

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

FRIENDS OF SAM JOHNSON

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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)).....	123668.06	367387.30
(b) Total Contribution Refunds (from Line 20(d)).....	40.00	40.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	123628.06	367347.30
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	92559.19	330265.46
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	11.13
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	92559.19	330254.33
8. Cash on Hand at Close of Reporting Period (from Line 27).....	732835.55	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
 FRIENDS OF SAM JOHNSON

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. RECEIPTS

COLUMN A
 Total This Period

COLUMN B
 Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

50575.00

165293.59

(ii) Unitemized.....

7693.06

31671.16

(iii) TOTAL of contributions

58268.06

196964.75

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

65400.00

170422.55

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

123668.06

367387.30

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

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

0.00

0.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

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

0.00

0.00

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

0.00

11.13

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

5120.76

24515.42

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

128788.82

391913.85

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	92559.19	330265.46
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.....	40.00	40.00
(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)).....	40.00	40.00
21. OTHER DISBURSEMENTS.....	11000.00	64500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	103599.19	394805.46

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	707645.92
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	128788.82
25. SUBTOTAL (add Line 23 and Line 24).....	836434.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	103599.19
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	732835.55

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Peyton Townsend, Jr.		Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2007	
Mailing Address 4551 Arcady Avenue		Transaction ID: 0033478	
City State Zip Code Dallas TX 75205-3606		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation RBC Pain Rauscher Stockbroker			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mr. Robert Connor		Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2007	
Mailing Address 3505 Turtle Creek Blvd Residence-12A		Transaction ID: 0034195	
City State Zip Code Dallas TX 75219		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Self Private Investor			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mr. Andrew M. Shore		Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2007	
Mailing Address 5904 North 22nd Street		Transaction ID: 0033531	
City State Zip Code Arlington VA 22205		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Mayer, Brown, Rowe & Maw LLP Partner			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
Mr. Christopher W. Hatcher

Mailing Address 5024 35th Street N

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
Williams & Jenson, PLLC Attorney

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

500.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2007

Transaction ID: 0033533

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Raymond M. Fitzgerald

Mailing Address 1465 Briergate Drive

City State Zip Code
Naperville IL 60563

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

Name of Employer Occupation
International Truck Director, Federal Legislative

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

250.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2007

Transaction ID: 0033534

Amount of Each Receipt this Period
250.00

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

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

Mailing Address Williams & Jenson
1155-21st Street, NW, Ste. 300

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation
Williams & Jenson Attorney

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

1000.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2007

Transaction ID: 0033536

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
Michael J. Beer

Mailing Address 8500 Innisfree Drive

City State Zip Code
Springfield VA 22153

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

Name of Employer Occupation
Williams & Jensen Attorney

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

750.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 09 / 2007

Transaction ID: 0033538

Amount of Each Receipt this Period
750.00

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

B. Full Name (Last, First, Middle Initial)
Mr. James B. Franklin

Mailing Address 700 South Fillmore Suite 444

City State Zip Code
Amarillo TX 79101-2444

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

Name of Employer Occupation
Self Oil and Gas Industry

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

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 09 / 2007

Transaction ID: 0033540

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Charles D. Haley

Mailing Address 2910 Faulkner

City State Zip Code
Rowlett TX 75088-5906

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

Name of Employer Occupation
Cox Ind Inc Manufacturer/Owner

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

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 09 / 2007

Transaction ID: 0033541

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	1750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
Samuel E. Roach

Mailing Address PO Box 459

City State Zip Code
Frisco TX 75034

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

Name of Employer Self Occupation
Broker-Real Estate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2550.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2007

Transaction ID: 0033542

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
Samuel E. Roach

Mailing Address PO Box 459

City State Zip Code
Frisco TX 75034

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

Name of Employer Self Occupation
Broker-Real Estate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2007

Transaction ID: 0033543

Amount of Each Receipt this Period
-250.00

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

C. Full Name (Last, First, Middle Initial)
Samuel E. Roach

Mailing Address PO Box 459

City State Zip Code
Frisco TX 75034

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

Name of Employer Self Occupation
Broker-Real Estate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2550.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2007

Transaction ID: 0033544

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2300.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Christopher C. Cox		Date of Receipt M M / D D / Y Y Y Y 07 / 10 / 2007
Mailing Address 3106 Russell Road		Transaction ID: 0033580
City State Zip Code Alexandria VA 22306	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation DC Navigators Executive	Election Cycle-to-Date 1075.00	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Lee Ingraham		Date of Receipt M M / D D / Y Y Y Y 07 / 13 / 2007
Mailing Address 24 Brookhollow Circle		Transaction ID: 0033609
City State Zip Code Melissa TX 75454	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Occupation	Election Cycle-to-Date 50.00	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Mr. William A. Kramer		Date of Receipt M M / D D / Y Y Y Y 07 / 13 / 2007
Mailing Address 2626 Howell Street 10th Floor		Transaction ID: 0033614
City State Zip Code Dallas TX 75204	Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Republic Title of Texas, Inc Chairman	Election Cycle-to-Date 2800.00	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	3350.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Mr. William A. Kramer		Date of Receipt M M / D D / Y Y Y Y Y 07 / 13 / 2007
Mailing Address 2626 Howell Street 10th Floor		Transaction ID: 0033615
City State Zip Code Dallas TX 75204	Amount of Each Receipt this Period -500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] REDESIGNATION
Name of Employer Republic Title of Texas, Inc	Occupation Chairman	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

Full Name (Last, First, Middle Initial) B. Mr. William A. Kramer		Date of Receipt M M / D D / Y Y Y Y Y 07 / 13 / 2007
Mailing Address 2626 Howell Street 10th Floor		Transaction ID: 0033616
City State Zip Code Dallas TX 75204	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] REDESIGNATION
Name of Employer Republic Title of Texas, Inc	Occupation Chairman	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2800.00	

Full Name (Last, First, Middle Initial) C. Mrs. Barbara P. Chapman		Date of Receipt M M / D D / Y Y Y Y Y 07 / 13 / 2007
Mailing Address 7210 Lane Park Drive		Transaction ID: 0033617
City State Zip Code Dallas TX 75225	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
Eric S. Greenfield

Mailing Address 3829 Hanover Street

City State Zip Code
Dallas TX 75225-7117

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

Name of Employer Occupation
Merrill Lynch Stock Broker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 13 / 2007

Transaction ID: 0033618

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Steve Sullins

Mailing Address 3948 Marquette Street

City State Zip Code
Dallas TX 75225

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

Name of Employer Occupation
Sullins & Associates President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 17 / 2007

Transaction ID: 0033923

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 5021 Glenbrook Terrace, NW

City State Zip Code
Washington DC 20016

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

Name of Employer Occupation
The C2Group Lobbyist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 20 / 2007

Transaction ID: 0033637

Amount of Each Receipt this Period
75.00

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

SUBTOTAL of Receipts This Page (optional)	▶	425.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
John G. Nolan

Mailing Address 14820 Lochinvar Drive

City State Zip Code
Dallas TX 75240

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

Name of Employer Occupation
NOW Specialties, Inc EXECUTIVE

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

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 20 / 2007

Transaction ID: 0033644

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Mr. John E. McManus

Mailing Address 660 Pennsylvania Avenue, SE Suite 300

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation
The McManus Group President

