

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Gingrey for Congress

ADDRESS (number and street) PO Box U

Check if different than previously reported. (ACC)

Marietta GA 30060

2. **FEC IDENTIFICATION NUMBER** C00370783

**CITY** **STATE** **ZIP CODE** **STATE** **DISTRICT**

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

GA 11

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on [ ] [ ] [ ] in the State of [ ]

(c) 30-Day **POST**-Election Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period 07 01 2008 through 09 30 2008

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

Type or Print Name of Treasurer Robert Morgan

Signature of Treasurer Electronically Filed by Robert Morgan Date 10 13 2008

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Gingrey for Congress

Report Covering the Period:

From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	167181.00	1474033.65
(b) Total Contribution Refunds (from Line 20(d)).....	2300.00	5325.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	164881.00	1468708.65
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	84252.00	574334.81
(b) Total Offsets to Operating Expenditures (from Line 14).....	50.00	720.77
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	84202.00	573614.04
8. Cash on Hand at Close of Reporting Period (from Line 27).....	897092.41	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Gingrey for Congress

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

107800.00

1077335.00

(ii) Unitemized.....

6783.00

39368.50

(iii) TOTAL of contributions

114583.00

1116703.50

from individuals..... ▶

98.00

98.00

(b) Political Party Committees.....

52500.00

357232.15

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

167181.00

1474033.65

(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.).....

50.00

720.77

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

2703.47

38388.38

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

169934.47

1513142.80

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	84252.00	574334.81
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	295000.00	370000.00
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.....	2300.00	5325.00
(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)).....	2300.00	5325.00
21. OTHER DISBURSEMENTS.....	22890.00	128640.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	404442.00	1078299.81

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1131599.94
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	169934.47
25. SUBTOTAL (add Line 23 and Line 24).....	1301534.41
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	404442.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	897092.41

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

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

FOR LINE NUMBER: PAGE 5 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
ACP Services PAC  
Mailing Address 25 Massachusetts Ave NW Ste 700  
City Washington State DC Zip Code 20001-1430  
FEC ID number of contributing federal political committee. **C** C00403881  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 08 / 06 / 2008  
Transaction ID: 81001.C11943  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
ACSPA Surgeons PAC  
Mailing Address 1640 Wisconsin Ave NW  
City Washington State DC Zip Code 20007-7715  
FEC ID number of contributing federal political committee. **C** C00382424  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00  
Date of Receipt 08 / 06 / 2008  
Transaction ID: 81001.C11941  
Amount of Each Receipt this Period 4000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
AGC Political Action Committee  
Mailing Address 333 John Carlyle St Ste 200  
City Alexandria State VA Zip Code 22314-5770  
FEC ID number of contributing federal political committee. **C** C00082917  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 09 / 03 / 2008  
Transaction ID: 81001.C12126  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Altria Group, Inc. PAC

Mailing Address 120 Park Avenue

City State Zip Code  
New York NY 10017

FEC ID number of contributing federal political committee. **C** C00089136

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 / 01 / 2008

**Transaction ID:** 80701.C11900

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
American Academy of Family Physicians

Mailing Address 2023 Massachusetts Ave NW

City State Zip Code  
Washington DC 20036-1011

FEC ID number of contributing federal political committee. **C** C00411553

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 03 / 2008

**Transaction ID:** 81001.C12117

Amount of Each Receipt this Period  
4000.00

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

**C.** Full Name (Last, First, Middle Initial)  
American Bankers Association PAC

Mailing Address 1120 Connecticut Ave NW

City State Zip Code  
Washington DC 20036-3905

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 01 / 2008

**Transaction ID:** 80701.C11897

Amount of Each Receipt this Period  
1000.00

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

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
American Bankers Association PAC  
Mailing Address 1120 Connecticut Ave NW  
City Washington State DC Zip Code 20036-3905  
FEC ID number of contributing federal political committee. **C** C00004275  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00  
Date of Receipt 08 / 27 / 2008  
Transaction ID: 81001.C12073  
Amount of Each Receipt this Period 3000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
American College of Cardiology PAC  
Mailing Address 2400 N St NW  
City Washington State DC Zip Code 20037-1153  
FEC ID number of contributing federal political committee. **C** C00375360  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00  
Date of Receipt 09 / 19 / 2008  
Transaction ID: 81001.C12196  
Amount of Each Receipt this Period 2500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
American Soc. of Anesthesiologists PAC  
Mailing Address 520 N Northwest Hwy  
City Park Ridge State IL Zip Code 60068-2538  
FEC ID number of contributing federal political committee. **C** C00255752  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 5500.00  
Date of Receipt 08 / 06 / 2008  
Transaction ID: 81001.C11972  
Amount of Each Receipt this Period 2000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 7500.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

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

Mailing Address 1501 M St NW Fl 7

City Washington State DC Zip Code 20005-1702

FEC ID number of contributing federal political committee. **C** C00435933

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 06 / 2008  
**Transaction ID:** 81001.C11940  
 Amount of Each Receipt this Period 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Branch Banking & Trust PAC

Mailing Address 3350 Riverwood Pkwy SE Ste 2230

City Atlanta State GA Zip Code 30339-3362

FEC ID number of contributing federal political committee. **C** C00075291

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 16 / 2008  
**Transaction ID:** 81001.C11997  
 Amount of Each Receipt this Period 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Build PAC

Mailing Address National Association of Home Build  
1201 15th Street, NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 07 / 01 / 2008  
**Transaction ID:** 80701.C11893  
 Amount of Each Receipt this Period 2500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Comcast Corp. PAC

Mailing Address 1701 John F Kennedy Blvd Fl 49

City Philadelphia State PA Zip Code 19103-2838

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 16 / 2008  
**Transaction ID:** 81001.C11998  
 Amount of Each Receipt this Period 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Committee to Elect Roger Waldrop

Mailing Address 48 Ridgewood Dr

City Rockmart State GA Zip Code 30153-2636

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 08 / 16 / 2008  
**Transaction ID:** 81001.C12025  
 Amount of Each Receipt this Period 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
DirecTV PAC

Mailing Address 444 N Capitol St NW Ste 728

City Washington State DC Zip Code 20001-1512

FEC ID number of contributing federal political committee. **C** C00331991

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 07 / 01 / 2008  
**Transaction ID:** 80701.C11896  
 Amount of Each Receipt this Period 1000.00

Receipt  
 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)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 126  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Flowers PAC

Mailing Address 134 Doyle McClain Dr

City State Zip Code  
Villa Rica GA 30180-1086

FEC ID number of contributing federal political committee. **C** C00033555

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  
0 9 / 1 9 / 2 0 0 8

**Transaction ID:** 81001.C12203

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Free and Strong American PAC

Mailing Address PO Box 79226

City State Zip Code  
Waverley MA 02479-0226

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

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  
0 8 / 0 6 / 2 0 0 8

**Transaction ID:** 81001.C11967

Amount of Each Receipt this Period  
1500.00

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

**C.** Full Name (Last, First, Middle Initial)  
General Dynamics Voluntary Political

Mailing Address Contribution Plan  
3190 Fairview Park Place

City State Zip Code  
Falls Church VA 22042

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

**Transaction ID:** 81001.C12198

Amount of Each Receipt this Period  
1000.00

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

**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)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Honeywell International PAC

Mailing Address 101 Constitution Ave NW Ste 500W

City Washington State DC Zip Code 20001-2177

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt 07 / 01 / 2008  
**Transaction ID:** 80701.C11901  
 Amount of Each Receipt this Period 4000.00

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

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

Mailing Address 1634 I St NW Ste 300

City Washington State DC Zip Code 20006-4021

FEC ID number of contributing federal political committee. **C** C00125641

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 07 / 09 / 2008  
**Transaction ID:** 80709.C11907  
 Amount of Each Receipt this Period 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Lockheed Martin Employees PAC

Mailing Address 1550 Crystal Dr Ste 300

City Arlington State VA Zip Code 22202-4135

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt 07 / 16 / 2008  
**Transaction ID:** 81001.C11921  
 Amount of Each Receipt this Period 1000.00

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

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Natl Assoc. of Health Underwriters PAC

Mailing Address PO Box 7135

City Arlington State VA Zip Code 22207-0135

FEC ID number of contributing federal political committee. **C** C00283135

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 07 / 01 / 2008  
**Transaction ID:** 80701.C11902  
 Amount of Each Receipt this Period 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
National Assoc. of Spine Specialists PAC

Mailing Address Spine PAC  
7075 Veterans Blvd

City Willowbrook State IL Zip Code 60527-5614

FEC ID number of contributing federal political committee. **C** C00349225

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 06 / 2008  
**Transaction ID:** 81001.C11975  
 Amount of Each Receipt this Period 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
National Cattlemens Beef Association

Mailing Address 9110 E Nichols Ave

City Centennial State CO Zip Code 80112-3450

FEC ID number of contributing federal political committee. **C** C00028787

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 03 / 2008  
**Transaction ID:** 81001.C12122  
 Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
NSSGA RockPAC

Mailing Address 2101 Wilson Blvd Ste 100

City State Zip Code  
Arlington VA 22201-3062

FEC ID number of contributing federal political committee. C C00089458

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  
09 / 19 / 2008

**Transaction ID:** 81001.C12188

Amount of Each Receipt this Period 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Physician Hospitals of America PAC

Mailing Address 2600 S Minnesota Ave Ste 202

City State Zip Code  
Sioux Falls SD 57105-4731

FEC ID number of contributing federal political committee. C C00394163

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 / 01 / 2008

**Transaction ID:** 80701.C11899

Amount of Each Receipt this Period 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Pilgrims Pride Corporation PAC

