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DEC -3 1992

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee (Summary Page)

OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
Jim Chapman For Congress

ADDRESS (number and street)  Check if different than previously reported.  
4725 Thoroughgood Drive

CITY, STATE and ZIP CODE STATE/DISTRICT  
Virginia Beach Virginia 23452 VA 2d

145017

2. FEC IDENTIFICATION NUMBER  
C 00262352

3. IS THIS REPORT AN AMENDMENT?  
 YES  NO

4. TYPE OF REPORT

- April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- Twelfth day report preceding \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day report following the General Election on Nov 3 in the State of Virginia
- Termination Report

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

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>10-15-92</u> through <u>11-23-92</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	<u>56,726.59</u>	<u>193,293.00</u>
(b) Total Contribution Refunds (from Line 20(d))	<u>0-</u>	<u>0-</u>
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	<u>56,726.59</u>	<u>193,293.00</u>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<u>68,677.24</u>	<u>186,326.79</u>
(b) Total Offsets to Operating Expenditures (from Line 14)	<u>0-</u>	<u>0-</u>
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	<u>68,677.24</u>	<u>186,326.79</u>
8. Cash on Hand at Close of Reporting Period (from Line 27)	<u>2,463.46</u>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<u>0-</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<u>9,900.88</u>	

For further information contact:  
 Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463  
 Toll Free 800-424-9530  
 Local 202-376-3120

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Subject to corrections to be made by the IRS and DISBURSEMENTS

Type or Print Name of Treasurer

Joel F. Ambrose

Signature of Treasurer

*[Handwritten Signature]*

Date

12-02-92

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

92014363301

# DETAILED SUMMARY PAGE

of Receipts and Disbursements  
(Page 2, FEC FORM 3)

Name of Committee (in full) Jim Chapman For Congress Report Covering the Period:  
From: 10-15-90 To: 11-23-92

	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date	
<b>I. RECEIPTS</b>			
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A) . . . . .	38,940.34		11(a)(i)
(ii) Unitemized . . . . .	5,190.91		11(a)(ii)
(iii) Total of contributions from individuals . . . . .	44,131.25	71,640.17	11(a)(iii)
(b) Political Party Committees . . . . .	5,585.00	11,273.49	11(b)
(c) Other Political Committees (such as PACs) . . . . .	7,010.34	16,371.34	11(c)
(d) The Candidate . . . . .	—	—	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans )(add 11(a)(iii), (b), (c) and (d))	56,726.59	193,293.00	11(e)
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.</b> . . . . .	0	0	12
<b>13. LOANS:</b>			
(a) Made or Guaranteed by the Candidate . . . . .	0	0	13(a)
(b) All Other Loans . . . . .	0	0	13(b)
(c) TOTAL LOANS (add 13(a) and (b)) . . . . .	0	0	13(c)
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b> . . . . .	0	0	14
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b> . . . . .	0	0	15
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b> . . . . .	56,726.59	193,293.00	16
<b>II. DISBURSEMENTS</b>			
<b>17. OPERATING EXPENDITURES</b> . . . . .	68,677.24	186,326.79	17
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.</b> . . . . .			18
<b>19. LOAN REPAYMENTS:</b>			
(a) Of Loans Made or Guaranteed by the Candidate . . . . .	0	0	19(a)
(b) Of All Other Loans . . . . .	0	0	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) . . . . .	0	0	19(c)
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>			
(a) Individuals/Persons Other Than Political Committees . . . . .	0	0	20(a)
(b) Political Party Committees . . . . .	0	0	20(b)
(c) Other Political Committees (such as PACs) . . . . .	0	0	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) . . . . .	0	0	20(d)
<b>21. OTHER DISBURSEMENTS</b> . . . . .	0	0	21
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21).</b> . . . . .	68,677.24	186,326.79	22
<b>III. CASH SUMMARY</b>			
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b> . . . . .		\$ 14,414.11	23
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b> . . . . .		\$ 56,726.59	24
<b>25. SUBTOTAL (add Line 23 and Line 24)</b> . . . . .		\$ 71,140.70	25
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).</b> . . . . .		\$ 68,677.24	26
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25).</b> . . . . .		\$ 2,463.46	27