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

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 20 / 2007

Transaction ID: 0033648

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 21068 Baldwin

City State Zip Code
Porter TX 77365

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

Name of Employer Occupation
Fundrace Neighbor Search CEO

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

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 25 / 2007

Transaction ID: 0033663

Amount of Each Receipt this Period
500.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Mr. Dan Herink		Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2007
Mailing Address 2319 Crimson Valley Ct		Transaction ID: 0033664
City State Zip Code Humble TX 77345	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Administaff	Occupation Vice President of General Coun	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Richard G. Rawson		Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2007
Mailing Address 31 Enchanted Woods Drive		Transaction ID: 0033665
City State Zip Code Kingwood TX 77339	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Fundrace Neighbor Search	Occupation Exec. VP/CFO	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ms. Kathleen A. Hillegas		Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2007
Mailing Address N2155 Valley Road		Transaction ID: 0033666
City State Zip Code La Crosse WI 54601	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Administaff	Occupation Executive	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 98
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Mr. Jerry A. King-Echevarria		Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2007
Mailing Address King Aerospace 4444 Westgrove, Suite 250		Transaction ID: 0033675 Amount of Each Receipt this Period 2300.00
City Addison State TX Zip Code 75001	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer King Aerospace Occupation Chairman & President	Election Cycle-to-Date 2300.00	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Robert E. Glennon, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2007
Mailing Address 1909 K Street, NW Suite 1200		Transaction ID: 0033676 Amount of Each Receipt this Period 1000.00
City Washington State DC Zip Code 20006-1101	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Mayer, Brown, Rowe & Maw LLP Occupation Attorney	Election Cycle-to-Date 1000.00	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Clint D. Carlson		Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2007
Mailing Address 3658 Stratford Avenue		Transaction ID: 0033679 Amount of Each Receipt this Period 1000.00
City Dallas State TX Zip Code 75205	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Carlson Capital Occupation Investor	Election Cycle-to-Date 1000.00	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	4300.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Mr. Kermit D. Heaton		Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2007
Mailing Address 2832 Meadowbrook Dr		Transaction ID: 0033921
City State Zip Code Plano TX 75075-6431	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Value-Added Communications	Occupation Manager	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Mr. David W. Burgher, Sr.		Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2007
Mailing Address 7431 Caruth Blvd		Transaction ID: 0033710
City State Zip Code Dallas TX 75225	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Baylor Health Care System	Occupation Advisory chairman	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mr. John H. McElhanev		Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2007
Mailing Address 5340 Tanbark		Transaction ID: 0033711
City State Zip Code Dallas TX 75229	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Locke Liddell & SAPP	Occupation Attorney	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Robert A. Gwinn		Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2007
Mailing Address 3321 Beverly Drive		Transaction ID: 0033712
City State Zip Code Dallas TX 75205	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Gwinn & Roby	Occupation Attorney	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Dr. William J. Waters		Date of Receipt M M / D D / Y Y Y Y 08 / 10 / 2007
Mailing Address 4242 Lomo Alto Apt E35		Transaction ID: 0033721
City State Zip Code Dallas TX 75219	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self	Occupation Physican	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mr. Joseph J. Collmer		Date of Receipt M M / D D / Y Y Y Y 08 / 10 / 2007
Mailing Address 5525 Westgrove Dr		Transaction ID: 0033722
City State Zip Code Dallas TX 75248-2030	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer High Voltage Power System	Occupation Executive	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
Mr. David W. Biegler

Mailing Address 1700 Pacific Suite 2350

City Dallas State TX Zip Code 75201

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

Name of Employer Estrella Energy Occupation Chairman

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: 0033739

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
H. Winfield Padgett

Mailing Address 5956 Sherry Lane Suite 1000

City Dallas State TX Zip Code 75225-8021

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

Name of Employer Padgett Printing Corporation Occupation Chairman

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

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

Transaction ID: 0033740

Amount of Each Receipt this Period
2300.00

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

C. Full Name (Last, First, Middle Initial)
Mr. Herbert H. McJunkin, Jr.

Mailing Address 111 West Spring Valley Road Suite 200

City Richardson State TX Zip Code 75081-4099

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

Name of Employer Dal-Mac Construction/Development Occupation Contractor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

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

Transaction ID: 0033741

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional)	2650.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
Mr. Steven S. Reinemund

Mailing Address 3818 Caruth Blvd

City State Zip Code
Dallas TX 75225

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

Name of Employer Occupation
Retired

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

2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 29 / 2007

Transaction ID: 0033751

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
Mr. William H. Hornberger

Mailing Address 3620 Purdue

City State Zip Code
Dallas TX 75225

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

Name of Employer Occupation
Jackson Walker, LLP Attorney

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

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 29 / 2007

Transaction ID: 0033752

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Mr. Gary D. Pickense

Mailing Address 5615 Pecan Spring Court

City State Zip Code
Dallas TX 75252

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

Name of Employer Occupation
self Real Estate Developer

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

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 29 / 2007

Transaction ID: 0033753

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	3050.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial) Mr. Paul T. Huang		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 7
Mailing Address 1750 N Collins Blvd # 200		Transaction ID: 0033758
City State Zip Code Richardson TX 75080-3551	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Richland Real Estate	Occupation Real Estate	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) Joel T. Allison		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 7
Mailing Address 9210 Westwind Court		Transaction ID: 0033785
City State Zip Code Dallas TX 75231	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Baylor Health Care	Occupation President/CEO	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Mr. Renato Bosita		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 7
Mailing Address 3101 Harvard Ct		Transaction ID: 0033953
City State Zip Code Plano TX 75093	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Texas Back Insitute	Occupation Physican	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1300.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
Stephen E. Gorman

Mailing Address 6459 Memorial Drive

City Frisco State TX Zip Code 75034-7244

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

Name of Employer Greyhound Lines Inc Occupation President/COO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2007

Transaction ID: 0033986

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Robert Baillargeon

Mailing Address 5501 Hamptondale

City Plano State TX Zip Code 75093

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

Name of Employer Self-Employed Occupation Investments

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2007

Transaction ID: 0033962

Amount of Each Receipt this Period
300.00

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

C. Full Name (Last, First, Middle Initial)
Dr. C. E. McCoy

Mailing Address Dallas Spinal Rehabilitation
6161 Harry Hines, Ste. 105

City Dallas State TX Zip Code 75235

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

Name of Employer Dallas Spinal Rehab Center Occupation Psychologist/President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2600.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2007

Transaction ID: 0033789

Amount of Each Receipt this Period
2500.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **3300.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
Dr. C. E. McCoy

Mailing Address Dallas Spinal Rehabilitation
6161 Harry Hines, Ste. 105

City Dallas State TX Zip Code 75235

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

Name of Employer Dallas Spinal Rehab Center Occupation Psychologist/President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 10 / 2007

Transaction ID: 0033790

Amount of Each Receipt this Period
-300.00

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

B. Full Name (Last, First, Middle Initial)
Dr. C. E. McCoy

Mailing Address Dallas Spinal Rehabilitation
6161 Harry Hines, Ste. 105

City Dallas State TX Zip Code 75235

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

Name of Employer Dallas Spinal Rehab Center Occupation Psychologist/President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2600.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 10 / 2007

Transaction ID: 0033791

Amount of Each Receipt this Period
300.00

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

C. Full Name (Last, First, Middle Initial)
Harvinder Cheema

Mailing Address 2804 Hampton Ct

City Richardson State TX Zip Code 75082

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

Name of Employer MobileComm Professional Occupation Chief Executive Officer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 10 / 2007

Transaction ID: 0033792

Amount of Each Receipt this Period
300.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 98 (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial) John F. Boyle, Jr. Mailing Address 1718 Cripple Creek City Irving State TX Zip Code 75061 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2007 Transaction ID: 0033793 Amount of Each Receipt this Period 250.00
Name of Employer: Boyle & Lowry Occupation: Attorney Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Election Cycle-to-Date ▼ 250.00

B. Full Name (Last, First, Middle Initial) Mr. J. L. Huffines Mailing Address PO Box 338 City Lewisville State TX Zip Code 75067-0338 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2007 Transaction ID: 0033794 Amount of Each Receipt this Period 500.00
Name of Employer: Huffines Chevrolet Company Occupation: Auto Dealer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Election Cycle-to-Date ▼ 2800.00

C. Full Name (Last, First, Middle Initial) Mr. J. L. Huffines Mailing Address PO Box 338 City Lewisville State TX Zip Code 75067-0338 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2007 Transaction ID: 0033795 Amount of Each Receipt this Period -500.00
Name of Employer: Huffines Chevrolet Company Occupation: Auto Dealer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Election Cycle-to-Date ▼ 2300.00 [MEMO ITEM] REDESIGNATION

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
Mr. J. L. Huffines

Mailing Address PO Box 338

City Lewisville State TX Zip Code 75067-0338

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

Name of Employer Huffines Chevrolet Company Occupation Auto Dealer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2800.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2007

Transaction ID: 0033796

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Jerry Williamson

Mailing Address 6700 Denton Dr

City Dallas State TX Zip Code 75235

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

Name of Employer Williamson Printing Corp Occupation Printer/Memb. Print. Ind.

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2007

Transaction ID: 0033797

Amount of Each Receipt this Period
2300.00

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

C. Full Name (Last, First, Middle Initial)
Mr. Jerry Williamson

Mailing Address 6700 Denton Dr

City Dallas State TX Zip Code 75235

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

Name of Employer Williamson Printing Corp Occupation Printer/Memb. Print. Ind.

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2007

Transaction ID: 0033798

Amount of Each Receipt this Period
-1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 2300.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
Mr. Jerry Williamson

Mailing Address 6700 Denton Dr

City State Zip Code
Dallas TX 75235

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

Name of Employer Occupation
Williamson Printing Corp Printer/Memb. Print. Ind.