Mailing Address 4845 U.S. Highway 271 North

City State Zip Code  
Pittsburg TX 75686

FEC ID number of contributing federal political committee. C C00113902

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  
07 / 11 / 2008

**Transaction ID:** 80711.C11916

Amount of Each Receipt this Period 2500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 4500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Society for Vascular Surgery PAC

Mailing Address 633 N Saint Clair St Fl 24

City State Zip Code  
Chicago IL 60611-6554

FEC ID number of contributing federal political committee. **C** C00381459

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  
 0 8 / 0 6 / 2 0 0 8

**Transaction ID:** 81001.C11942

Amount of Each Receipt this Period  
1000.00

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

**B.**

Full Name (Last, First, Middle Initial)  
TDS Telecom PAC

Mailing Address PO Box 5158

City State Zip Code  
Madison WI 53705-0158

FEC ID number of contributing federal political committee. **C** C00299750

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 0 1 / 2 0 0 8

**Transaction ID:** 80701.C11898

Amount of Each Receipt this Period  
500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
The Committee to Re Elect Wayne Kirby

Mailing Address 110 Evans Mill Dr Ste 403

City State Zip Code  
Dallas GA 30157-1622

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 9 / 2 0 0 8

**Transaction ID:** 81001.C12187

Amount of Each Receipt this Period  
500.00

Receipt  
 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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
The Society of Thoracic Surgeons PAC

Mailing Address 1025 Connecticut Ave NW Ste 1104

City State Zip Code  
Washington DC 20036-5448

FEC ID number of contributing federal political committee. **C** C00325936

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 9 / 2 0 0 8

**Transaction ID:** 81001.C12197

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address National Venture Capital PAC  
1655 North Fort Myer Drive, Ste. 8

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00150367

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  
 0 9 / 1 9 / 2 0 0 8

**Transaction ID:** 81001.C12195

Amount of Each Receipt this Period  
1500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Wells Real Estate Funds PAC

Mailing Address 6200 The Corners Pkwy Ste 250

City State Zip Code  
Norcross GA 30092-3355

FEC ID number of contributing federal political committee. **C** C00403915

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 1 6 / 2 0 0 8

**Transaction ID:** 81001.C11999

Amount of Each Receipt this Period  
4000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6500.00

**TOTAL** This Period (last page this line number only) ..... ► 52500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 126
	<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)  
Gingrey for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Bruce Albea		Date of Receipt MM / DD / YYYY 08 / 16 / 2008
	Mailing Address 457 Industrial Dr		<b>Transaction ID:</b> 81001.C12024
	City Rockmart	State GA	Zip Code 30153-3522
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
	Name of Employer Albea Construction	Occupation Owner	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
---	-------------------------------------

<b>B.</b>	Full Name (Last, First, Middle Initial) Steven Anderson		Date of Receipt MM / DD / YYYY 08 / 16 / 2008
	Mailing Address 5040 Northside Dr NW		<b>Transaction ID:</b> 81001.C12014
	City Atlanta	State GA	Zip Code 30327-4422
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
	Name of Employer CryoLife, Inc.	Occupation CEO	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
---	-------------------------------------

<b>C.</b>	Full Name (Last, First, Middle Initial) Sherrel Astin		Date of Receipt MM / DD / YYYY 08 / 27 / 2008
	Mailing Address 184 Astin Farms Path		<b>Transaction ID:</b> 81001.C12076
	City Villa Rica	State GA	Zip Code 30180-5202
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
	Name of Employer Ellis Astin Grading Co.	Occupation Executive	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
---	-------------------------------------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 126

(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)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial)  
Chester Austin

Mailing Address 2131 Kensington Gates Dr NW

City State Zip Code  
Kennesaw GA 30152-4776

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2008

Transaction ID: 81001.C12036

Amount of Each Receipt this Period  
1000.00

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

B.

Full Name (Last, First, Middle Initial)  
David Austin

Mailing Address 1326 Marietta Country Club Dr NW

City State Zip Code  
Kennesaw GA 30152-4728

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

Name of Employer Tip Top Poultry Occupation CFO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 81001.C12180

Amount of Each Receipt this Period  
500.00

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

C.

Full Name (Last, First, Middle Initial)  
Doc Ayers

Mailing Address 1430 Cave Springs Rd

City State Zip Code  
Cedartown GA 30125-4602

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2008

Transaction ID: 81001.C11973

Amount of Each Receipt this Period  
500.00

Receipt  
 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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 126  
(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)  
Gingrey for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Don Beaver

Mailing Address PO Box 671868

City State Zip Code  
Marietta GA 30006-0032

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

Name of Employer Occupation  
Cobb Chamber of Commerce Executive

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

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 81001.C12205

Amount of Each Receipt this Period  
500.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Gloria Beck

Mailing Address 6915 Gaines Ridge Rd

City State Zip Code  
Columbus GA 31904-3327

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

Name of Employer Occupation  
A-Com Enterprises Owner

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

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2008

Transaction ID: 81001.C12130

Amount of Each Receipt this Period  
500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
John Benefield

Mailing Address 401 Woodlawn Dr

City State Zip Code  
Cedartown GA 30125-2026

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

Name of Employer Occupation  
None Retired

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

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2008

Transaction ID: 81001.C11959

Amount of Each Receipt this Period  
2000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 126  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Kaysi Benefield

Mailing Address 2431 Rome Hwy

City State Zip Code  
Cedartown GA 30125-4481

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

Name of Employer None Occupation Student

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2008

**Transaction ID:** 81001.C11963

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 166 Benedict Loopr

City State Zip Code  
Cedartown GA 30125-5366

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 81001.C12181

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Bentley, Bentley and Bentley

Mailing Address 241 Washington Ave NE

City State Zip Code  
Marietta GA 30060-1958

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2008

**Transaction ID:** 81001.C12039

Amount of Each Receipt this Period  
1000.00

Receipt  
 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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Fred Bentley

Mailing Address 241 Washington Ave NE

City State Zip Code  
Marietta GA 30060-1958

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

Name of Employer Bentley, Bentley, & Bentley  
Occupation Attorney

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 333.34

Date of Receipt  

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

Transaction ID: 81001.C12057

Amount of Each Receipt this Period  
333.34

Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
 Partnership->Bentley, Bentley and Bentley

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

Mailing Address 1133 Mossy Rock Rd NW

City State Zip Code  
Kennesaw GA 30152-4800

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

Name of Employer Bentley, Bentley & Bentley  
Occupation Attorney

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 333.33

Date of Receipt  

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

Transaction ID: 81001.C12058

Amount of Each Receipt this Period  
333.33

Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
 Partnership->Bentley, Bentley and Bentley

**C.** Full Name (Last, First, Middle Initial)  
Fred Bentley, Jr.

Mailing Address 241 Washington Ave NE

City State Zip Code  
Marietta GA 30060-1958

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

Name of Employer Bentley, Bentley & Bentley  
Occupation Partner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2333.33

Date of Receipt  

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

Transaction ID: 81001.C12059

Amount of Each Receipt this Period  
333.33

Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
 Partnership->Bentley, Bentley and Bentley

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

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

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

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

FOR LINE NUMBER: PAGE 21 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Diana Bickers

Mailing Address PO Box 692

City Hiram State GA Zip Code 30141-0692

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

Name of Employer Bickers Construction, Inc. Occupation Owner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 22 / 2008  
**Transaction ID:** 81001.C12175  
 Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 1107 Hazeltine Ln NW

City Kennesaw State GA Zip Code 30152-4742

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 08 / 16 / 2008  
**Transaction ID:** 81001.C12020  
 Amount of Each Receipt this Period 500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Jack Borden

Mailing Address PO Box 2214

City Cartersville State GA Zip Code 30120-1687

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 495.00

Date of Receipt 08 / 16 / 2008  
**Transaction ID:** 81001.C12044  
 Amount of Each Receipt this Period 125.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1625.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Christopher Brady  
Mailing Address 1800 Drury Ln  
City Alexandria State VA Zip Code 22307-1914  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Commonwealth Research Group Occupation Lobbyist  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt 07 / 15 / 2008  
Transaction ID: 81001.C11918  
Amount of Each Receipt this Period 250.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Sherry Brownlee  
Mailing Address 214 Oak Grove Path  
City Dallas State GA Zip Code 30157-4208  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cobb Co. School District Occupation School Financial Coordinator  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt 08 / 28 / 2008  
Transaction ID: 81001.C12080  
Amount of Each Receipt this Period 500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Emily Bullock  
Mailing Address PO Box 352  
City Rockmart State GA Zip Code 30153-0352  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Homemaker  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00  
Date of Receipt 09 / 03 / 2008  
Transaction ID: 81001.C12107  
Amount of Each Receipt this Period 1000.00  
Receipt  
 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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Susan Burkart  
 Mailing Address PO Box 224  
 City State Zip Code  
 Cedartown GA 30125-0224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 2 8 / 2 0 0 8  
**Transaction ID:** 81001.C11957  
 Amount of Each Receipt this Period  
 1000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Robin Burruss  
 Mailing Address 594 Keeler Woods Dr NW  
 City State Zip Code  
 Marietta GA 30064-2023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tip Top Poultry Occupation President  
 Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 0 6 / 2 0 0 8  
**Transaction ID:** 81001.C11964  
 Amount of Each Receipt this Period  
 1000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Will Byington  
 Mailing Address 80 Fallen Branch Circle  
 City State Zip Code  
 Rome GA 30161  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Toles, Temple & Wright Occupation Realtor  
 Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 1 6 / 2 0 0 8  
**Transaction ID:** 81001.C11922  
 Amount of Each Receipt this Period  
 1000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

FOR LINE NUMBER: PAGE 24 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Bill Byrne