9201436302

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1  
FOR LINE NUMBER 11

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NAME OF COMMITTEE (in Full)

Jim Chapman For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Keith Alessi 2852 Little Neck Pt. Va. Bch., VA 23452			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/15/92	\$ 1000.00
Aggregate Year-to-Date > \$			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elizabeth Ambrosio 1322 Westover Ave. Norfolk, VA 23507	Public School System		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/15/92	\$ 100.00
Aggregate Year-to-Date > \$		750.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eric A. Anderson 1230 Park Ave. Apt. 2B New York, N.Y. 10128	Maritime Attorney		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/17/92	\$ 250.00
Aggregate Year-to-Date > \$			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frances Burrus 1115 E. Bay Shore Dr. Va. Bch., VA 23451			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/15/92	\$ 250.00
Aggregate Year-to-Date > \$			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary Byler 505 S. Independence Blvd. Va. Bch., VA 23452	Self		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/16/92	\$ 250.00
Aggregate Year-to-Date > \$		700.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Heidi Cancellori 3745 Grey Dove Ln. Va. Bch., VA 23456			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/16/92	500.00
Aggregate Year-to-Date > \$		530.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Walter W. Craigie, Jr. 204 Poplar Ln. Richmond, VA 23226			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/15/92	250.00
Aggregate Year-to-Date > \$			
SUBTOTAL of Receipts This Page (optional) .....			2600. ✓
TOTAL This Period (last page this line number only) .....			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 11  
FOR LINE NUMBER 11

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NAME OF COMMITTEE (in Full)

Jim Chacra for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sheppard H.C. Davis 401 Atlantic Ave. Va Bch., VA 23451			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired	10/15/92	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Louis B. Fine 2101 Parks Ave. STE 601 Va. Bch., VA 23451	FINE ET AL		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney	10/16/92	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Juanita Gardner 1309 Kingfisher Ct. Va. Bch., VA 23451			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired	10/20/92	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
F. D. Gottwald Jr. 300 Herndon Rd. Richmond, VA 23229			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		10/15/92	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Melvin Green STE 1400 One Commercial Pl. Norfolk, VA 23510			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired CPA	10/16/92	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frances Havens 1801 M. Sara Dr. Chesapeake Key VA 23320			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired	10/16/92	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Hummel 5248 Prestwick St. Va. Bch., VA 23464	Victoria, Kings Agency		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Marketing V.P.	10/16/92	
SUBTOTAL of Receipts This Page (optional)			2900.00
TOTAL This Period (last page this line number only)			

CCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11

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NAME OF COMMITTEE (in Full)

Jim Chapman for Congress

5  
3  
3  
6  
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4  
3  
0  
1  
9  
0  
0

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alfred Jensen 4412 Swaine Ct. Va. Bch., VA 23455			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/20/92	\$ 250.00
	Aggregate Year-to-Date > \$	500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nicholas B. Koehlin 3 W. 75th St. Apt 2A N.Y., NY 10023	Self.		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/21/92	\$ 250.00
	Aggregate Year-to-Date > \$	250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward Kreyling Jr. 3646 S. Sea Breeze Trl. Va. Bch., VA 23452			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/18/92	\$ 100.00
	Aggregate Year-to-Date > \$	335.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lois N. McKendree 904 Hanover Ave. Norfolk, VA 23508			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/16/92	\$ 1000.00
	Aggregate Year-to-Date > \$	1000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nadea B. Middleton 6125 Level Green Ct. Va. Bch., VA 23464			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/30/92	\$ 20.00
	Aggregate Year-to-Date > \$	500.00	\$ 500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen Miller 3975 Wyckoff Dr. Va. Bch., VA 23452			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/22/92	\$ 250.00
	Aggregate Year-to-Date > \$	290.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W. Sheppard Miller III 1527 Bolling Avenue Norfolk, VA 23508	Goodman & Co.		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/16/92	\$ 250.00
	Aggregate Year-to-Date > \$	450.00	