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2007

Transaction ID: 0033799

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Scott F. Drees

Mailing Address 834 Parkwood Court

City State Zip Code
Mc Kinney TX 75070-5389

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

Name of Employer Occupation
ANS, Inc Business Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2800.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2007

Transaction ID: 0033803

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Scott F. Drees

Mailing Address 834 Parkwood Court

City State Zip Code
Mc Kinney TX 75070-5389

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

Name of Employer Occupation
ANS, Inc Business Executive

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2007

Transaction ID: 0033804

Amount of Each Receipt this Period
-500.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
Scott F. Drees

Mailing Address 834 Parkwood Court

City State Zip Code
Mc Kinney TX 75070-5389

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

Name of Employer ANS, Inc Occupation Business Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2800.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2007

Transaction ID: 0033805

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Mr. J. Victor Lattimore

Mailing Address PO Box 556

City State Zip Code
Mc Kinney TX 75070

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

Name of Employer Lattimore Properties Occupation Owner/President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4600.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2007

Transaction ID: 0033806

Amount of Each Receipt this Period
4600.00

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

C. Full Name (Last, First, Middle Initial)
Mr. J. Victor Lattimore

Mailing Address PO Box 556

City State Zip Code
Mc Kinney TX 75070

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

Name of Employer Lattimore Properties Occupation Owner/President

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2007

Transaction ID: 0033807

Amount of Each Receipt this Period
-2300.00

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

SUBTOTAL of Receipts This Page (optional)	▶	4600.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
Mr. J. Victor Lattimore

Mailing Address PO Box 556

City State Zip Code
Mc Kinney TX 75070

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

Name of Employer Lattimore Properties Occupation Owner/President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2007

Transaction ID: 0033808

Amount of Each Receipt this Period
2300.00

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

[MEMO ITEM]
REDESIGNATION

B. Full Name (Last, First, Middle Initial)
Mrs. Dorothy Hirl

Mailing Address 77 Kennington Court

City State Zip Code
Dallas TX 75248-7902

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

Name of Employer Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2007

Transaction ID: 0033813

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Mr. Joseph J. Collmer

Mailing Address 5525 Westgrove Dr

City State Zip Code
Dallas TX 75248-2030

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

Name of Employer High Voltage Power System Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2007

Transaction ID: 0033814

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
William P. Clements, Jr.

Mailing Address 1901 North Akard

City State Zip Code
Dallas TX 75201

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

Name of Employer Self Occupation
Rancher/Oil/Former Govnr.

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2100.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2007

Transaction ID: 0033815

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Patrick A. Humm

Mailing Address 2737 Brookside Lane

City State Zip Code
Mc Kinney TX 75070

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

Name of Employer hie Electronics Occupation
Chairman/CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2007

Transaction ID: 0033816

Amount of Each Receipt this Period
1200.00

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

C. Full Name (Last, First, Middle Initial)
John Jones

Mailing Address 3305 CR 427

City State Zip Code
Anna TX 75409

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

Name of Employer Self-Employed Occupation
Engineer

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 14 / 2007

Transaction ID: 0033992

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1950.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Eric Zepp		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2007
Mailing Address 2500 Provine Road		Transaction ID: 0033828
City State Zip Code Mc Kinney TX 75070	Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Bonser-Philhower Sales President/Owner/Sales		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

Full Name (Last, First, Middle Initial) B. Mrs. Patti M. Kramer		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2007
Mailing Address 2712 Prairie Creek Dr West		Transaction ID: 0033829
City State Zip Code Richardson TX 75080	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Home Maker		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Thomas C. Yarrell		Date of Receipt M M / D D / Y Y Y Y Y 09 / 20 / 2007
Mailing Address 2808 Bowling Green Circle		Transaction ID: 0033830
City State Zip Code Plano TX 75075-8115	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation CRF, Inc President		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional) ▶	3050.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial) Mr. Timothy John Carlson		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2007	
Mailing Address 1530 N Key Blvd #1320		Transaction ID: 0033840	
City Arlington State VA Zip Code 22209-1531	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Texas Instruments Occupation Attorney	Election Cycle-to-Date 1300.00		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Robert Tomes		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2007	
Mailing Address 2616 Club Lake Trail		Transaction ID: 0033842	
City Mc Kinney State TX Zip Code 75070	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Bob Tomes Ford Cars and Trucks Occupation Car Dealer/Owner	Election Cycle-to-Date 500.00		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Mr. H. George Schuler		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2007	
Mailing Address 1500 E Industrial Blvd		Transaction ID: 0033844	
City Mc Kinney State TX Zip Code 75069	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Scholar Development/Wings Point Occupation Owner/Partner	Election Cycle-to-Date 500.00		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	1300.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 98
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
William D. Darling

Mailing Address 2500 Legacy Drive
Suite 100

City Frisco State TX Zip Code 75034

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

Name of Employer Darling Homes Occupation Homebuilder

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 27 / 2007

Transaction ID: 0033855

Amount of Each Receipt this Period
1200.00

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

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

Mailing Address 2613 Clublake Trail

City Mc Kinney State TX Zip Code 75070

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

Name of Employer Self Occupation Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 27 / 2007

Transaction ID: 0033856

Amount of Each Receipt this Period
1200.00

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

C. Full Name (Last, First, Middle Initial)
Amoret G. Cain

Mailing Address 6841 Virginia Parkway
Ste 103, PMB 436

City McKinney State TX Zip Code 75071

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

Name of Employer Cain Custom Builders Occupation Design Coordinator

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 27 / 2007

Transaction ID: 0033857

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	2650.00
TOTAL This Period (last page this line number only)	50575.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 / 98
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. American Health Insurance Plans AHIP PAC		Date of Receipt M M / D D / Y Y Y Y Y 07 / 09 / 2007
Mailing Address 601 Pennsylvania Avenue, Suite 500		Transaction ID: 0033522
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. MGI Pharma, Inc PAC		Date of Receipt M M / D D / Y Y Y Y Y 07 / 09 / 2007
Mailing Address 5775 W Old Shakopee Road Suite 100		Transaction ID: 0033523
City Minneapolis	State MN	Zip Code 55437
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Locke Liddell & SAPP LLP PAC		Date of Receipt M M / D D / Y Y Y Y Y 07 / 09 / 2007
Mailing Address 600 Travis, Suite 3400		Transaction ID: 0033524
City Houston	State TX	Zip Code 77002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 32 / 98
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Akerman Senterfitt & Eidson P.A. PAC Account		Date of Receipt M M / D D / Y Y Y Y Y 07 / 09 / 2007
Mailing Address 801 Pennsylvania Avenue, NW Suite 600		Transaction ID: 0033525
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Universal American Financial Corp. PAC		Date of Receipt M M / D D / Y Y Y Y Y 07 / 09 / 2007
Mailing Address 6 International Drive		Transaction ID: 0033526
City RYD Brook	State NY	Zip Code 10573
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. PricewaterhouseCoopers PAC		Date of Receipt M M / D D / Y Y Y Y Y 07 / 09 / 2007
Mailing Address 1301 K Street, NW Suite 800W		Transaction ID: 0033527
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 98
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
National Restaurant Assoc. PAC (NRA PAC)

Mailing Address 1200 Seventeenth St, NW

City Washington State DC Zip Code 20036-3097

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 09 / 2007

Transaction ID: 0033528

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
ChevronTexaco Employees PAC

Mailing Address 1401 Eye Street NW Suite 1200

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 09 / 2007

Transaction ID: 0033529

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Union Pacific Fund for Effective Government

Mailing Address 600 Thirteenth St, NW Suite 340

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 09 / 2007

Transaction ID: 0033530

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 98
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Continental Airlines, Employee Fund for Better America PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2007
Mailing Address 1600 Smith Street Suite HQSGV		Transaction ID: 0033532
City Houston State TX Zip Code 77002	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. National Venture Capital Assn. PAC/VenturePAC		Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2007
Mailing Address 1655 North Fort Myer Drive Suite 850		Transaction ID: 0033535
City Arlington State VA Zip Code 22209	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. International Truck and Engine Corp. Good Government Comm.		Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2007
Mailing Address 4201 Winfield Road PO Box 1488		Transaction ID: 0033537
City Warrenville State IL Zip Code 60555	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 98
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. PricewaterhouseCoopers PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2007
Mailing Address 1301 K Street, NW Suite 800W		Transaction ID: 0033647
City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <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. American Airlines PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2007
Mailing Address 1101-17th Street, NW Suite 600		Transaction ID: 0033957
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. NRA PAC/National Rifle Association		Date of Receipt M M / D D / Y Y Y Y 07 / 13 / 2007
Mailing Address 11250 Waples Mill Road		Transaction ID: 0033620
City Fairfax State VA Zip Code 22030-7400	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 / 98
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. ESOP PAC/Employees Stock Option Plan		Date of Receipt M M / D D / Y Y Y Y Y 07 / 20 / 2007
Mailing Address 1726 M Street, NW Suite 501		Transaction ID: 0033649
City State Zip Code Washington DC 20036-4507	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <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. Aegon USA, Inc. PAC		Date of Receipt M M / D D / Y Y Y Y Y 07 / 20 / 2007
Mailing Address 1111 North Charles Street MS #17		Transaction ID: 0033650
City State Zip Code Baltimore MD 21201	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. American Bankers Association PAC		Date of Receipt M M / D D / Y Y Y Y Y 07 / 24 / 2007
Mailing Address 1120 Connecticut Ave, NW		Transaction ID: 0033669
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00004275		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 6000.00	