Mailing Address 2746 Morgan Valley Rd

City State Zip Code  
Rockmart GA 30153-4522

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

Name of Employer None Occupation Retired

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

Amount of Each Receipt this Period: 1000.00

Transaction ID: 81001.C12038

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

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

Mailing Address 203 Pennsylvania Ave

City State Zip Code  
Dallas GA 30132-1276

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

Name of Employer Talley Richardson & Cable Occupation Attorney

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

Amount of Each Receipt this Period: 1000.00

Transaction ID: 81001.C12055

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

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

Mailing Address 580 Saint James PI NW

City State Zip Code  
Marietta GA 30064-1402

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

Name of Employer CDH Partners Occupation Architect

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

Amount of Each Receipt this Period: 2000.00

Transaction ID: 81001.C12023

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

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



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

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

FOR LINE NUMBER: PAGE 25 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Samuel Clark</p> <p>Mailing Address 4373 Atlanta Hwy</p> <p>City State Zip Code Hiram GA 30141-1827</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Clark Funeral Home Owner</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">1000.00</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 9 / 0 3 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> 81001.C12105</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">1000.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Larry Clements</p> <p>Mailing Address 251 Hanson Way</p> <p>City State Zip Code Marietta GA 30064-2086</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Kenmar Pediatrics Physician</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">925.00</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 8 / 1 6 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> 81001.C12007</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">100.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) David Connell</p> <p>Mailing Address 1769 Sands PI SE</p> <p>City State Zip Code Marietta GA 30067-9215</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Georgia Power Region Manager</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">1000.00</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 9 / 0 3 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> 81001.C12112</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">1000.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">2100.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Corn Family Partnership, L.P.  
Mailing Address PO Box 3184

City State Zip Code  
Marietta GA 30061-3184

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

Name of Employer None Occupation Family Trust Fund

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 9 / 0 3 / 2 0 0 8

Transaction ID: 81001.C12128

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Jack Corn  
Mailing Address 1100 Hazeltine Ln NW

City State Zip Code  
Kennesaw GA 30152-4742

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

Name of Employer Corn Partnership Occupation Partner

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 9 / 0 3 / 2 0 0 8

Transaction ID: 81001.C12177

Amount of Each Receipt this Period  
250.00

Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
 Partnership->Corn Family Partnership, L.P.

**C.** Full Name (Last, First, Middle Initial)  
Joyce Dark  
Mailing Address 942 Denmeade Walk SW

City State Zip Code  
Marietta GA 30064-2975

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

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

Transaction ID: 81001.C12143

Amount of Each Receipt this Period  
200.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **450.00**

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

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

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

FOR LINE NUMBER: PAGE 27 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
R.D. Dean

Mailing Address 100 Spring Harbor Dr Apt 457

City State Zip Code  
Columbus GA 31904-4633

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

Name of Employer Self Employed      Occupation Physician

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 200.00

Transaction ID: 81001.C12189

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

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

Mailing Address 15 Saint Andrews Dr SE

City State Zip Code  
Cartersville GA 30120-6932

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

Name of Employer Dellinger Mgmt Services LLC      Occupation President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 500.00

Transaction ID: 81001.C12077

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

**C.** Full Name (Last, First, Middle Initial)  
J.A. Durham

Mailing Address 3370 Hill Forest Trl NW

City State Zip Code  
Acworth GA 30101-4491

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

Name of Employer Northwest Bank & Trust      Occupation Chairman

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 250.00

Transaction ID: 81001.C12165

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **950.00**

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

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

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

FOR LINE NUMBER: PAGE 28 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

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

Mailing Address 1202 Essex Manor Ct

City State Zip Code  
Alexandria VA 22308-1000

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

Name of Employer King & Spalding      Occupation Attorney

Receipt For: 2008      Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼      2500.00

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

**Transaction ID:** 81001.C11939

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 993 C Johnsons Ferry Road  
Suite 100

City State Zip Code  
Atlanta GA 30342

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

Name of Employer Self Employed      Occupation Physician

Receipt For: 2008      Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼      1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

**Transaction ID:** 80701.C11892

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Tony Ellis

Mailing Address 57 Stoffel Dr

City State Zip Code  
Tallapoosa GA 30176-3634

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

Name of Employer Creative Industries      Occupation CEO

Receipt For: 2008      Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼      1000.00

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

**Transaction ID:** 81001.C11986

Amount of Each Receipt this Period  
1000.00

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

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Doris English

Mailing Address 2824 Cole Lake Rd

City State Zip Code  
Dallas GA 30157-5360

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 8 / 1 6 / 2 0 0 8

**Transaction ID:** 81001.C12032

Amount of Each Receipt this Period  
250.00

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

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

Mailing Address 2824 Cole Lake Rd

City State Zip Code  
Dallas GA 30157-5360

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

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

**Transaction ID:** 81001.C12140

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Joshua Farley

Mailing Address 162 Kipling Dr

City State Zip Code  
Dallas GA 30132-8441

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

Name of Employer The Green Companies Occupation Sales Manager

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

**Transaction ID:** 81001.C11953

Amount of Each Receipt this Period  
500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

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

Mailing Address 1439 Falkirk Ln NW

City State Zip Code  
Kennesaw GA 30152-6701

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

Name of Employer Occupation  
Pickron Dental Clinic Orthodontist

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

Amount of Each Receipt this Period: 250.00

Transaction ID: 81001.C12097

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

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

Mailing Address No. 7 Retreat

City State Zip Code  
Augusta GA 30909

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

Name of Employer Occupation  
Augusta OBGyn, P.C. Physician

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

Amount of Each Receipt this Period: 100.00

Transaction ID: 81001.C11948

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

**C.** Full Name (Last, First, Middle Initial)  
Dorothy Gilreath

Mailing Address 510 N Saint Marys Ln NW

City State Zip Code  
Marietta GA 30064-1412

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

Name of Employer Occupation  
None Homemaker

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

Amount of Each Receipt this Period: 250.00

Transaction ID: 81001.C12101

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 600.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 126  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  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)  
Gingrey for Congress

**A.**

Full Name (Last, First, Middle Initial)  
George Goldin

Mailing Address 16 Featherston Rd SW

City State Zip Code  
Rome GA 30165-6516

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

Name of Employer Harbin Clinic Occupation Gastroenterologist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 09 / 2008

Transaction ID: 80709.C11905

Amount of Each Receipt this Period  
250.00

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

**B.**

Full Name (Last, First, Middle Initial)  
James Green

Mailing Address PO Box 21

City State Zip Code  
Calhoun GA 30703-0021

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

Name of Employer Woolshire Carpet Mills Occupation Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1750.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 07 / 2008

Transaction ID: 81001.C11989

Amount of Each Receipt this Period  
500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Candice Griffin

Mailing Address 308 E 11th St SE

City State Zip Code  
Rome GA 30161-6220

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

Name of Employer None Occupation Homemaker

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 / 03 / 2008

Transaction ID: 81001.C12127

Amount of Each Receipt this Period  
500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Tracy Grizzle

Mailing Address 365 Brinkley Rd

City Powder Springs State GA Zip Code 30127-4208

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

Name of Employer AFG Inc. Occupation Owner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 27 / 2008  
**Transaction ID:** 81001.C12067  
 Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 2106 N. Ponce de Leon Ave

City Atlanta State GA Zip Code 30307

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

Name of Employer Self Employed Occupation self employed

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 07 / 10 / 2008  
**Transaction ID:** 80710.C11914  
 Amount of Each Receipt this Period 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Quinton Hammack

Mailing Address 5076 Old Mountain Trl

City Powder Springs State GA Zip Code 30127-4317

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

Name of Employer CW Matthews Construction Co. Occupation President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2008  
**Transaction ID:** 81001.C12191  
 Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    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)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Gregory Hanthorn

Mailing Address 910 Old Alabama Rd SW

City Mableton State GA Zip Code 30126-4110

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

Name of Employer Jones Day Occupation Attorney

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 08 / 06 / 2008  
**Transaction ID:** 81001.C11952  
 Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 314 E 4th St

City Rome State GA Zip Code 30161-3202

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt 08 / 22 / 2008  
**Transaction ID:** 81001.C12147  
 Amount of Each Receipt this Period 100.00

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

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

Mailing Address 314 E 4th St

City Rome State GA Zip Code 30161-3202

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2008  
**Transaction ID:** 81001.C12204  
 Amount of Each Receipt this Period 100.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1200.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 126

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.**

Full Name (Last, First, Middle Initial)

Charles Hardy

Mailing Address 188 Hardy Path

City State Zip Code  
Hiram GA 30141

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

Name of Employer Occupation  
Hardy Chevrolet Auto Dealer

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

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 2 / 2 0 0 8

Transaction ID: 81001.C12149

Amount of Each Receipt this Period

500.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)

Wesley Harris

Mailing Address 1427 Davistown Rd

City State Zip Code  
Taylorsville GA 30178-2052

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

Name of Employer Occupation  
None Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 550.00

Date of Receipt

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

Transaction ID: 81001.C11951

Amount of Each Receipt this Period

200.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)

C. Bryce Hartley

Mailing Address 4250 Blackland Dr

City State Zip Code  
Marietta GA 30067-4775

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

Name of Employer Occupation  
Self Employed Physician

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

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 2 / 2 0 0 8

Transaction ID: 81001.C12164

Amount of Each Receipt this Period

1000.00

Receipt

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

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

1700.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Ella Helm

Mailing Address 3385 Hallmark Dr SE

City Marietta State GA Zip Code 30067-5110

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 08 / 06 / 2008  
**Transaction ID:** 81001.C11934  
 Amount of Each Receipt this Period 100.00

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

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

Mailing Address 3385 Hallmark Dr SE

City Marietta State GA Zip Code 30067-5110

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt 08 / 22 / 2008  
**Transaction ID:** 81001.C12139  
 Amount of Each Receipt this Period 100.00