SUBTOTAL of Receipts This Page (optional) ..... 2620.<sup>W</sup>/<sub>N</sub>

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

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11

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NAME OF COMMITTEE (in Full)

Jim Charma for Congress

6  
3  
3  
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0

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeanine Murphy 1705 Five Forks Rd. Va. Bch., VA 23455	Homemaker	10/22/92	\$ 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 280.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
G.G. Phillips P.O. Box 3427 Norfolk, VA 23514	SELF	10/23/92	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 750.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J.P. Provance 231 E. Padonia Rd. Timonium, MD 21093		10/22/92	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 350.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
The Right to Work - PAC 5240 Port Royal Rd., STE 211 Springfield, VA 22151	PAC	10/19/92	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Roberts 6121 Studeley Ave. Norfolk, VA 23508		10/15/92	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Adelia Robertson P.O. Box 64303 Va. Bch., VA 23464	NOT EMPLOYED	10/16/92	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
M.G. Robertson P.O. Box 64303 Va. Bch., VA 23464	Self	10/16/92	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)	3,150 N
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11

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NAME OF COMMITTEE (in Full)

Jim Chason for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. R. Roughton, Jr. 6241 Va. Beh. Blvd. Norfolk, VA 23502	Self		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Auto Dealer	10/23/92	\$ 250.00
	Aggregate Year-to-Date > \$	250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles L. Smith 2729 River Rd. Va. Beh., VA 23454	Self		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Pharmacist	10/15/92	\$ 200.00
	Aggregate Year-to-Date > \$	299.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Guilford D. Ware 1640 Nations Bank Ctr. Norfolk, VA 23510	Crossman, Ware et al.		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	10/15/92	\$ 700.00
	Aggregate Year-to-Date > \$	1720	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joretta Watts 1472 Five Hill Trl. Va. Beh., VA 23452			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/18/92	\$ 500.00
	Aggregate Year-to-Date > \$	750.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Willcox Bailey 1336 W. Princess Anne Rd. Norfolk, VA 23507	Wheat Leuniger		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Broker	11/15/92	\$ 200.00
	Aggregate Year-to-Date > \$	250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce Bishop 6080 Newport Cres. Norfolk, VA 23505	Willux, Lavoy et al.		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	10/15/92	\$ 250.00
	Aggregate Year-to-Date > \$	250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frankie Black 103 Driftwood Ct. Yorktown, VA 23693			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MT Employee	10/20/92	\$ 1000.00
	Aggregate Year-to-Date > \$	1000.00	

SUBTOTAL of Receipts This Page (optional)	3,100.00 ✓
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11

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NAME OF COMMITTEE (in Full)

Jim Chapman for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tom Biley for Congress P.O. Box 12095 Richmond, VA 23226	PAC		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/27/92	\$ 1000.00
Aggregate Year-to-Date > \$ 1000.00			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
S. Frank Blocker 7713 N. Shirland Ave. Norfolk, VA 23505	Self		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/24/92	\$ 20.00
Aggregate Year-to-Date > \$ 820.00			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W. E. Chitty 3401 Mangrove Ave. Norfolk, VA 23502			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/28/92	\$ 20.00
Aggregate Year-to-Date > \$ 790.00		10/21/92	\$ 50.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary D. Crane 6614 Granby St. Norfolk, VA 23505			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/22/92	\$ 50.00
Aggregate Year-to-Date > \$ 330.00			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John H. Crouse 2549 Seaview Ave. Va. Bch., VA 23455			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/29/92	\$ 500.00
Aggregate Year-to-Date > \$ 500.00			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harry B. Dyche III 5 Sea Cove Hampton, VA 23669			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/13/92	\$ 250.00
Aggregate Year-to-Date > \$ 250.00			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
C. F. Ehrenzeller 1710 Dey Cove Dr. Va. Bch., VA 2354			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/8/92	\$ 1000.00
Aggregate Year-to-Date > \$ 2000.00			