SUBTOTAL of Receipts This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 98
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. American Bankers Association PAC		Date of Receipt M M / D D / Y Y Y Y Y 07 / 24 / 2007
Mailing Address 1120 Connecticut Ave, NW		Transaction ID: 0033670
City Washington State DC Zip Code 20036	FEC ID number of contributing federal political committee. C C00004275	Amount of Each Receipt this Period -1000.00
Name of Employer Occupation	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] REDESIGNATION
Election Cycle-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Sonnenschein PAC		Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2007
Mailing Address 1301 K Street NW Suite 600 East Tower		Transaction ID: 0033662
City Washington State DC Zip Code 20005	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Thelen Reid Brown Raysman & Steiner PAC		Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2007
Mailing Address 701 8th Street NW Ste 800		Transaction ID: 0033667
City Washington State DC Zip Code 20001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 / 98
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Buchanon Ingersoll & Rooney		Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2007
Mailing Address 1700 K Street, NW, Suite 300		Transaction ID: 0033668
City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. American Bankers Association PAC		Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2007
Mailing Address 1120 Connecticut Ave, NW		Transaction ID: 0033671
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00004275		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] REDESIGNATION
Name of Employer	Occupation	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 6000.00	

Full Name (Last, First, Middle Initial) C. American Seniors Housing Association		Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2007
Mailing Address 5100 Wisconsin Avenue, NW Suite 307		Transaction ID: 0033672
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 / 98
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Aetna Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2007
Mailing Address 1331 F Street NW Suite 450		Transaction ID: 0033673
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. Rockwell Collins Good Government Committee		Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2007
Mailing Address 1300 Wilson Blvd Suite 200		Transaction ID: 0033674
City Arlington	State VA	Zip Code 22209-2307
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. REITPAC/Natl Assoc. of Real Estate Investment Trust PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2007
Mailing Address 1875 Eye Street, NW Suite 600		Transaction ID: 0033677
City Washington	State DC	Zip Code 20006-5413
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 40 / 98
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
Goldman Sachs PAC

Mailing Address 101 Constitution Ave, NW
Suite 1000E

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 25 / 2007

Transaction ID: 0033678

Amount of Each Receipt this Period
2500.00

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

B. Full Name (Last, First, Middle Initial)
Ernst & Young PAC

Mailing Address 1225 Connecticut Ave, NW
Suite 600

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 26 / 2007

Transaction ID: 0033688

Amount of Each Receipt this Period
1500.00

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

C. Full Name (Last, First, Middle Initial)
USAA Life Insurance Company

Mailing Address 9800 Fredericksburg Road

City San Antonio State TX Zip Code 78288

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 26 / 2007

Transaction ID: 0033689

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **5000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 98
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial) KPMG PAC (Peat Marwick/PAC)		Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2007
Mailing Address PO Box 18254		Transaction ID: 0033690
City State Zip Code Washington DC 20036-9998	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 1500.00	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1500.00	

B. Full Name (Last, First, Middle Initial) Credit Suisse First Boston Government Action Fund		Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2007
Mailing Address 1201 F Street, NW Suite 450		Transaction ID: 0033691
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 2500.00	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2500.00	

C. Full Name (Last, First, Middle Initial) NSSGA ROCKPAC		Date of Receipt M M / D D / Y Y Y Y 08 / 03 / 2007
Mailing Address 1605 King Street		Transaction ID: 0033696
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 1000.00	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1000.00	

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 98
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. American Society Of Association Executives PAC/A-PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 7
Mailing Address 1575 Eye St, NW The ASAE Building		Transaction ID: 0033697
City Washington State DC Zip Code 20005-1103	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Aircraft Owners & Pilots Association PAC(AOPA)		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 7
Mailing Address 601 Pennsylvania Ave, NW Suite 875, South Bldg.		Transaction ID: 0033698
City Washington State DC Zip Code 20004	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00	

Full Name (Last, First, Middle Initial) C. Honeywell International PAC/HIPAC		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 7
Mailing Address 101 Constitution Ave, NW Suite 500 West		Transaction ID: 0033699
City Washington State DC Zip Code 20001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 / 98
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Raytheon PAC		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7
Mailing Address 1100 Wilson Blvd Suite 1500		Transaction ID: 0033700
City Arlington State VA Zip Code 22209-2297	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. Solvay Pharmaceuticals		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 7
Mailing Address 901 Sawyer Road		Transaction ID: 0033707
City Marietta State GA Zip Code 30062	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) C. Deloitte & Touche Federal PAC		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 0 7
Mailing Address PO Box 365		Transaction ID: 0033736
City Washington State DC Zip Code 20044-0365	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 44 / 98
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. AICPA/American Institute of Certified Public Accountants PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 2 / 2 0 0 7
Mailing Address 1455 Pennsylvania Ave, NW Suite 400		Transaction ID: 0033737
City Washington	State DC	Zip Code 20004-1081
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. UBS Americas Fund for Better Government		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 2 / 2 0 0 7
Mailing Address 1501 K Street, NW Suite 1100		Transaction ID: 0033738
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Texas Bankers Association PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 7
Mailing Address 203 West 10th Street		Transaction ID: 0033833
City Austin	State TX	Zip Code 78701-2388
FEC ID number of contributing federal political committee. C C00196444		Amount of Each Receipt this Period 2300.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional)	▶	6300.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 98
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) II-VI Incorporated PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2007	
Mailing Address 375 Saxonburg Blvd		Transaction ID: 0033835	
City State Zip Code Saxonburg PA 16056	Amount of Each Receipt this Period 600.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) Applied Signal Technology		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2007	
Mailing Address 306 Sentinel Drive, Suite 100		Transaction ID: 0033843	
City State Zip Code Annapolis Junction MD 20701	Amount of Each Receipt this Period 2300.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 2300.00		

Full Name (Last, First, Middle Initial) Celanese Corp. PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2007	
Mailing Address 1601 West LBJ Freeway		Transaction ID: 0033845	
City State Zip Code Dallas TX 75234	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	3900.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 46 / 98
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. First Command PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2007	
Mailing Address 4100 South Hulen Street		Transaction ID: 0033854	
City State Zip Code Fort Worth TX 76109	Amount of Each Receipt this Period 1200.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1200.00		

Full Name (Last, First, Middle Initial) B. Cardinal Health Companies-PAC(CHCPAC)		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2007	
Mailing Address 7000 Cardinal Place		Transaction ID: 0033858	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. US Oncology, Inc. Good Government Committee		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2007	
Mailing Address 700 13th, NW Suite 525		Transaction ID: 0033859	
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) ▶	3200.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 47 / 98
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Renal Physicians Association PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2007
Mailing Address 1700 Rockville Pike Suite 220		Transaction ID: 0033860
City State Zip Code Rockville MD 20852	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00409391		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Kinetic Concepts, Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2007
Mailing Address Kinetic Concepts PO Box 659508		Transaction ID: 0033861
City State Zip Code San Antonio TX 78265-9508	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Comcast Corporation Political Action Committee		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2007
Mailing Address 1500 Market Street 33rd Floor East Tower		Transaction ID: 0033862
City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	65400.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 48 / 98
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
Fidelity Investments

Mailing Address PO Box 770001

City State Zip Code
Cincinnati OH 25277-0003

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
21739.85

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2007

Transaction ID: 0033760

Amount of Each Receipt this Period
2425.28

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

B. Full Name (Last, First, Middle Initial)
Legacy Bank of Texas

Mailing Address Box 869111

City State Zip Code
Plano TX 75080-9111

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
424.37

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2007

Transaction ID: 0033973

Amount of Each Receipt this Period
69.80

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

C. Full Name (Last, First, Middle Initial)
Fidelity Investments

Mailing Address PO Box 770001

City State Zip Code
Cincinnati OH 25277-0003

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
24203.35

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2007

Transaction ID: 0033713

Amount of Each Receipt this Period
2463.50

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

SUBTOTAL of Receipts This Page (optional)	4958.58
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 98
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
Legacy Bank of Texas

Mailing Address Box 869111

City State Zip Code
Plano TX 75080-9111

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
514.42

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 03 / 2007

Transaction ID: 0033919

Amount of Each Receipt this Period
90.05

INTEREST INCOME

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

B. Full Name (Last, First, Middle Initial)
Legacy Bank of Texas

Mailing Address Box 869111

City State Zip Code
Plano TX 75080-9111

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
586.55

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2007

Transaction ID: 0033920

Amount of Each Receipt this Period
72.13

INTEREST INCOME

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

SUBTOTAL of Receipts This Page (optional)	162.18
TOTAL This Period (last page this line number only)	5120.76

**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 50 / 98

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Rightclick Strategies, LLC		Transaction ID: 0033950 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 7
Mailing Address 1140 Conn Ave, NW Ste 610		Amount of Each Disbursement this Period 116.70 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20036	001 Category/ Type	
Purpose of Disbursement Fee For Online Deposit Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Direct TV		Transaction ID: 0033518 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 4 / 2 0 0 7
Mailing Address PO Box 92600		Amount of Each Disbursement this Period 96.63 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Los Angeles State CA Zip Code 90009	001 Category/ Type	
Purpose of Disbursement Office Expense Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Legacy Bank of Texas		Transaction ID: 0033520 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 4 / 2 0 0 7
Mailing Address Box 869111		Amount of Each Disbursement this Period 2021.92 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Plano State TX Zip Code 75080-9111	001 Category/ Type	
Purpose of Disbursement Taxes Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	2235.25
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. USAA Federal Savings Bank		Transaction ID: 0033573 Date of Disbursement 07 / 10 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 1509.40
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Airfare Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ITEMIZATION BELOW