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

**C.** Full Name (Last, First, Middle Initial)  
E.W. Herron

Mailing Address 571 Keeler Woods Dr NW

City Marietta State GA Zip Code 30064-2043

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 03 / 2008  
**Transaction ID:** 81001.C12096  
 Amount of Each Receipt this Period 250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **450.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 126  
(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)  
Gingrey for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Charlotte Holmes

Mailing Address 4960 Burnt Hickory Rd NW

City Kennesaw State GA Zip Code 30152-3873

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 800.00

Date of Receipt 08 / 06 / 2008

Transaction ID: 81001.C11976

Amount of Each Receipt this Period 100.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Charlotte Holmes

Mailing Address 4960 Burnt Hickory Rd NW

City Kennesaw State GA Zip Code 30152-3873

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 900.00

Date of Receipt 09 / 19 / 2008

Transaction ID: 81001.C12186

Amount of Each Receipt this Period 100.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Noel Holtz

Mailing Address 491 Park Manor Dr NW

City Marietta State GA Zip Code 30064-1462

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

Name of Employer Marietta Neurology Associates Occupation Neurologist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 08 / 15 / 2008

Transaction ID: 81001.C11988

Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1200.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 126
	<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)  
Gingrey for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Bob Horsley		Date of Receipt MM / DD / YYYY 08 / 06 / 2008
	Mailing Address 3211 Village Blvd SE		Transaction ID: 81001.C11979
	City Rome	State GA	Zip Code 30161-5559
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer None	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 550.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jim Hutson		Date of Receipt MM / DD / YYYY 08 / 16 / 2008
	Mailing Address 2963 Summitop Ct NE		Transaction ID: 81001.C12054
	City Marietta	State GA	Zip Code 30066-1632
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Self Employed	Occupation Dentist	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Aris Iatridis		Date of Receipt MM / DD / YYYY 07 / 01 / 2008
	Mailing Address 1314 Glen Cedars Dr		Transaction ID: 80701.C11894
	City Mableton	State GA	Zip Code 30126-7607
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Georgia Lung Associates	Occupation Physician	Receipt <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 ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one) <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 38 / 126
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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen Imler	Date of Receipt MM / DD / YYYY 08 / 06 / 2008
	Mailing Address 599 Church St NE	<b>Transaction ID:</b> 81001.C11965
	City State Zip Code Marietta GA 30060-1359	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Self Employed CPA	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ruth Inglis	Date of Receipt MM / DD / YYYY 08 / 06 / 2008
	Mailing Address 999 Hood Rd NE Apt 173	<b>Transaction ID:</b> 81001.C11966
	City State Zip Code Marietta GA 30068-2269	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation None Retired	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 325.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Jarbeau	Date of Receipt MM / DD / YYYY 08 / 22 / 2008
	Mailing Address 1141 Lake Rd	<b>Transaction ID:</b> 81001.C12084
	City State Zip Code Hiram GA 30141-2312	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Jarbeau and Associates Owner	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1575.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 39 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Robert Jarrell  
Mailing Address PO Box 789  
City Buchanan State GA Zip Code 30113-0789  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1200.00  
Date of Receipt 08 / 07 / 2008  
Transaction ID: 81001.C11990  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
David Jarvis  
Mailing Address PO Box 452  
City Rockmart State GA Zip Code 30153-0452  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Crawford/Jarvis Equipment Occupation Sales  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 400.00  
Date of Receipt 09 / 03 / 2008  
Transaction ID: 81001.C12086  
Amount of Each Receipt this Period 200.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
George Johnson  
Mailing Address 1346 Marietta Country Club Dr NW  
City Kennesaw State GA Zip Code 30152-4734  
FEC ID number of contributing federal political committee. **C**  
Name of Employer JAMCo Inc Occupation Chairman  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2300.00  
Date of Receipt 08 / 22 / 2008  
Transaction ID: 81001.C12172  
Amount of Each Receipt this Period 2300.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Wesley Johnson

Mailing Address 9 Gregory Dr SW

City State Zip Code  
Rome GA 30165-3456

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 375.00

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

**Transaction ID:** 81001.C12167

Amount of Each Receipt this Period  
25.00

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

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

Mailing Address 738 First Cotton Dr

City State Zip Code  
Powder Springs GA 30127-6237

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

Name of Employer None Occupation Retired

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  
 0 9 / 1 9 / 2 0 0 8

**Transaction ID:** 81001.C12185

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Jo Kirchner

Mailing Address 1491 Benson Rd

City State Zip Code  
Dallas GA 30132-1637

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

Name of Employer Primrose Schools Occupation CEO

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  
 0 8 / 2 2 / 2 0 0 8

**Transaction ID:** 81001.C12153

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1275.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Arthur Kirk

Mailing Address 5401 Vine St

City Portsmouth State VA Zip Code 23703-4519

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Physician

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2008  
**Transaction ID:** 81001.C11994  
 Amount of Each Receipt this Period 100.00

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

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

Mailing Address 6 Oakhill Ln SW

City Rome State GA Zip Code 30165-4335

FEC ID number of contributing federal political committee. C

Name of Employer Harbin Clinic Occupation Vascular Surgeon

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 625.00

Date of Receipt 08 / 16 / 2008  
**Transaction ID:** 81001.C12030  
 Amount of Each Receipt this Period 375.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mark Knautz

Mailing Address 775 Sharpshooters Rdg NW

City Marietta State GA Zip Code 30064-4731

FEC ID number of contributing federal political committee. C

Name of Employer Marietta Dermatology Occupation Physician

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 09 / 08 / 2008  
**Transaction ID:** 81001.C12135  
 Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 1475.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
J. Smith Lanier  
Mailing Address PO Box 70  
City State Zip Code  
West Point GA 31833-0070  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
None Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
1000.00  
Date of Receipt  
M M / D D / Y Y Y Y  
0 8 / 1 6 / 2 0 0 8  
Transaction ID: 81001.C12052  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Gene Lee  
Mailing Address 124 Woodcrest Dr SW  
City State Zip Code  
Cartersville GA 30120-7414  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Peachtree Planning Financial Planning  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
1100.00  
Date of Receipt  
M M / D D / Y Y Y Y  
0 8 / 0 6 / 2 0 0 8  
Transaction ID: 81001.C11981  
Amount of Each Receipt this Period  
100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
James Lester  
Mailing Address P. O. Box 669  
City State Zip Code  
Rockmart GA 30153-0669  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
None Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
1000.00  
Date of Receipt  
M M / D D / Y Y Y Y  
0 7 / 2 5 / 2 0 0 8  
Transaction ID: 81001.C11926  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2100.00**  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    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)  
Gingrey for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ralph Hubert Liles</p> <p>Mailing Address 242 Brewster Field Rd</p> <p>City State Zip Code Cedartown GA 30125-5693</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Self Employed Farmer</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 8 / 2 2 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> 81001.C12174</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Richard Lindsay</p> <p>Mailing Address 2121 Hulsey Dr</p> <p>City State Zip Code Marietta GA 30066-5399</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Taco Mac Restaurateur</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 8 / 1 1 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> 81001.C11954</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Terry Lindsey</p> <p>Mailing Address 67 White Oak Dr SE</p> <p>City State Zip Code Cartersville GA 30121-2957</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Engineered Fabrics Corp. President</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 9 / 0 2 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> 81001.C12131</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">2500.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Brenda Madden  
Mailing Address 1575 Cave Springs Rd  
City Cedartown State GA Zip Code 30125-4605  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
Date of Receipt 08 / 22 / 2008  
Transaction ID: 81001.C12166  
Amount of Each Receipt this Period 250.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Judith Manning  
Mailing Address 480 Davis Carnes Ln NW  
City Marietta State GA Zip Code 30064-4716  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Manning Properties Occupation Realtor  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
Date of Receipt 09 / 03 / 2008  
Transaction ID: 81001.C12090  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
William Marks  
Mailing Address 3452 Laurel Green Ct NW  
City Kennesaw State GA Zip Code 30144-3086  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Etowah Eye Clinic Occupation Physician  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
Date of Receipt 08 / 25 / 2008  
Transaction ID: 81001.C12083  
Amount of Each Receipt this Period 250.00  
Receipt  
 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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    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)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Roger Martin

Mailing Address 105 Rollingwood Cir NW

City State Zip Code  
Rome GA 30165-1731

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

Name of Employer None Occupation Retired

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

Amount of Each Receipt this Period: 2000.00

Transaction ID: 81001.C12119

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

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

Mailing Address 238 Longleaf Dr

City State Zip Code  
Leesburg GA 31763-5266

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

Name of Employer Albany Orthopedic Center Occupation Physician, Orthopedics

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

Amount of Each Receipt this Period: 100.00

Transaction ID: 81001.C12171

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

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

Mailing Address 29 Bridgeview Dr SE

City State Zip Code  
Rome GA 30161-8472

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

Name of Employer Self Employed Occupation Business Owner

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

Amount of Each Receipt this Period: 1000.00

Transaction ID: 81001.C11920

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3100.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 126
	<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)  
Gingrey for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Lowery May	Date of Receipt MM / DD / YYYY 07 / 09 / 2008
	Mailing Address 17 Turnbull Dr SE	<b>Transaction ID:</b> 80709.C11909
	City State Zip Code Rome GA 30161-6476	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None	Occupation Homemaker	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Connie McMichen	Date of Receipt MM / DD / YYYY 08 / 16 / 2008
	Mailing Address PO Box 372	<b>Transaction ID:</b> 81001.C12037
	City State Zip Code Dallas GA 30132-0007	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Paulding Timber Products, Inc.	Occupation Office Manager	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael McRae	Date of Receipt MM / DD / YYYY 08 / 06 / 2008
	Mailing Address 348 Oak Crest Dr	<b>Transaction ID:</b> 81001.C11968
	City State Zip Code Cedartown GA 30125-2085	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self Employed	Occupation Attorney	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 126  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  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)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Carolyn Mills