SUBTOTAL of Receipts This Page (optional)

2,890

TOTAL This Period (last page this line number only)



SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 11  
FOR LINE NUMBER 11

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NAME OF COMMITTEE (in Full)

Jim Chapman for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Flowers Industries P. A. C. P. O. Box 1338 Thomasville, GA 31792 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC Aggregate Year-to-Date > \$ 2000.00	9/25/92	\$ 2000.00
B. Full Name, Mailing Address and ZIP Code F. Dudley Fulton 5306 Lakeside Ave Va. Bch., VA 23451 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Occupation Financial Planner Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 10/15/92	Amount of Each Receipt this Period \$ 100.00
C. Full Name, Mailing Address and ZIP Code Henry V. Harris III 1503 No. Shore Rd. Norfolk, VA 23505 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 650.00	Date (month, day, year) 10/22/92	Amount of Each Receipt this Period \$ 150.00
D. Full Name, Mailing Address and ZIP Code Ronald & Kim Harris Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/26/92	Amount of Each Receipt this Period \$ 500.00
E. Full Name, Mailing Address and ZIP Code James Hazel 13600 Cartwright Ln. Richmond, VA 23233 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/28/92	Amount of Each Receipt this Period \$ 250.00
F. Full Name, Mailing Address and ZIP Code M. B. Jackson 1125 Ditchley Rd. Va. Bch., VA 23451 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Residual Aggregate Year-to-Date > \$ 760.00	Date (month, day, year) 10/22/92 10/22/92	Amount of Each Receipt this Period \$ 100.00 \$ 20.00
G. Full Name, Mailing Address and ZIP Code Benjamin E. Joyce 1400 Dunstan Cir. Va. Bch., VA 23455 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 520.00	Date (month, day, year) 10/26/92	Amount of Each Receipt this Period \$ 140.00

SUBTOTAL of Receipts This Page (optional)

3260.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 8 OF 112  
FOR LINE NUMBER 11

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NAME OF COMMITTEE (in Full)

Jim Chasman for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>Arno Laux</u> <u>956 Larkaway Ct.</u> <u>Va. Bch., VA 23464</u>			
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation: <u>Attorney</u>	<u>10/31/92</u>	<u>\$ 50.00</u>
Aggregate Year-to-Date > \$ <u>260.00</u>			
<u>B. Full Name, Mailing Address and ZIP Code</u> <u>Linwood Leavitt</u> <u>644 Lynn Shores Dr.</u> <u>Va. Bch., VA 23452</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	<u>10/2/92</u>	<u>\$ 320.00</u>
Aggregate Year-to-Date > \$ <u>420.00</u>			
<u>C. Full Name, Mailing Address and ZIP Code</u> <u>Lawrence Lewis Jr.</u> <u>Richmond, Virginia</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation: <u>Retired</u>	<u>10/26/92</u>	<u>\$ 500.00</u>
Aggregate Year-to-Date > \$ <u>500.00</u>			
<u>D. Full Name, Mailing Address and ZIP Code</u> <u>John F. Marshall Jr.</u> <u>8208 Ocean Front</u> <u>Va. Bch., VA 23451</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	<u>10/27/92</u>	<u>\$ 300.00</u>
Aggregate Year-to-Date > \$ <u>300.00</u>			
<u>E. Full Name, Mailing Address and ZIP Code</u> <u>Ann Martin</u> <u>5219 Rolfe Ave.</u> <u>Norfolk, VA 23508</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	<u>10/23/92</u>	<u>\$ 500.00</u>
Aggregate Year-to-Date > \$ <u>500.00</u>			
<u>F. Full Name, Mailing Address and ZIP Code</u> <u>Howard Martin Jr.</u> <u>1335 Armistead Bridge Rd.</u> <u>Norfolk, VA 23507</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation: <u>Attorney</u>	<u>10/27/92</u>	<u>\$ 50.00</u>
Aggregate Year-to-Date > \$ <u>275.00</u>			
<u>G. Full Name, Mailing Address and ZIP Code</u> <u>David May</u> <u>605 Thalix Pt. Rd.</u> <u>Va. Bch., VA 23452</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	<u>10/29/92</u>	<u>\$ 500.00</u>
Aggregate Year-to-Date > \$ <u>500.00</u>			