Full Name (Last, First, Middle Initial) B. American Airlines		Transaction ID: 0033573-001 Date of Disbursement 07 / 10 / 2007
Mailing Address PO Box 61961		Amount of Each Disbursement this Period 620.80
City DFW Airport State TX Zip Code 75261-9616	Purpose of Disbursement Airfare Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. American Airlines		Transaction ID: 0033573-002 Date of Disbursement 07 / 10 / 2007
Mailing Address PO Box 61961		Amount of Each Disbursement this Period 417.80
City DFW Airport State TX Zip Code 75261-9616	Purpose of Disbursement Airfare Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	1509.40
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. American Airlines

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 61961

City DFW Airport State TX Zip Code 75261-9616

Purpose of Disbursement Airfare
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0033573-003
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

[MEMO ITEM]
MEMO

B. USAA Federal Savings Bank

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 98070

City Louisville State KY Zip Code 40298-8070

Purpose of Disbursement Campaign Expenses
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0033577
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

ITEMIZATION BELOW

C. Kevin Brannon

Full Name (Last, First, Middle Initial)
Mailing Address 1911 Lorraine Avenue

City Allen State TX Zip Code 75002

Purpose of Disbursement Consulting-Campaign
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0033597
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. USAA Federal Savings Bank		Transaction ID: 0033575 Date of Disbursement 07 / 10 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 105.65
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Computer Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ITEMIZATION BELOW

Full Name (Last, First, Middle Initial) B. America On Line Service		Transaction ID: 0033575-001 Date of Disbursement 07 / 10 / 2007
Mailing Address PO Box 3887		Amount of Each Disbursement this Period 24.95
City Jacksonville State FL Zip Code 32226-8640	Purpose of Disbursement Computer Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. America On Line Service		Transaction ID: 0033575-002 Date of Disbursement 07 / 10 / 2007
Mailing Address PO Box 3887		Amount of Each Disbursement this Period 25.90
City Jacksonville State FL Zip Code 32226-8640	Purpose of Disbursement Computer Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	105.65
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. America On Line Service		Transaction ID: 0033575-004 Date of Disbursement 07 / 10 / 2007
Mailing Address PO Box 3887		Amount of Each Disbursement this Period 24.95
City Jacksonville State FL Zip Code 32226-8640	Purpose of Disbursement Computer Expenses Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Frisco Chamber of Commerce		Transaction ID: 0033596 Date of Disbursement 07 / 10 / 2007
Mailing Address 6843 Main		Amount of Each Disbursement this Period 500.00
City Frisco State TX Zip Code 75034	Purpose of Disbursement Donation Contributions Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Rightclick Strategies, LLC		Transaction ID: 0033931 Date of Disbursement 07 / 10 / 2007
Mailing Address 1140 Conn Ave, NW Ste 610		Amount of Each Disbursement this Period 20.44
City Washington State DC Zip Code 20036	Purpose of Disbursement Fee For Online Deposit Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	520.44
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. USAA Federal Savings Bank		Transaction ID: 0033578 Date of Disbursement 07 / 10 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 14.59 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Louisville State KY Zip Code 40298-8070	ITEMIZATION BELOW	
Purpose of Disbursement Food for Volunteers		001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. USAA Federal Savings Bank		Transaction ID: 0033574 Date of Disbursement 07 / 10 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 1096.74 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Louisville State KY Zip Code 40298-8070	ITEMIZATION BELOW	
Purpose of Disbursement Office Expense		001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. OfficeMax		Transaction ID: 0033574-002 Date of Disbursement 07 / 10 / 2007
Mailing Address 1201 North Central Expressway		Amount of Each Disbursement this Period 51.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Plano State TX Zip Code 75024	[MEMO ITEM] MEMO	
Purpose of Disbursement Office Expense		001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1111.33
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Texas A&M University Press		Transaction ID: 0033574-003 Date of Disbursement 07 / 10 / 2007
Mailing Address Lewis St, 4354 TAMUS, Lindsey		Amount of Each Disbursement this Period 955.15 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City College Station State TX Zip Code 77843-4354	Purpose of Disbursement Office Expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. USAA Federal Savings Bank		Transaction ID: 0033579 Date of Disbursement 07 / 10 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 210.09 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Political Dinner Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	ITEMIZATION BELOW

Full Name (Last, First, Middle Initial) C. USAA Federal Savings Bank		Transaction ID: 0033576 Date of Disbursement 07 / 10 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 292.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Postage Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	ITEMIZATION BELOW

SUBTOTAL of Disbursements This Page (optional) ▶	502.82
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. US Post Office		Transaction ID: 0033576-001 Date of Disbursement 07 / 10 / 2007	
Mailing Address Downtown Sta, 1112-18th St		Amount of Each Disbursement this Period 164.00	
City Plano State TX Zip Code 75074	Purpose of Disbursement Postage	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001	[MEMO ITEM] MEMO	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Federal Express		Transaction ID: 0033576-002 Date of Disbursement 07 / 10 / 2007	
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 40.00	
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Postage	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001	[MEMO ITEM] MEMO	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Federal Express		Transaction ID: 0033576-003 Date of Disbursement 07 / 10 / 2007	
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 10.07	
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Postage	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001	[MEMO ITEM] MEMO	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 0033576-004 Date of Disbursement 07 / 10 / 2007 Amount of Each Disbursement this Period 10.07 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
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B. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 0033576-005 Date of Disbursement 07 / 10 / 2007 Amount of Each Disbursement this Period 52.56 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
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C. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 0033576-006 Date of Disbursement 07 / 10 / 2007 Amount of Each Disbursement this Period 16.03 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Mary M. Barry		Transaction ID: 0033598 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 0 / 2 0 0 7
Mailing Address 14000 Noel Rd, #502		Amount of Each Disbursement this Period 1324.37
City Dallas State TX Zip Code 75240	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Wages-Campaign Office Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Sue Renshaw		Transaction ID: 0033599 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 0 / 2 0 0 7
Mailing Address 2016 Meadowcreek Dr		Amount of Each Disbursement this Period 1013.43
City Plano State TX Zip Code 75074	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Wages-Campaign Office Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mary M. Barry		Transaction ID: 0033988 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 7
Mailing Address 14000 Noel Rd, #502		Amount of Each Disbursement this Period 3123.90
City Dallas State TX Zip Code 75240	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Wages-Campaign Office Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5461.70
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Rightclick Strategies, LLC		Transaction ID: 0033924 Date of Disbursement 07 / 17 / 2007	
Mailing Address 1140 Conn Ave, NW Ste 610		Amount of Each Disbursement this Period 22.87	
City Washington State DC Zip Code 20036	Purpose of Disbursement Fee For Online Deposit Candidate Name	001 Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. US Post Office		Transaction ID: 0033635 Date of Disbursement 07 / 17 / 2007	
Mailing Address Downtown Sta, 1112-18th St		Amount of Each Disbursement this Period 168.00	
City Plano State TX Zip Code 75074	Purpose of Disbursement Post Office Box Candidate Name	001 Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mary M. Barry		Transaction ID: 0033658 Date of Disbursement 07 / 23 / 2007	
Mailing Address 14000 Noel Rd, #502		Amount of Each Disbursement this Period 32.65	
City Dallas State TX Zip Code 75240	Purpose of Disbursement US Flags Candidate Name	001 Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	223.52
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Mary M. Barry		Transaction ID: 0033659 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 0 7
Mailing Address 14000 Noel Rd, #502		Amount of Each Disbursement this Period 39.00
City Dallas State TX Zip Code 75240	Purpose of Disbursement Mileage Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Verizon Southwest		Transaction ID: 0033660 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 0 7
Mailing Address PO Box 920041		Amount of Each Disbursement this Period 640.18
City Dallas State TX Zip Code 75392-0041	Purpose of Disbursement Telephone Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Plano Parkway Self Storage		Transaction ID: 0033655 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 0 7
Mailing Address 1100 E Plano Parkway		Amount of Each Disbursement this Period 130.00
City Plano State TX Zip Code 75074	Purpose of Disbursement Office/Warehouse Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	809.18
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Carlisle Building LLC		Transaction ID: 0033661 Date of Disbursement 07 / 23 / 2007
Mailing Address 1611 Ave K		Amount of Each Disbursement this Period 1130.00
City Plano State TX Zip Code 75074	Purpose of Disbursement Office/Warehouse Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Sue Renshaw		Transaction ID: 0033656 Date of Disbursement 07 / 23 / 2007
Mailing Address 2016 Meadowcreek Dr		Amount of Each Disbursement this Period 1013.43
City Plano State TX Zip Code 75074	Purpose of Disbursement Wages-Campaign Office Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Mary M. Barry		Transaction ID: 0033657 Date of Disbursement 07 / 23 / 2007
Mailing Address 14000 Noel Rd, #502		Amount of Each Disbursement this Period 1324.37
City Dallas State TX Zip Code 75240	Purpose of Disbursement Wages-Campaign Office Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	3467.80
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Rightclick Strategies, LLC		Transaction ID: 0033990 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 7
Mailing Address 1140 Conn Ave, NW Ste 610		Amount of Each Disbursement this Period 25.62
City Washington State DC Zip Code 20036	Purpose of Disbursement Fee For Online Deposit Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: 0033680 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 7
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 273.17
City Dallas State TX Zip Code 75266-0108	Purpose of Disbursement Telephone Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Victoria H. Tollette, CPA		Transaction ID: 0033692 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 7
Mailing Address 3700 Stockport Drive		Amount of Each Disbursement this Period 748.00
City Plano State TX Zip Code 75025	Purpose of Disbursement Consulting-Campaign Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1046.79
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Rightclick Strategies, LLC		Transaction ID: 0033991 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 7
Mailing Address 1140 Conn Ave, NW Ste 610		Amount of Each Disbursement this Period 3.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20036		
Purpose of Disbursement Fee For Online Deposit Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Valentine Direct Markering		Transaction ID: 0033693 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 7
Mailing Address 5415 Maple Ave, Ste 230		Amount of Each Disbursement this Period 323.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Dallas State TX Zip Code 75235		
Purpose of Disbursement Printing/Paper Stock Candidate Name	006 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Frisco Area Republican Women		Transaction ID: 0033694 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 7
Mailing Address 15360 Lookout Point		Amount of Each Disbursement this Period 240.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Frisco State TX Zip Code 75035		
Purpose of Disbursement Republican Club Luncheons Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	566.86
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. USAA Federal Savings Bank		Transaction ID: 0033729 Date of Disbursement 08 / 07 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 1356.40
City Louisville State KY Zip Code 40298-8070	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Airfare Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	ITEMIZATION BELOW