Mailing Address 1860 Battlefield Rd SW

City State Zip Code  
Marietta GA 30064-3802

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

Name of Employer Self Employed Occupation  
Real Estate Broker

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

Date of Receipt  
MM / DD / YYYY  
08 / 27 / 2008

Transaction ID: 81001.C12074

Amount of Each Receipt this Period  
100.00

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

600.00

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

Mailing Address 603 N College St

City State Zip Code  
Cedartown GA 30125-2203

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

Name of Employer Polk County Government Occupation  
911 Director

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

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2008

Transaction ID: 81001.C12125

Amount of Each Receipt this Period  
500.00

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

500.00

**C.** Full Name (Last, First, Middle Initial)  
Swetal Patel

Mailing Address PO Box 88

City State Zip Code  
Dallas GA 30132-0002

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

Name of Employer Self Employed Occupation  
Gun Manufacturer

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

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2008

Transaction ID: 81001.C12109

Amount of Each Receipt this Period  
250.00

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

250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **850.00**

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

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

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

FOR LINE NUMBER: PAGE 48 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    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)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
James Payne  
Mailing Address 307 N Marble St  
City Rockmart State GA Zip Code 30153-2921  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GA Dept of Corrections Occupation Assistant Superintendent  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
Date of Receipt 08 / 06 / 2008  
Transaction ID: 81001.C11971  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Kathryn Petit  
Mailing Address 1392 Torpin Hill Ct NW  
City Kennesaw State GA Zip Code 30152-8275  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Tactical Flight Services Occupation Owner  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
Date of Receipt 08 / 27 / 2008  
Transaction ID: 81001.C12065  
Amount of Each Receipt this Period 250.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Raymond Phillips  
Mailing Address 187 Kensington Path  
City Dallas State GA Zip Code 30157-8595  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Paulding Quick Bail, Inc Occupation Owner  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
Date of Receipt 09 / 03 / 2008  
Transaction ID: 81001.C12116  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2250.00  
**TOTAL** This Period (last page this line number only) ..... ►



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 126
	<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)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Roger Plichta

Mailing Address 171 Village Pkwy NE

City Marietta State GA Zip Code 30067-4061

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt 09 / 03 / 2008

Transaction ID: 81001.C12113

Amount of Each Receipt this Period 250.00

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

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

Mailing Address 4641 Kempton PI NE

City Marietta State GA Zip Code 30067-3642

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt 08 / 06 / 2008

Transaction ID: 81001.C11991

Amount of Each Receipt this Period 200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Richard Poe

Mailing Address 391 Gum Springs Rd

City Dallas State GA Zip Code 30132-8462

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

Name of Employer EPAH Occupation Veterinarian

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 16 / 2008

Transaction ID: 81001.C12021

Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1450.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 126  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Larry Pogue

Mailing Address 18 Hunt Club Ln SW

City State Zip Code  
Cartersville GA 30120-7461

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

Name of Employer Occupation  
M & A Welding Supply Co. Business Owner

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

Amount of Each Receipt this Period  
500.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Larry Pogue

Mailing Address 18 Hunt Club Ln SW

City State Zip Code  
Cartersville GA 30120-7461

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

Name of Employer Occupation  
M & A Welding Supply Co. Business Owner

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

Amount of Each Receipt this Period  
500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Daniel L. Post

Mailing Address 3165 Shumard Way

City State Zip Code  
Marietta GA 30064-1237

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

Name of Employer Occupation  
Post & Associates CPA

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

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    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)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
A. Milburn Poston

Mailing Address 3795 Vermont Rd NE

City Atlanta State GA Zip Code 30319-1208

FEC ID number of contributing federal political committee. C

Name of Employer Traton Corporation Occupation Owner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 08 / 16 / 2008  
**Transaction ID:** 81001.C12006

Amount of Each Receipt this Period 500.00

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

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

Mailing Address 59 Old Mountain Rd

City Powder Springs State GA Zip Code 30127-4314

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation EMS

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 16 / 2008  
**Transaction ID:** 81001.C12016

Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 530 Hardage Farm Dr NW

City Marietta State GA Zip Code 30064-1382

FEC ID number of contributing federal political committee. C

Name of Employer Highland Commercial Bank Occupation President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 550.00

Date of Receipt 08 / 22 / 2008  
**Transaction ID:** 81001.C12146

Amount of Each Receipt this Period 50.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 1550.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Adrian Pressley

Mailing Address 218 Church St NE

City State Zip Code  
Marietta GA 30060-1604

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

Name of Employer Occupation  
None Homemaker

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

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

Transaction ID: 81001.C12071

Amount of Each Receipt this Period  
250.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Shannon Ragsdale

Mailing Address 2586 Cedarcrest Rd

City State Zip Code  
Acworth GA 30101-8293

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

Name of Employer Occupation  
Waste & Disposal Experts Owner

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

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

Transaction ID: 81001.C12068

Amount of Each Receipt this Period  
1500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Peter Re

Mailing Address 1461 Winterfield Ct NW

City State Zip Code  
Kennesaw GA 30152-6704

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

Name of Employer Occupation  
Marietta Neurology Associates Physician, Neurologist

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

Date of Receipt  
M M / D D / Y Y Y Y  
0 8 / 1 6 / 2 0 0 8

Transaction ID: 81001.C12003

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2750.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 126  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

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

Mailing Address PO Box 1068

City Hiram State GA Zip Code 30141-1068

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

Name of Employer Southern Historical News Occupation Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2008

Transaction ID: 81001.C12019

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address PO Box 6450

City Norcross State GA Zip Code 30091-6450

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

Name of Employer Waffle House Occupation CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2008

Transaction ID: 81001.C12015

Amount of Each Receipt this Period  
2300.00

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

**C.** Full Name (Last, First, Middle Initial)  
Penn Rooker

Mailing Address 2473 Kirk Ln NW

City Kennesaw State GA Zip Code 30152-4705

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 81001.C12190

Amount of Each Receipt this Period  
300.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3100.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 126

(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)  
Gingrey for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Sherman Ross

Mailing Address 300 Heard St

City State Zip Code  
Rockmart GA 30153-2320

FEC ID number of contributing federal political committee. C

Name of Employer State Farm Insurance Occupation Agent

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: 81001.C12124

Amount of Each Receipt this Period 500.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Don Shamblin

Mailing Address 505 Heyward Circle NW

City State Zip Code  
Marietta GA 30064

FEC ID number of contributing federal political committee. C

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: 81001.C12118

Amount of Each Receipt this Period 500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Karen Shearer

Mailing Address 575 Friendship Church Rd SW

City State Zip Code  
Marietta GA 30064-1521

FEC ID number of contributing federal political committee. C

Name of Employer Aqua Rama Pools, Inc. Occupation Business Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt M M / D D / Y Y Y Y  
0 8 / 1 6 / 2 0 0 8

Transaction ID: 81001.C12000

Amount of Each Receipt this Period 1000.00

Receipt  
 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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 126  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Dan Simon

Mailing Address PO Box 525

City State Zip Code  
Rockmart GA 30153-0525

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

Name of Employer Occupation  
Self Employed Attorney

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

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2008

Transaction ID: 81001.C11978

Amount of Each Receipt this Period  
250.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Stuart Simon

Mailing Address 4515 Hampton Woods Dr NE

City State Zip Code  
Marietta GA 30068-5402

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

Name of Employer Occupation  
Georgia Lung Associates, P.C. Physician

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

Date of Receipt  
MM / DD / YYYY  
08 / 20 / 2008

Transaction ID: 81001.C12060

Amount of Each Receipt this Period  
1000.00

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

**C.**

Full Name (Last, First, Middle Initial)  
John Skubina

Mailing Address 981 Thousand Oaks Bnd NW

City State Zip Code  
Kennesaw GA 30152-2844

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

Name of Employer Occupation  
Engineered Fabrics Corp. CEO

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

Date of Receipt  
MM / DD / YYYY  
08 / 26 / 2008

Transaction ID: 81001.C12082

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Earl Smith

Mailing Address 964 Industrial Park Dr

City State Zip Code  
Marietta GA 30062-2433

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

Name of Employer Earl Smith Heating & AC Occupation Business Owner

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

Date of Receipt  
MM / DD / YYYY  
08 / 22 / 2008

Transaction ID: 81001.C12176

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
J.T. Soules

Mailing Address 860 N College Dr

City State Zip Code  
Cedartown GA 30125-7721

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

Name of Employer None Occupation Retired

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

Date of Receipt  
MM / DD / YYYY  
08 / 22 / 2008

Transaction ID: 81001.C12159

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Jacob Stephens

Mailing Address 61 Harris Loop

City State Zip Code  
Dallas GA 30157-8266

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

Name of Employer Self Employed Occupation Investor

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

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 81001.C12184

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 57 / 126</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Donna Stephenson</p> <p>Mailing Address PO Box 43326</p> <p>City Atlanta State GA Zip Code 30336-0326</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer None Occupation Homemaker</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">2300.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <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>7</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p><b>Transaction ID:</b> 80701.C11895</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">2300.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	1		2	0	0	8												

<p><b>B.</b> Full Name (Last, First, Middle Initial) Barbara Stover</p> <p>Mailing Address 5791 Wetwing Cv NW</p> <p>City Acworth State GA Zip Code 30101-6926</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer None Occupation Homemaker</p> <p>Receipt For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <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>9</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p><b>Transaction ID:</b> 81001.C12108</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">250.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	3		2	0	0	8												

<p><b>C.</b> Full Name (Last, First, Middle Initial) Brian Stover</p> <p>Mailing Address 69 Snowberry Path</p> <p>City Dallas State GA Zip Code 30132-2856</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer BLD Occupation Owner</p> <p>Receipt For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">2000.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <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>9</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p><b>Transaction ID:</b> 81001.C12111</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">2000.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	3		2	0	0	8												