SUBTOTAL of Receipts This Page (optional) .....	<u>2220.00</u>
TOTAL This Period (last page this line number only) .....	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 9 OF 12  
FOR LINE NUMBER 11

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NAME OF COMMITTEE (in Full)

Jim Chapman for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kevin McHugh 615 Lynnhaven Parkway Va. Bch., VA. 23452			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/14/92	\$ 500.00
Aggregate Year-to-Date > \$ 500.00			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Miles 421 W. Bute St. Norfolk, VA 23501	Miles Lesford		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Owner - President 10/22/92	\$ 500.00
Aggregate Year-to-Date > \$ 500.00			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
E. A. Mills Jr. 3115 Belmore Rd. Tampa, FL. 33618			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/27/92	\$ 100.00
Aggregate Year-to-Date > \$ 300.00			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gordon Robertson 500 World Trade Ctr. Norfolk, VA 23510	Vandeweyer, Blake, Meredith		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/29/92	\$ 250.00
Aggregate Year-to-Date > \$ 270.00			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Roper 7406 Glencove Pl Norfolk, VA 23505	Selt		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	MacIntire Industries 9/30/92	\$ 1000.00
Aggregate Year-to-Date > \$ 1000.00			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Susan Sadler 921 1st Colonial Rd., Ste 1803 Va. Bch., VA 23454			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/30/92	\$ 20.00
Aggregate Year-to-Date > \$ 260.00			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Susan Sterling 3903 Holly Rd. Va. Bch., VA 23451			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/26/92	\$ 250.00
Aggregate Year-to-Date > \$ 500.00			

SUBTOTAL of Receipts This Page (optional) ..... 2620 ✓  
TOTAL This Period (last page this line number only) .....

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 10 OF 12  
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NAME OF COMMITTEE (in Full)

Jim Chabera for Governor

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Margo Taylor 7411 Glencove Pl Norfolk, VA 23505	NOT EMPLOYED	10/21/92	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00	10/13/92	\$ 100.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
C.E. Thorston, Jr. P.O. Box 2411 Norfolk, VA 23501	Self		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Contributor</u> Aggregate Year-to-Date > \$ 350.00	10/20/92	\$ 100.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kenneth Tillou 6125 Rolfe Ave. Norfolk, VA 23508			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Attorney</u> Aggregate Year-to-Date > \$ 250.00	10/27/92	\$ 250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. Thomas Vaughan 919 E. Main St. Richmond, VA 23261			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$ 500.00	10/26/92	\$ 500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roderick Watson 1101 Gunston Rd. Va. Bch., VA 23451			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Retired</u> Aggregate Year-to-Date > \$ 500.00	10/29/92	\$ 500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Corbin White 930 Jamestown Cres. Norfolk, VA 23508			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$ 250.00	10/21/92	\$ 50.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bonnie Woodington 2210 Sandalwood Rd. Va-Bch., VA 23451			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$ 1000.00	10/26/92	\$ 1000.00

SUBTOTAL of Receipts This Page (optional)	3300.00
TOTAL This Period (last page this line number only)	3300.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