Full Name (Last, First, Middle Initial) B. American Airlines		Transaction ID: 0033729-001 Date of Disbursement 08 / 07 / 2007
Mailing Address PO Box 61961		Amount of Each Disbursement this Period 458.80
City DFW Airport State TX Zip Code 75261-9616	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Airfare Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. American Airlines		Transaction ID: 0033729-002 Date of Disbursement 08 / 07 / 2007
Mailing Address PO Box 61961		Amount of Each Disbursement this Period 448.80
City DFW Airport State TX Zip Code 75261-9616	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Airfare Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	1356.40
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. American Airlines		Transaction ID: 0033729-003 Date of Disbursement 08 / 07 / 2007
Mailing Address PO Box 61961		Amount of Each Disbursement this Period 448.80
City DFW Airport State TX Zip Code 75261-9616	Purpose of Disbursement Airfare Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. USAA Federal Savings Bank		Transaction ID: 0033728 Date of Disbursement 08 / 07 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 2500.00
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Campaign Medallion Expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ITEMIZATION BELOW

Full Name (Last, First, Middle Initial) C. Les Engravers. Inc.		Transaction ID: 0033728-001 Date of Disbursement 08 / 07 / 2007
Mailing Address 300 South Cleveland Street		Amount of Each Disbursement this Period 2500.00
City Arlington State VA Zip Code 22204	Purpose of Disbursement Campaign Medallion Expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Vita Levatino		Transaction ID: 0033717 Date of Disbursement 08 / 07 / 2007
Mailing Address 2501 Wisconsin Avenue NW # 304		Amount of Each Disbursement this Period 3510.00
City Washington State DC Zip Code 20007	Purpose of Disbursement Consulting-Campaign Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Kevin Brannon		Transaction ID: 0033987 Date of Disbursement 08 / 07 / 2007
Mailing Address 1911 Lorraine Avenue		Amount of Each Disbursement this Period 2000.00
City Allen State TX Zip Code 75002	Purpose of Disbursement Consulting-Campaign Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. USAA Federal Savings Bank		Transaction ID: 0033730 Date of Disbursement 08 / 07 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 80.70
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Computer Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ITEMIZATION BELOW

SUBTOTAL of Disbursements This Page (optional) ▶	5590.70
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. America On Line Service		Transaction ID: 0033730-001 Date of Disbursement																					
Mailing Address PO Box 3887		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	7		2	0	0	7														
City Jacksonville	State FL	Zip Code 32226-8640																					
Purpose of Disbursement Computer Expenses		<table border="1"> <tr> <td>001</td> </tr> </table>		001																			
001																							
Candidate Name		Category/Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:	Amount of Each Disbursement this Period 25.90																						
		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO																					

Full Name (Last, First, Middle Initial) B. America On Line Service		Transaction ID: 0033730-003 Date of Disbursement																					
Mailing Address PO Box 3887		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	7		2	0	0	7														
City Jacksonville	State FL	Zip Code 32226-8640																					
Purpose of Disbursement Computer Expenses		<table border="1"> <tr> <td>001</td> </tr> </table>		001																			
001																							
Candidate Name		Category/Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:	Amount of Each Disbursement this Period 24.95																						
		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO																					

Full Name (Last, First, Middle Initial) C. USAA Federal Savings Bank		Transaction ID: 0033731 Date of Disbursement																					
Mailing Address PO Box 98070		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	7		2	0	0	7														
City Louisville	State KY	Zip Code 40298-8070																					
Purpose of Disbursement Campaign Travel-Lodging		<table border="1"> <tr> <td>002</td> </tr> </table>		002																			
002																							
Candidate Name		Category/Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:	Amount of Each Disbursement this Period 714.56																						
		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ITEMIZATION BELOW																					

SUBTOTAL of Disbursements This Page (optional)	▶	714.56
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Gaylord Texan, Hotel		Transaction ID: 0033731-001 Date of Disbursement 08 / 07 / 2007	
Mailing Address 1501 Gaylord Trail		Amount of Each Disbursement this Period 357.28	
City Grapevine State TX Zip Code 76051	Purpose of Disbursement Campaign Travel-Lodging Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) B. Gaylord Texan, Hotel		Transaction ID: 0033731-002 Date of Disbursement 08 / 07 / 2007	
Mailing Address 1501 Gaylord Trail		Amount of Each Disbursement this Period 357.28	
City Grapevine State TX Zip Code 76051	Purpose of Disbursement Campaign Travel-Lodging Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) C. Rightclick Strategies, LLC		Transaction ID: 0033955 Date of Disbursement 08 / 07 / 2007	
Mailing Address 1140 Conn Ave, NW Ste 610		Amount of Each Disbursement this Period 1.87	
City Washington State DC Zip Code 20036	Purpose of Disbursement Fee For Online Deposit Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

SUBTOTAL of Disbursements This Page (optional) ▶	1.87
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Mary M. Barry		Transaction ID: 0033714 Date of Disbursement 08 / 07 / 2007	
Mailing Address 14000 Noel Rd, #502		Amount of Each Disbursement this Period 375.05	
City Dallas State TX Zip Code 75240	Purpose of Disbursement Insurance Candidate Name	001 Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. USAA Federal Savings Bank		Transaction ID: 0033718 Date of Disbursement 08 / 07 / 2007	
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 109.08	
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Office Expense Candidate Name	001 Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	ITEMIZATION BELOW	

Full Name (Last, First, Middle Initial) C. USAA Federal Savings Bank		Transaction ID: 0033719 Date of Disbursement 08 / 07 / 2007	
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 72.13	
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Political Dinner Candidate Name	001 Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	ITEMIZATION BELOW	

SUBTOTAL of Disbursements This Page (optional) ▶	556.26
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. USAA Federal Savings Bank		Transaction ID: 0033727 Date of Disbursement 08 / 07 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 421.67
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ITEMIZATION BELOW