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">4550.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 126

(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)  
Gingrey for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Kurt Stuenkel

Mailing Address 35 Huntington Rd SW

City State Zip Code  
Rome GA 30165-6661

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Floyd Medical Center Administrator

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

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	0	8

Transaction ID: 81001.C12148

Amount of Each Receipt this Period  

	1000.00
--	---------

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

**B.**

Full Name (Last, First, Middle Initial)  
Drew Sutton

Mailing Address 1244 Gordon Combs Rd NW

City State Zip Code  
Marietta GA 30064-1251

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Self Employed Physician

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

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	0	8

Transaction ID: 81001.C12062

Amount of Each Receipt this Period  

	500.00
--	--------

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

**C.**

Full Name (Last, First, Middle Initial)  
Frances Sutton

Mailing Address 1002 Chestnut Hill Rd SW

City State Zip Code  
Marietta GA 30064-5502

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Sutton Properties, Inc. General Contractor

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

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	0	8

Transaction ID: 81001.C12151

Amount of Each Receipt this Period  

	1000.00
--	---------

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 126  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Diane Tatum

Mailing Address 1304 Marietta Country Club Dr NW

City Kennesaw State GA Zip Code 30152-4728

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

Name of Employer Tatum Steel Buildings Occupation Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 09 / 04 / 2008  
Transaction ID: 81001.C12134  
Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 431 Holland Springs Dr

City Powder Springs State GA Zip Code 30127-8313

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

Name of Employer First Georgian Bank Occupation President/CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 09 / 03 / 2008  
Transaction ID: 81001.C12106  
Amount of Each Receipt this Period 500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Jimmy Thomasson

Mailing Address 107 Woodbine Cir

City Newnan State GA Zip Code 30263-2617

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2008  
Transaction ID: 81001.C12042  
Amount of Each Receipt this Period 100.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1600.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 126
	<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)  
Gingrey for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Cindy Thompson	Date of Receipt MM / DD / YYYY 08 / 27 / 2008
	Mailing Address 402 Dooley Rd	<b>Transaction ID:</b> 81001.C12072
	City State Zip Code Dallas GA 30132-2065	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Thompson Grading, Inc.	Occupation Owner	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Wayne Tibbitts	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 477 Indian Lake Ct	<b>Transaction ID:</b> 81001.C12110
	City State Zip Code Hiram GA 30141-2111	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Paulding Properties	Occupation Developer	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) J. Scott Tillery	Date of Receipt MM / DD / YYYY 08 / 16 / 2008
	Mailing Address 226 Lakeview Dr	<b>Transaction ID:</b> 81001.C12004
	City State Zip Code Cedartown GA 30125-2247	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self Employed	Occupation Plumbing Contractor	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Roger Tillery  
Mailing Address 444 Huntington Rd  
City Cedartown State GA Zip Code 30125-6228  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Utility Grading Contractor  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00  
Date of Receipt 08 / 16 / 2008  
Transaction ID: 81001.C12005  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Catherine Wall  
Mailing Address 365 Baldwin Rd  
City Rockmart State GA Zip Code 30153-4341  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Community Bank of Rockmart Occupation Banker  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00  
Date of Receipt 08 / 22 / 2008  
Transaction ID: 81001.C12141  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Tim Wallis  
Mailing Address 6 River Pine Dr SW  
City Rome State GA Zip Code 30165-8562  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Wallis Printing Co. Occupation Executive  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00  
Date of Receipt 09 / 19 / 2008  
Transaction ID: 81001.C12202  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Tren Watson

Mailing Address 195 Applewood Ln

City Acworth State GA Zip Code 30101-2625

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

Name of Employer Westside Bank Occupation President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 08 / 22 / 2008  
**Transaction ID:** 81001.C12154  
 Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 2218 Tayside Xing NW

City Kennesaw State GA Zip Code 30152-6720

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

Name of Employer Scientific Research Group Occupation CEO

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 03 / 2008  
**Transaction ID:** 81001.C12115  
 Amount of Each Receipt this Period 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Teresa Watters

Mailing Address 22 Belmont Dr SW

City Rome State GA Zip Code 30165-6623

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 09 / 19 / 2008  
**Transaction ID:** 81001.C12193  
 Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3000.00

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

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

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

FOR LINE NUMBER: PAGE 63 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Charlie Watts

Mailing Address 505 Hardee St

City State Zip Code  
Dallas GA 30132-4709

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

Name of Employer Self Employed      Occupation Lobbyist

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼      1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	2	/	2	0	0	8

**Transaction ID:** 81001.C12155

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address 215 Fair Oaks Rd

City State Zip Code  
Cedartown GA 30125-2011

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

Name of Employer None      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
0	8	/	0	6	/	2	0	0	8

**Transaction ID:** 81001.C11974

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address 80 Golfview Club Dr

City State Zip Code  
Newnan GA 30263-3300

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

Name of Employer None      Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼      550.00

Date of Receipt  

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

**Transaction ID:** 81001.C12012

Amount of Each Receipt this Period  
100.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ►      **2100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 126
	<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)  
Gingrey for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Ann White		Date of Receipt
	Mailing Address 210 E 2nd Ave Apt 300		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 09 / 2008
	City	State	Zip Code
	Rome	GA	30161-1707
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 80709.C11913
Name of Employer None		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
			Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Ann White		Date of Receipt
	Mailing Address 210 E 2nd Ave Apt 300		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 09 / 2008
	City	State	Zip Code
	Rome	GA	30161-1707
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 80709.C11910
Name of Employer None		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
			Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Ann White		Date of Receipt
	Mailing Address 210 E 2nd Ave Apt 300		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 09 / 2008
	City	State	Zip Code
	Rome	GA	30161-1707
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 80709.C11912
Name of Employer None		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
			Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 5600.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 65 / 126</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ann White</p> <p>Mailing Address 210 E 2nd Ave Apt 300</p> <p>City State Zip Code Rome GA 30161-1707</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer None Occupation Homemaker</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">6600.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 09 / 2008</p> <p><b>Transaction ID:</b> 80709.C11911</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Ann White</p> <p>Mailing Address 210 E 2nd Ave Apt 300</p> <p>City State Zip Code Rome GA 30161-1707</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer None Occupation Homemaker</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">5600.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 28 / 2008</p> <p><b>Transaction ID:</b> 81001.C11928</p> <p>Amount of Each Receipt this Period -1000.00</p> <p>Reattribution Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> REATTRIBUTION TO SPOUSE</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Ann White</p> <p>Mailing Address 210 E 2nd Ave Apt 300</p> <p>City State Zip Code Rome GA 30161-1707</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer None Occupation Homemaker</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">3300.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 28 / 2008</p> <p><b>Transaction ID:</b> 81001.C11927</p> <p>Amount of Each Receipt this Period -2300.00</p> <p>Reattribution Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> REATTRIBUTION TO SPOUSE</p>
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<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<p>1000.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Maxine White

Mailing Address PO Box 194

City State Zip Code  
Dallas GA 30132-0004

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

Name of Employer Occupation  
None Homemaker

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 03 / 2008

**Transaction ID:** 81001.C12103

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 210 E 2nd Ave Apt 300

City State Zip Code  
Rome GA 30161-1707

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

Name of Employer Occupation  
American Insurance Mkt Co-rp. President

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 28 / 2008

**Transaction ID:** 81001.C11930

Amount of Each Receipt this Period  
1000.00

Reattribution Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
 REATTRIBUTION FROM SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
Mike White

Mailing Address 210 E 2nd Ave Apt 300

City State Zip Code  
Rome GA 30161-1707

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

Name of Employer Occupation  
American Insurance Mkt Co-rp. President

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 28 / 2008

**Transaction ID:** 81001.C11929

Amount of Each Receipt this Period  
2300.00

Reattribution Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
 REATTRIBUTION FROM SPOUSE

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 67 / 126  
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 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Donald Wilson

Mailing Address PO Box 164

City State Zip Code  
Cedartown GA 30125-0164

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

Name of Employer Occupation  
State of Georgia Attorney

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

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2008

Transaction ID: 81001.C11970

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 735 N Marshall St

City State Zip Code  
Cedartown GA 30125-2252

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

Name of Employer Occupation  
None Retired

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

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2008

Transaction ID: 81001.C12123

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Roy Witherington

Mailing Address 1 7th St Apt 1405

City State Zip Code  
Augusta GA 30901-1388

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

Name of Employer Occupation  
None Retired

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

Date of Receipt  
MM / DD / YYYY  
08 / 18 / 2008

Transaction ID: 81001.C12137

Amount of Each Receipt this Period  
100.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1600.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
J. Barnett Woodruff  
Mailing Address 1909 Carter Ave  
City Columbus State GA Zip Code 31906-1466  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Real Estate  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt 09 / 03 / 2008  
Transaction ID: 81001.C12094  
Amount of Each Receipt this Period 500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Harold Wyatt  
Mailing Address 801 N College St  
City Cedartown State GA Zip Code 30125-2207  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00  
Date of Receipt 08 / 06 / 2008  
Transaction ID: 81001.C11962  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Glenn York  
Mailing Address 406 Woodlawn Dr  
City Cedartown State GA Zip Code 30125-2027  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1400.00  
Date of Receipt 08 / 06 / 2008  
Transaction ID: 81001.C11961  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**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)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 126  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial) Paul Zolty		Date of Receipt MM / DD / YYYY 08 / 20 / 2008	
Mailing Address 515 Timber Valley Rd NE		Transaction ID: 81001.C12061	
City Atlanta	State GA	Zip Code 30342-2109	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer GA Lung Associates	Occupation Physician	Election Cycle-to-Date ▼ 2000.00	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	107800.00

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 126  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  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)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial)  
Natl Republican Congressional Committee