Jim Chapman For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Josiah Woodington III 5709 Oceanfront Ave. Va. Bch., VA 23451			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 1000.00	12/26/92	\$ 1070.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. A. Wright 4317 Thoroughgood Dr. Va. Bch., VA 23455			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 240.00	10/26/92	100.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
COOPER INDUSTRIES ACTION COMMITTEE P.O. Box 446 HOUSTON, TEXAS 77210	PAC	rec'd 11-4-92	3,000
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 3000		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NRCC COMMUNIST 320 First Street, S.E. WASHINGTON, D.C. 20003	In kind	rec'd 11-2-92	285. <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 585. <sup>00</sup>	11-2-92	300. <sup>00</sup>
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Republican Party of Virginia 115 E. Grand Street Richmond, Virginia 23219		11-2-92	5,000.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 6,000		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GOPAC 440 First Street #400 WASH, DC 20077-0245		11-13-92	\$ 10.34
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		in kind
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WAVY T.V. 300 WAVY ST. FARMINGTON VA. 23704	T.V. - Refund. IMPRESS ACCT.	11-17-92	\$5. <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)	9780.34
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11

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NAME OF COMMITTEE (in Full)

Jim Chapman For Congress

9201436314

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AMOCO PAC 200 EAST Randolph Drive Chicago, IL 60601 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC Aggregate Year-to-Date > \$	Nov. 3-12	500. <sup>00</sup>
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

500

TOTAL This Period (last page this line number only)

38,940.34

38,940.34

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 4  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Jim Chapman for Congress

92014363315

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Carlyle Gregory P.O. Box 2108 Falls Church, VA. 22042	Consulting - Wash. Indep. Commission Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Post Gen RPT.	10-16 ✓ 10-30 ✓	173.47 + 1000. ✓ 3,000. ✓
Rob Catron 2940 B. Lakes Hills Drive Tallahassee Florida	Salary - P.D. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-15-92 10-23-92 10-30-92 11-05-92	304 ✓ 304 ✓ 304 ✓ 400 ✓
Salvatore M. Guign 2604 Pinney Ridge Bark Dr. Va. Beach, VA. 23456	Consulting Indep. Commission Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-19 10-23 10-30	200. ✓ 200. ✓ 200. ✓
C.S. GUTHRIE Cery Finner Chase Rd. Va Beach, Va	Salary / Expense Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-28 10-30	150. ✓ 150. ✓
Karrier Company 4512 Holland Road Va Beach, Va	Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-16 -	800. ✓
Sandra Cristofa Louette Pond Road Va. Beach, Va.	Indep. Commission Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-27 11-2	1,000. ✓ 3,411.80 ✓
OFFICE MAX Columbus Circle Va Beach, Va.	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-15 11-15	36.56 ✓ 11.41 ✓
Biz Mart Va Beach Blvd. Va Beach, Va	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-22 10-23 10-26	74.55 ✓ 45.96 ✓ 109.00 ✓
Color Graphics S. Independence Blvd. Va. Beach, Va.	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-16 11-23	101.53 ✓ 80.95 ✓

SUBTOTAL of Disbursements This Page (optional) .....

11,207.23

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)  
 Jim Chapman For Congress

92014363316

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WTKR 720 Bouch Street Norfolk, Virginia	Advertisement	10-15	935
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-30	2890
B. Full Name, Mailing Address and ZIP Code WVEC 613 Woodis Ave. Norfolk, VA. 23507	Advertisement	10-15	5231.75
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-30	3050.50
C. Full Name, Mailing Address and ZIP Code WAY 300 Wary Street Portsmouth, VA.	Advertisement	10-15	6041.80
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-30	2917.20
D. Full Name, Mailing Address and ZIP Code Tidewater Cable Interchange 4785 Village Ave. VA Beach, VA	Advertisement	10-15 11-02	918 192.95
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-30	163.20
		10-24	848.30
		10-30	225.90
E. Full Name, Mailing Address and ZIP Code US Postmaster Virginia Beach, VA.	Postage & Bulk Mail	10-15 10-27	321 290 388.57
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-16 10-28	58 2340.69 526.97
		10-20 10-29	250 132.09
		10-23 10-25	814.77 295 100
		10-16 11-6	503.75 892.47
		10-22 11-23	1072.35 520.
F. Full Name, Mailing Address and ZIP Code ADALIN 5620 Va Beach Blvd. Va. Beach, VA.	Printing	10-22 11-23	1815.53 1831
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-23	25.
		10-30	1177.05
G. Full Name, Mailing Address and ZIP Code J Ambrasis 1322 Wessmer Ave. Norfolk VA.	Msgt Admin	10-23	1527
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-27	1527
		10-31	763
H. Full Name, Mailing Address and ZIP Code Propeller Club, NVA Norfolk, VA.	Opera House	10-16	30.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code Hanson Road Marion Ave. Bude Street - Norfolk VA.	Breakfast Meeting	10-16	20.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional) .....	39,665.24
TOTAL This Period (last page this line number only) .....	