Full Name (Last, First, Middle Initial) B. Federal Express		Transaction ID: 0033727-001 Date of Disbursement 08 / 07 / 2007
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 22.16
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Federal Express		Transaction ID: 0033727-002 Date of Disbursement 08 / 07 / 2007
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 15.63
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	421.67
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. US Post Office		Transaction ID: 0033727-003 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 7
Mailing Address Downtown Sta, 1112-18th St		Amount of Each Disbursement this Period 123.00
City Plano State TX Zip Code 75074	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Postage Candidate Name	001 Category/Type	[MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Federal Express		Transaction ID: 0033727-004 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 7
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 10.24
City Memphis State TN Zip Code 38101-1140	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Postage Candidate Name	001 Category/Type	[MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. US Post Office		Transaction ID: 0033727-005 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 7
Mailing Address Downtown Sta, 1112-18th St		Amount of Each Disbursement this Period 205.00
City Plano State TX Zip Code 75074	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Postage Candidate Name	001 Category/Type	[MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 0033727-006 Date of Disbursement 08 / 07 / 2007 Amount of Each Disbursement this Period 20.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
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B. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 0033727-007 Date of Disbursement 08 / 07 / 2007 Amount of Each Disbursement this Period 24.65 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
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C. Mary M. Barry Full Name (Last, First, Middle Initial) Mailing Address 14000 Noel Rd, #502 City Dallas State TX Zip Code 75240 Purpose of Disbursement Wages-Campaign Office Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 0033715 Date of Disbursement 08 / 07 / 2007 Amount of Each Disbursement this Period 1324.37 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SUBTOTAL of Disbursements This Page (optional) ▶	1324.37
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Sue Renshaw		Transaction ID: 0033716 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 7
Mailing Address 2016 Meadowcreek Dr		Amount of Each Disbursement this Period 1013.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Plano State TX Zip Code 75074		
Purpose of Disbursement Wages-Campaign Office Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Plano Parkway Self Storage		Transaction ID: 0033733 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 7
Mailing Address 1100 E Plano Parkway		Amount of Each Disbursement this Period 130.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Plano State TX Zip Code 75074		
Purpose of Disbursement Office/Warehouse Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carlisle Building LLC		Transaction ID: 0033734 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 7
Mailing Address 1611 Ave K		Amount of Each Disbursement this Period 1130.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Plano State TX Zip Code 75074		
Purpose of Disbursement Office/Warehouse Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2273.43
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Rightclick Strategies, LLC		Transaction ID: 0033956 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 7
Mailing Address 1140 Conn Ave, NW Ste 610		Amount of Each Disbursement this Period 4.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20036	Category/ Type 001	
Purpose of Disbursement Fee For Online Deposit Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Impressions Marketing		Transaction ID: 0033765 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 7
Mailing Address 1809 Avenue K		Amount of Each Disbursement this Period 742.63 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Plano State TX Zip Code 75074	Category/ Type 003	
Purpose of Disbursement Fundraiser Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Impressions Marketing		Transaction ID: 0033766 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 7
Mailing Address 1809 Avenue K		Amount of Each Disbursement this Period 592.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Plano State TX Zip Code 75074	Category/ Type 003	
Purpose of Disbursement Fundraiser Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1339.04
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Mary M. Barry		Transaction ID: 0033764 Date of Disbursement 08 / 29 / 2007
Mailing Address 14000 Noel Rd, #502		Amount of Each Disbursement this Period 375.05 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Dallas State TX Zip Code 75240	001 Category/ Type	
Purpose of Disbursement Insurance Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		
Full Name (Last, First, Middle Initial) B. Copynet Office Systems, Inc.		Transaction ID: 0033768 Date of Disbursement 08 / 29 / 2007
Mailing Address 1301 Ave K		Amount of Each Disbursement this Period 228.04 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Plano State TX Zip Code 75074	001 Category/ Type	
Purpose of Disbursement Office Expense Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		
Full Name (Last, First, Middle Initial) C. Direct TV		Transaction ID: 0033769 Date of Disbursement 08 / 29 / 2007
Mailing Address PO Box 92600		Amount of Each Disbursement this Period 96.63 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Los Angeles State CA Zip Code 90009	001 Category/ Type	
Purpose of Disbursement Office Expense Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶

699.72

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: 0033767 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 7
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 133.09
City Dallas State TX Zip Code 75266-0108	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Telephone Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Verizon Southwest		Transaction ID: 0033770 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 7
Mailing Address PO Box 920041		Amount of Each Disbursement this Period 639.00
City Dallas State TX Zip Code 75392-0041	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Telephone Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Victoria H. Tollette, CPA		Transaction ID: 0033782 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 7
Mailing Address 3700 Stockport Drive		Amount of Each Disbursement this Period 1173.00
City Plano State TX Zip Code 75025	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Consulting-Campaign Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1945.09
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial) Kevin Brannon		Transaction ID: 0033783 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 7	
Mailing Address 1911 Lorraine Avenue		Amount of Each Disbursement this Period 2000.00	
City State Zip Code Allen TX 75002	Purpose of Disbursement Consulting-Campaign	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
B. Full Name (Last, First, Middle Initial) Direct TV		Transaction ID: 0033781 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 7	
Mailing Address PO Box 92600		Amount of Each Disbursement this Period 95.78	
City State Zip Code Los Angeles CA 90009	Purpose of Disbursement Office Expense	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
C. Full Name (Last, First, Middle Initial) Legacy Bank of Texas		Transaction ID: 0033784 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 7	
Mailing Address Box 869111		Amount of Each Disbursement this Period 2021.88	
City State Zip Code Plano TX 75080-9111	Purpose of Disbursement Taxes	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

SUBTOTAL of Disbursements This Page (optional) ►

4117.66

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Sue Renshaw		Transaction ID: 0033779 Date of Disbursement 09 / 04 / 2007
Mailing Address 2016 Meadowcreek Dr		Amount of Each Disbursement this Period 1013.43
City Plano State TX Zip Code 75074	Purpose of Disbursement Wages-Campaign Office Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Mary M. Barry		Transaction ID: 0033780 Date of Disbursement 09 / 04 / 2007
Mailing Address 14000 Noel Rd, #502		Amount of Each Disbursement this Period 1324.36
City Dallas State TX Zip Code 75240	Purpose of Disbursement Wages-Campaign Office Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. USAA Federal Savings Bank		Transaction ID: 0033777 Date of Disbursement 09 / 05 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 59.73
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Computer Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ITEMIZATION BELOW

SUBTOTAL of Disbursements This Page (optional) ▶	2397.52
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. America On Line Service		Transaction ID: 0033777-001 Date of Disbursement 09 / 05 / 2007
Mailing Address PO Box 3887		Amount of Each Disbursement this Period 25.90
City Jacksonville State FL Zip Code 32226-8640	Purpose of Disbursement Computer Expenses Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. USAA Federal Savings Bank		Transaction ID: 0033773 Date of Disbursement 09 / 05 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 54.14
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Campaign Travel-Lodging Candidate Name Category/Type: 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ITEMIZATION BELOW

Full Name (Last, First, Middle Initial) C. Gaylord Texan, Hotel		Transaction ID: 0033773-001 Date of Disbursement 09 / 05 / 2007
Mailing Address 1501 Gaylord Trail		Amount of Each Disbursement this Period 32.48
City Grapevine State TX Zip Code 76051	Purpose of Disbursement Campaign Travel-Lodging Candidate Name Category/Type: 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	54.14
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Gaylord Texan, Hotel		Transaction ID: 0033773-002 Date of Disbursement 09 / 05 / 2007	
Mailing Address 1501 Gaylord Trail		Amount of Each Disbursement this Period 21.66	
City Grapevine State TX Zip Code 76051	Purpose of Disbursement Campaign Travel-Lodging Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO	

Full Name (Last, First, Middle Initial) B. USAA Federal Savings Bank		Transaction ID: 0033775 Date of Disbursement 09 / 05 / 2007	
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 120.20	
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Donation Gift Candidate Name	012 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ITEMIZATION BELOW	

Full Name (Last, First, Middle Initial) C. Rightclick Strategies, LLC		Transaction ID: 0033954 Date of Disbursement 09 / 05 / 2007	
Mailing Address 1140 Conn Ave, NW Ste 610		Amount of Each Disbursement this Period 44.75	
City Washington State DC Zip Code 20036	Purpose of Disbursement Fee For Online Deposit Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

SUBTOTAL of Disbursements This Page (optional) ▶	164.95
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. USAA Federal Savings Bank		Transaction ID: 0033772 Date of Disbursement 09 / 05 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 51.82
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Flowers Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ITEMIZATION BELOW

Full Name (Last, First, Middle Initial) B. USAA Federal Savings Bank		Transaction ID: 0033778 Date of Disbursement 09 / 05 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 113.64
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Office Expense Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ITEMIZATION BELOW

Full Name (Last, First, Middle Initial) C. USAA Federal Savings Bank		Transaction ID: 0033774 Date of Disbursement 09 / 05 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 13.63
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Photos/Supplies Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ITEMIZATION BELOW

SUBTOTAL of Disbursements This Page (optional) ▶	179.09
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. USAA Federal Savings Bank		Transaction ID: 0033776 Date of Disbursement 09 / 05 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 219.76
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Political Dinner Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ITEMIZATION BELOW

Full Name (Last, First, Middle Initial) B. USAA Federal Savings Bank		Transaction ID: 0033771 Date of Disbursement 09 / 05 / 2007
Mailing Address PO Box 98070		Amount of Each Disbursement this Period 557.54
City Louisville State KY Zip Code 40298-8070	Purpose of Disbursement Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ITEMIZATION BELOW

Full Name (Last, First, Middle Initial) C. Federal Express		Transaction ID: 0033771-001 Date of Disbursement 09 / 05 / 2007
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 10.07
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	777.30
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

<p>A. Federal Express</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 1140</p> <p>City Memphis State TN Zip Code 38101-1140</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 0033771-002</p> <p>Date of Disbursement</p> <p>09 / 05 / 2007</p> <p>Amount of Each Disbursement this Period</p> <p>10.07</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p>001</p>

<p>B. Federal Express</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 1140</p> <p>City Memphis State TN Zip Code 38101-1140</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 0033771-003</p> <p>Date of Disbursement</p> <p>09 / 05 / 2007</p> <p>Amount of Each Disbursement this Period</p> <p>37.89</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p>001</p>