Mailing Address 320 1st St SE

City State Zip Code  
Washington DC 20003-1838

FEC ID number of contributing federal political committee. **C** C00075820

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
98.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 05 / 2008

Transaction ID: 81001.C12085

Amount of Each Receipt this Period  
98.00

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

Blast Fax

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	98.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	98.00

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 126

(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

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)  
Gingrey for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Community Bank of the South

Mailing Address 3016 Atlanta Rd SE

City State Zip Code  
Smyrna GA 30080-3856

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
20657.77

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2008

Transaction ID: 81001.C11956

Amount of Each Receipt this Period

712.17

Other Receipt

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

**B.**

Full Name (Last, First, Middle Initial)  
Community Bank of the South

Mailing Address 3016 Atlanta Rd SE

City State Zip Code  
Smyrna GA 30080-3856

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
20998.65

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 20 / 2008

Transaction ID: 81001.C12063

Amount of Each Receipt this Period

340.88

Other Receipt

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

**C.**

Full Name (Last, First, Middle Initial)  
Community Bank of the South

Mailing Address 3016 Atlanta Rd SE

City State Zip Code  
Smyrna GA 30080-3856

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
21347.68

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 29 / 2008

Transaction ID: 81001.C12136

Amount of Each Receipt this Period

349.03

Other Receipt

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

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

1402.08

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 126  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Community Bank of the South

Mailing Address 3016 Atlanta Rd SE

City State Zip Code  
Smyrna GA 30080-3856

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
21835.66

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	9	/	2	0	0	8

Transaction ID: 81001.C12206

Amount of Each Receipt this Period  
487.98

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

**B.**

Full Name (Last, First, Middle Initial)  
Community Bank of the South

Mailing Address 3016 Atlanta Rd SE

City State Zip Code  
Smyrna GA 30080-3856

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
22119.10

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	8

Transaction ID: 81012.C12238

Amount of Each Receipt this Period  
283.44

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

**C.**

Full Name (Last, First, Middle Initial)  
Georgian Bank

Mailing Address 3300 Cumberland Blvd SE

City State Zip Code  
Atlanta GA 30339-8103

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
519.40

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	1	/	2	0	0	8

Transaction ID: 81001.C11924

Amount of Each Receipt this Period  
264.30

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1035.72**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 126  
 (check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial)  
Georgian Bank

Mailing Address 3300 Cumberland Blvd SE

City State Zip Code  
Atlanta GA 30339-8103

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
785.07

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

Transaction ID: 81001.C12178

Amount of Each Receipt this Period  
265.67

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	265.67
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2703.47

# 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)  
Gingrey for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) 21st Century Group  Mailing Address 434 New Jersey Ave SE  City Washington State DC Zip Code 20003-4008  Purpose of Disbursement Event Catering Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3836 Date of Disbursement 08 / 21 / 2008  Amount of Each Disbursement this Period 1750.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  EVENT CATERING
<b>B.</b>	Full Name (Last, First, Middle Initial) ADP Easy Pay  Mailing Address 5800 Windward Pkwy  City Alpharetta State GA Zip Code 30005-8802  Purpose of Disbursement Payroll Expenses Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3784 Date of Disbursement 07 / 02 / 2008  Amount of Each Disbursement this Period 56.81  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  PAYROLL EXPENSES
<b>C.</b>	Full Name (Last, First, Middle Initial) ADP Easy Pay  Mailing Address 5800 Windward Pkwy  City Alpharetta State GA Zip Code 30005-8802  Purpose of Disbursement Payroll Expenses Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3788 Date of Disbursement 07 / 30 / 2008  Amount of Each Disbursement this Period 56.78  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  PAYROLL EXPENSES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>1863.59</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

A.	Full Name (Last, First, Middle Initial) ADP Easy Pay	Transaction ID: 81001.E3790 Date of Disbursement 07 / 31 / 2008
	Mailing Address 5800 Windward Pkwy	Amount of Each Disbursement this Period 1249.83
	City Alpharetta State GA Zip Code 30005-8802	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Taxes	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL TAXES

B.	Full Name (Last, First, Middle Initial) ADP Easy Pay	Transaction ID: 81001.E3819 Date of Disbursement 08 / 27 / 2008
	Mailing Address 5800 Windward Pkwy	Amount of Each Disbursement this Period 55.38
	City Alpharetta State GA Zip Code 30005-8802	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Expenses	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL EXPENSES

C.	Full Name (Last, First, Middle Initial) ADP Easy Pay	Transaction ID: 81001.E3821 Date of Disbursement 08 / 29 / 2008
	Mailing Address 5800 Windward Pkwy	Amount of Each Disbursement this Period 1134.52
	City Alpharetta State GA Zip Code 30005-8802	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Taxes	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL TAXES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2439.73
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

A.	Full Name (Last, First, Middle Initial) ADP Easy Pay	Transaction ID: 81012.E3914 Date of Disbursement 09 / 30 / 2008
	Mailing Address 5800 Windward Pkwy	Amount of Each Disbursement this Period 2189.28
	City Alpharetta State GA Zip Code 30005-8802	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL TAXES

B.	Full Name (Last, First, Middle Initial) ADP Easy Pay	Transaction ID: 81012.E3915 Date of Disbursement 09 / 30 / 2008
	Mailing Address 5800 Windward Pkwy	Amount of Each Disbursement this Period 65.48
	City Alpharetta State GA Zip Code 30005-8802	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Expenses Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL EXPENSES

C.	Full Name (Last, First, Middle Initial) Advertising Dynamics, Inc.	Transaction ID: 81001.E3837 Date of Disbursement 08 / 21 / 2008
	Mailing Address PO Box 5362	Amount of Each Disbursement this Period 662.45
	City Rome State GA Zip Code 30162-5362	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Advertising Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		ADVERTISING

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2917.21
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 81001.E3732 Date of Disbursement 07 / 08 / 2008
	Mailing Address 3016 Atlanta Rd SE	Amount of Each Disbursement this Period 11986.49
	City Smyrna State GA Zip Code 30080-3856	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement See Below	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SEE BELOW

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 81001.E3738 Date of Disbursement 07 / 08 / 2008
	Mailing Address 3016 Atlanta Rd SE	Amount of Each Disbursement this Period 35.00
	City Smyrna State GA Zip Code 30080-3856	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Fees	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: SERVICE FEES

C.	Full Name (Last, First, Middle Initial) Aristotle Intl Inc.	Transaction ID: 81001.E3734 Date of Disbursement 07 / 08 / 2008
	Mailing Address 2285 Peachtree Road	Amount of Each Disbursement this Period 7100.00
	City Atlanta State GA Zip Code 30309-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Software	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: SOFTWARE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	11986.49
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

A.	Full Name (Last, First, Middle Initial) Attic Self Storage	Transaction ID: 81001.E3739
	Mailing Address 4730 Lower Roswell Rd	Date of Disbursement 07 / 08 / 2008
	City Marietta State GA Zip Code 30068-4240	Amount of Each Disbursement this Period 90.00
	Purpose of Disbursement Storage	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<b>[MEMO ITEM]</b> MEMO: STORAGE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Delta Airlines	Transaction ID: 81001.E3733
	Mailing Address 1050 Delta Blvd.	Date of Disbursement 07 / 08 / 2008
	City Atlanta State GA Zip Code 30354-	Amount of Each Disbursement this Period 1517.76
	Purpose of Disbursement Travel Expenses	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSES
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Dish Network	Transaction ID: 81001.E3741
	Mailing Address 9601 S Meridian Blvd	Date of Disbursement 07 / 08 / 2008
	City Englewood State CO Zip Code 80112-5905	Amount of Each Disbursement this Period 47.98
	Purpose of Disbursement Television Service	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<b>[MEMO ITEM]</b> MEMO: TELEVISION SERVICE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) The Stoneridge Group <hr/> Mailing Address 13010 Morris Road Sixth Floor <hr/> City Alpharetta State GA Zip Code 30004- <hr/> Purpose of Disbursement Website Support Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3735 Date of Disbursement 07 / 08 / 2008 <hr/> Amount of Each Disbursement this Period 2317.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: WEBSITE SUPPORT
	Category/Type

<b>B.</b> Full Name (Last, First, Middle Initial) Total Wine & More <hr/> Mailing Address 680 Ernest W Barrett Parkway <hr/> City Kennesaw State GA Zip Code 30144- <hr/> Purpose of Disbursement Event Beverages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3736 Date of Disbursement 07 / 08 / 2008 <hr/> Amount of Each Disbursement this Period 276.54 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: EVENT BEVERAGES
	Category/Type

<b>C.</b> Full Name (Last, First, Middle Initial) U. S. Post Office <hr/> Mailing Address Marietta Main PO <hr/> City Marietta State GA Zip Code 30060- <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3740 Date of Disbursement 07 / 08 / 2008 <hr/> Amount of Each Disbursement this Period 203.15 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: POSTAGE
	Category/Type

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

# 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)

<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)  
Gingrey for Congress

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 81001.E3786 Date of Disbursement 07 / 08 / 2008
	Mailing Address 3016 Atlanta Rd SE	Amount of Each Disbursement this Period 4.50
	City Smyrna State GA Zip Code 30080-3856	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Transaction Fees Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	TRANSACTION FEES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 81001.E3787 Date of Disbursement 07 / 11 / 2008
	Mailing Address 3016 Atlanta Rd SE	Amount of Each Disbursement this Period 28.80
	City Smyrna State GA Zip Code 30080-3856	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Transaction Fees Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	TRANSACTION FEES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 81001.E3813 Date of Disbursement 08 / 12 / 2008
	Mailing Address 3016 Atlanta Rd SE	Amount of Each Disbursement this Period 847.99
	City Smyrna State GA Zip Code 30080-3856	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement See Below Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	SEE BELOW
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>881.29</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial)  
Ken Stanton Music

Mailing Address 119 Cobb Pkwy N Ste A

City Marietta State GA Zip Code 30062-3576

Purpose of Disbursement  
Sound System

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 81001.E3814  
Date of Disbursement

08 / 12 / 2008

Amount of Each Disbursement this Period

847.99

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

**[MEMO ITEM]**  
MEMO: SOUND SYSTEM

B.