SCHEDULE B

ITEMIZED DISBURSEMENTS

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)

Jim Chapman for Congress

9201436317

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Virginia Pilot / Ledger Star Brambleton Avenue Norfolk, Virginia	Advertisement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-27	1884.56 ✓ 4030.07 ✓
Archbell Signs, Inc. 1572 Juniper Avenue. Norfolk, Virginia	Signs/Billboards Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-23	757.63 ✓
WLTY - WTAR 720 Bousch Street Norfolk, Virginia	Advertisement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-30	2,010.20 ✓
WNIS 500 Dominion Tower 999 Waterside Drive Norfolk, Virginia 23510	Advertisement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-30	1318. ✓
WFOG - 92 FM 215 Brook Ave Norfolk, Virginia 23517	Advertisement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-30	1,008 ✓
WWDE - FM 2101 Executive Drive Hampton, Virginia	Advertisement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-30	583.95 ✓
Virginia Dept of Taxation Comm. of Virginia Richmond, Va	Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-31-92	406. ✓
Features International 1101 N. Eden Way Chesapeake, Virginia	Advertisement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-30	999.04 ✓
Holiday Inn Exec. Center Greenwich Road Norfolk, Virginia	Rally Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-31	250. ✓

SUBTOTAL of Disbursements This Page (optional) ..... 13,247.45

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)			
Jim Chapman for Congress			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Secord District Republican Committee - Va. Beach, Virginia	Computer Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-2	1350.
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NRCC Communications 320 First St. S.E. Washington, D.C. 20003	In-kind Offset Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-2-92 11-2-92	285. 300. } in-kind
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
GOPAC 449 First Street #403 Washington, D.C. 20077-2245	Literature - in-kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-13-92	10.34 (in-kind)
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kinko Copy Center Va Beach Blvd. Va Beach, Virginia	Primary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-23	297.78
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Van Myler Va Beach, Virginia	Television Buy - Comm Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-30	250.
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Commercial Raders College Avenue North Va Virginia	Pages Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-30 11-1	234.08 263.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Tomarubik Va. Beach, Virginia	Voice Rental Tables Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-30	360.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

92014363318

SUBTOTAL of Disbursements This Page (optional) .....	3350.20
TOTAL This Period (last page this line number only) .....	67,470.12

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<i>Jim Chapman for Congress</i>				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor <i>Jim Chapman 4725 Thoroughgood Drive Va Beach, VA 23455</i>	2800	—	—	2800.
Nature of Debt (Purpose): <i>Secord Dist Repr. Committee</i>				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor <i>Jim Chapman 4725 Thoroughgood Drive Va Beach, VA 23455</i>	463.94	—	—	463.94
Nature of Debt (Purpose): <i>Coast - Travel - Meals</i>				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor <i>Jim Chapman 4725 Thoroughgood Drive Va Beach, VA 23455</i>	678	—	—	678.68
Nature of Debt (Purpose): <i>Coast, Travel Meals -</i>				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor <i>Jim Chapman 4725 Thoroughgood Drive Va Beach, VA 23455</i>	298.94	—	—	298.94
Nature of Debt (Purpose): <i>Travel - Meeting meals -</i>				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor <i>Carlyle Gregory The Carlyle Gregory Company P.O. Box 2108 Fossil Church, VA. 22042</i>	5,660.	—	—	5,660.
Nature of Debt (Purpose): <i>WASH. CONGRESS</i>				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional) .....				—
2) TOTAL This Period (last page this line only) .....				9,900.28 ✓
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) .....				—
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) .....				9,900.28