL</b> This Period (last page this line number only).....	71860.30