<p>C. US Post Office</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address Downtown Sta, 1112-18th St</p> <p>City Plano State TX Zip Code 75074</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 0033771-004</p> <p>Date of Disbursement</p> <p>09 / 05 / 2007</p> <p>Amount of Each Disbursement this Period</p> <p>246.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p>001</p>

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Federal Express		Transaction ID: 0033771-005 Date of Disbursement 09 / 05 / 2007
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 20.99
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Postage Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Federal Express		Transaction ID: 0033771-006 Date of Disbursement 09 / 05 / 2007
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 20.99
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Postage Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) C. Federal Express		Transaction ID: 0033771-007 Date of Disbursement 09 / 05 / 2007
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 12.81
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Postage Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 0033771-008 Date of Disbursement 09 / 05 / 2007 Amount of Each Disbursement this Period 10.07 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
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B. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 0033771-009 Date of Disbursement 09 / 05 / 2007 Amount of Each Disbursement this Period 33.39 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
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C. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 0033771-010 Date of Disbursement 09 / 05 / 2007 Amount of Each Disbursement this Period 5.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. US Post Office

Full Name (Last, First, Middle Initial)

Mailing Address Downtown Sta, 1112-18th St

City Plano State TX Zip Code 75074

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: 0033771-011
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

[MEMO ITEM]
MEMO

B. Federal Express

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1140

City Memphis State TN Zip Code 38101-1140

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: 0033771-012
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

[MEMO ITEM]
MEMO

C. American Legion

Full Name (Last, First, Middle Initial)

Mailing Address 2719 Whispering Trail

City Arlington State TX Zip Code 76013

Purpose of Disbursement Advertising-Print

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: 0033820
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Vita Levatino		Transaction ID: 0033822 Date of Disbursement 09 / 12 / 2007
Mailing Address 2501 Wisconsin Avenue NW # 304		Amount of Each Disbursement this Period 7396.25
City Washington State DC Zip Code 20007	Purpose of Disbursement Consulting-Campaign Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Verizon Southwest		Transaction ID: 0033821 Date of Disbursement 09 / 12 / 2007
Mailing Address PO Box 920041		Amount of Each Disbursement this Period 639.00
City Dallas State TX Zip Code 75392-0041	Purpose of Disbursement Telephone Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Valentine Direct Markering		Transaction ID: 0033818 Date of Disbursement 09 / 12 / 2007
Mailing Address 5415 Maple Ave, Ste 230		Amount of Each Disbursement this Period 947.03
City Dallas State TX Zip Code 75235	Purpose of Disbursement Printing/Paper Stock Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	8982.28
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Mary M. Barry		Transaction ID: 0033826 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2007
Mailing Address 14000 Noel Rd, #502		Amount of Each Disbursement this Period 18.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Dallas State TX Zip Code 75240	Purpose of Disbursement US Flags Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mary M. Barry		Transaction ID: 0033825 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2007
Mailing Address 14000 Noel Rd, #502		Amount of Each Disbursement this Period 111.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Dallas State TX Zip Code 75240	Purpose of Disbursement Mileage Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sue Renshaw		Transaction ID: 0033823 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2007
Mailing Address 2016 Meadowcreek Dr		Amount of Each Disbursement this Period 1013.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Plano State TX Zip Code 75074	Purpose of Disbursement Wages-Campaign Office Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1142.78
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Mary M. Barry		Transaction ID: 0033824 Date of Disbursement 09 / 18 / 2007
Mailing Address 14000 Noel Rd, #502		Amount of Each Disbursement this Period 1324.36
City Dallas State TX Zip Code 75240	Purpose of Disbursement Wages-Campaign Office Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Texas Federation of Republican Women		Transaction ID: 0033846 Date of Disbursement 09 / 26 / 2007
Mailing Address 900 Congress Avenue, Ste 300		Amount of Each Disbursement this Period 150.00
City Austin State TX Zip Code 78701	Purpose of Disbursement Texas State Convention Dues Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Duncan D. Hunter for Congress		Transaction ID: 0033850 Date of Disbursement 09 / 26 / 2007
Mailing Address PO Box 3917		Amount of Each Disbursement this Period 1000.00
City La Mesa State CA Zip Code 91944	Purpose of Disbursement Political Campaign Contributions Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	2474.36
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Tom Williams Full Name (Last, First, Middle Initial) Mailing Address 79 P Street, NW City Washington State DC Zip Code 20001 Purpose of Disbursement Photos/Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 0033848 Date of Disbursement 09 / 26 / 2007 Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B. Valentine Direct Markering Full Name (Last, First, Middle Initial) Mailing Address 5415 Maple Ave, Ste 230 City Dallas State TX Zip Code 75235 Purpose of Disbursement Printing/Paper Stock Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 0033849 Date of Disbursement 09 / 26 / 2007 Amount of Each Disbursement this Period 358.78 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C. Plano Parkway Self Storage Full Name (Last, First, Middle Initial) Mailing Address 1100 E Plano Parkway City Plano State TX Zip Code 75074 Purpose of Disbursement Office/Warehouse Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 0033847 Date of Disbursement 09 / 26 / 2007 Amount of Each Disbursement this Period 130.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

738.78

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Carlisle Building LLC		Transaction ID: 0033853 Date of Disbursement 09 / 26 / 2007	
Mailing Address 1611 Ave K		Amount of Each Disbursement this Period 1130.00	
City Plano State TX Zip Code 75074	Purpose of Disbursement Office/Warehouse Candidate Name	001 Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Full Name (Last, First, Middle Initial) B. National Republican Congressional Comm		Transaction ID: 0033852 Date of Disbursement 09 / 26 / 2007	
Mailing Address 320 First Street, SE		Amount of Each Disbursement this Period 25000.00	
City Washington State DC Zip Code 20003	Purpose of Disbursement Transfer of Excess Funds Candidate Name	008 Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

26130.00

TOTAL This Period (last page this line number only)

91765.17

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Jenifer L. Healy		Transaction ID: 0033763 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 7	
Mailing Address 653 G Street SE		Amount of Each Disbursement this Period 40.00	
City Washington State DC Zip Code 20003	Purpose of Disbursement Refund	Category/ Type 010	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	40.00
TOTAL This Period (last page this line number only)	40.00

**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)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Walberg For Congress		Transaction ID: 0033519 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 4 / 2 0 0 7
Mailing Address 6769 Tenchout Road		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Tipton State MI Zip Code 49287	Purpose of Disbursement Political Campaign Contributions Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 011

Full Name (Last, First, Middle Initial) B. Walsh for Congress		Transaction ID: 0033625 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 7
Mailing Address PO Box 1974		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Syracuse State NY Zip Code 13201	Purpose of Disbursement Political Campaign Contributions Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 011

Full Name (Last, First, Middle Initial) C. Christopher Shays for Congress		Transaction ID: 0033626 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 7
Mailing Address 98 East Avenue Rear Building		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Norwalk State CT Zip Code 06851	Purpose of Disbursement Political Campaign Contributions Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Kuhl for Congress		Transaction ID: 0033627 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 7
Mailing Address 10 Ganesvoort Street, Suite 101		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Bath State NY Zip Code 14810	Purpose of Disbursement Political Campaign Contributions Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Musgrave for Congress		Transaction ID: 0033628 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 7
Mailing Address 257 Johnston Center Drive #211		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Johnstown State CO Zip Code 80534	Purpose of Disbursement Political Campaign Contributions Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kirk for Congress		Transaction ID: 0033629 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 7
Mailing Address PO Box 8		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Winnetka State IL Zip Code 60093	Purpose of Disbursement Political Campaign Contributions Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

Full Name (Last, First, Middle Initial) A. Heller for Congress		Transaction ID: 0033630 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 7
Mailing Address PO Box 750580		Amount of Each Disbursement this Period 1000.00
City Las Vegas State NV Zip Code 89136	Purpose of Disbursement Political Campaign Contributions Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Friends of Mike Ferguson		Transaction ID: 0033631 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 7
Mailing Address 16 Mount Bethel Road #353		Amount of Each Disbursement this Period 1000.00
City Warren State NJ Zip Code 07059	Purpose of Disbursement Political Campaign Contributions Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Thelma Drake for Congress		Transaction ID: 0033632 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 7
Mailing Address PO Box 61480		Amount of Each Disbursement this Period 1000.00
City Virginia Beach State VA Zip Code 23466	Purpose of Disbursement Political Campaign Contributions Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF SAM JOHNSON

A. Full Name (Last, First, Middle Initial)
Charles Dent for Congress

Mailing Address PO Box 442

City Allentown State PA Zip Code 18105

Purpose of Disbursement
Political Campaign Contributions

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0033633

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

Category/
Type

B. Full Name (Last, First, Middle Initial)
Vern Buchanon for Congress

Mailing Address PO Box 48928

City Sarasota State FL Zip Code 34230

Purpose of Disbursement
Political Campaign Contributions

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0033634

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

Category/
Type

SUBTOTAL of Disbursements This Page (optional) ►

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