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address 3016 Atlanta Rd SE

City Smyrna State GA Zip Code 30080-3856

Purpose of Disbursement  
See Below

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 81001.E3800  
Date of Disbursement

08 / 13 / 2008

Amount of Each Disbursement this Period

2287.03

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

SEE BELOW

C.

Full Name (Last, First, Middle Initial)  
Attic Self Storage

Mailing Address 4730 Lower Roswell Rd

City Marietta State GA Zip Code 30068-4240

Purpose of Disbursement  
Storage

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 81001.E3803  
Date of Disbursement

08 / 13 / 2008

Amount of Each Disbursement this Period

90.00

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

**[MEMO ITEM]**  
MEMO: STORAGE

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

2287.03

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Costco Mailing Address 1200 S Fern St City Arlington State VA Zip Code 22202-2862 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3801 Date of Disbursement 08 / 13 / 2008	Amount of Each Disbursement this Period 35.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES
<b>B.</b>	Full Name (Last, First, Middle Initial) Delta Airlines Mailing Address 1050 Delta Blvd. City Atlanta State GA Zip Code 30354- Purpose of Disbursement Travel Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3809 Date of Disbursement 08 / 13 / 2008	Amount of Each Disbursement this Period 1175.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSES
<b>C.</b>	Full Name (Last, First, Middle Initial) Dish Network Mailing Address 9601 S Meridian Blvd City Englewood State CO Zip Code 80112-5905 Purpose of Disbursement Television Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3805 Date of Disbursement 08 / 13 / 2008	Amount of Each Disbursement this Period 47.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: TELEVISION SERVICE

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)  
Gingrey for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Home Depot <hr/> Mailing Address 2350 Dallas Hwy SW <hr/> City Marietta State GA Zip Code 30064-2750 <hr/> Purpose of Disbursement Office Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81001.E3807 <b>Date of Disbursement</b> 08 / 13 / 2008
	Amount of Each Disbursement this Period 30.33
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES
<b>B.</b> Full Name (Last, First, Middle Initial) House Members Dining Room <hr/> Mailing Address US Capitol <hr/> City Washington State DC Zip Code 20515-0001 <hr/> Purpose of Disbursement Meeting Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81001.E3808 <b>Date of Disbursement</b> 08 / 13 / 2008
	Amount of Each Disbursement this Period 75.10
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b> MEMO: MEETING EXPENSE
<b>C.</b> Full Name (Last, First, Middle Initial) Office Depot <hr/> Mailing Address 1196 Cobb Pkwy N <hr/> City Marietta State GA Zip Code 30062-2416 <hr/> Purpose of Disbursement Office Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81001.E3810 <b>Date of Disbursement</b> 08 / 13 / 2008
	Amount of Each Disbursement this Period 49.72
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES

**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)  
Gingrey for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Petersens Florist Co</p> <p>Mailing Address 268 Church St NE</p> <p>City Marietta State GA Zip Code 30060-1668</p> <p>Purpose of Disbursement Flowers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3802 <b>Date of Disbursement</b> 08 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 108.65</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: FLOWERS</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Shell Oil</p> <p>Mailing Address PO Box 2463</p> <p>City Houston State TX Zip Code 77252-2463</p> <p>Purpose of Disbursement Travel Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3812 <b>Date of Disbursement</b> 08 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 56.03</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSES</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 2535B Dallas Hwy SW</p> <p>City Marietta State GA Zip Code 30064-2543</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3806 <b>Date of Disbursement</b> 08 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 392.15</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES</p>

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

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

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

A.	Full Name (Last, First, Middle Initial) U. S. Post Office	Transaction ID: 81001.E3811 Date of Disbursement 08 / 13 / 2008
	Mailing Address: Marietta Main PO	Amount of Each Disbursement this Period: 11.98
	City: Marietta State: GA Zip Code: 30060- Purpose of Disbursement: Postage Candidate Name: _____ 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: POSTAGE

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 81012.E3856 Date of Disbursement 09 / 05 / 2008
	Mailing Address: 3016 Atlanta Rd SE	Amount of Each Disbursement this Period: 3584.87
	City: Smyrna State: GA Zip Code: 30080-3856 Purpose of Disbursement: See Below Candidate Name: _____ 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SEE BELOW

C.	Full Name (Last, First, Middle Initial) Attic Self Storage	Transaction ID: 81012.E3900 Date of Disbursement 09 / 05 / 2008
	Mailing Address: 4730 Lower Roswell Rd	Amount of Each Disbursement this Period: 90.00
	City: Marietta State: GA Zip Code: 30068-4240 Purpose of Disbursement: Storage Candidate Name: _____ 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: STORAGE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	3584.87
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)  
Gingrey for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Delta Airlines</p> <p>Mailing Address 1050 Delta Blvd.</p> <p>City Atlanta State GA Zip Code 30354-</p> <p>Purpose of Disbursement Travel Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81012.E3896 <b>Date of Disbursement</b> 09 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 459.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSES</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Dish Network</p> <p>Mailing Address 9601 S Meridian Blvd</p> <p>City Englewood State CO Zip Code 80112-5905</p> <p>Purpose of Disbursement Television Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81012.E3903 <b>Date of Disbursement</b> 09 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 47.98</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: TELEVISION SERVICE</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Double Tree</p> <p>Mailing Address 9336 Civic Center Dr</p> <p>City Beverly Hills State CA Zip Code 90210-3604</p> <p>Purpose of Disbursement Travel Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81012.E3897 <b>Date of Disbursement</b> 09 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 600.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSES</p>

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

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

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Office Depot Mailing Address 1196 Cobb Pkwy N City Marietta State GA Zip Code 30062-2416 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81012.E3899 Date of Disbursement 09 / 05 / 2008
	Amount of Each Disbursement this Period 83.72
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES
	Category/Type

<b>B.</b> Full Name (Last, First, Middle Initial) Petersens Florist Co Mailing Address 268 Church St NE City Marietta State GA Zip Code 30060-1668 Purpose of Disbursement Flowers Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81012.E3901 Date of Disbursement 09 / 05 / 2008
	Amount of Each Disbursement this Period 119.25
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b> MEMO: FLOWERS
	Category/Type

<b>C.</b> Full Name (Last, First, Middle Initial) Shell Oil Mailing Address PO Box 2463 City Houston State TX Zip Code 77252-2463 Purpose of Disbursement Travel Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81012.E3898 Date of Disbursement 09 / 05 / 2008
	Amount of Each Disbursement this Period 83.69
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSES
	Category/Type

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

**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)

<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)  
Gingrey for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) The Silver Platter Mailing Address 2145 Roswell Rd City Marietta State GA Zip Code 30062-0821 Purpose of Disbursement Event Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81012.E3904 Date of Disbursement 09 / 05 / 2008
	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 <b>[MEMO ITEM]</b> MEMO: EVENT CATERING

<b>B.</b> Full Name (Last, First, Middle Initial) Total Wine & More Mailing Address 680 Ernest W Barrett Parkway City Kennesaw State GA Zip Code 30144- Purpose of Disbursement Event Refreshments Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81012.E3902 Date of Disbursement 09 / 05 / 2008
	Amount of Each Disbursement this Period 256.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: EVENT REFRESHMENTS

<b>C.</b> Full Name (Last, First, Middle Initial) U. S. Post Office Mailing Address Marietta Main PO City Marietta State GA Zip Code 30060- Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81012.E3906 Date of Disbursement 09 / 05 / 2008
	Amount of Each Disbursement this Period 630.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: POSTAGE

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



**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)

<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)  
Gingrey for Congress

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 81012.E3918 Date of Disbursement 09 / 11 / 2008
	Mailing Address 3016 Atlanta Rd SE	Amount of Each Disbursement this Period 193.15
	City Smyrna State GA Zip Code 30080-3856	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Transaction Fees	TRANSACTION FEES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ameripress	Transaction ID: 81012.E3858 Date of Disbursement 09 / 05 / 2008
	Mailing Address 198 N Fairground St NE	Amount of Each Disbursement this Period 233.20
	City Marietta State GA Zip Code 30060-1533	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing	PRINTING
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Aristotle Intl Inc.	Transaction ID: 81012.E3860 Date of Disbursement 09 / 05 / 2008
	Mailing Address 2285 Peachtree Road	Amount of Each Disbursement this Period 2100.00
	City Atlanta State GA Zip Code 30309-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Software	SOFTWARE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2526.35</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) AT&amp;T</p> <p>Mailing Address PO Box 9001309</p> <p>City Louisville State KY Zip Code 40290-1309</p> <p>Purpose of Disbursement Telephone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3766 <b>Date of Disbursement</b> 07 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 293.85</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>TELEPHONE</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) AT&amp;T</p> <p>Mailing Address PO Box 9001309</p> <p>City Louisville State KY Zip Code 40290-1309</p> <p>Purpose of Disbursement Telephone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3832 <b>Date of Disbursement</b> 08 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 292.37</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>TELEPHONE</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) AT&amp;T</p> <p>Mailing Address PO Box 9001309</p> <p>City Louisville State KY Zip Code 40290-1309</p> <p>Purpose of Disbursement Telephone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81012.E3864 <b>Date of Disbursement</b> 09 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 300.92</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>TELEPHONE</p>

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

887.14

**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)  
Gingrey for Congress

A.	Full Name (Last, First, Middle Initial) Bankcard  Mailing Address PO Box 569200  City Dallas State TX Zip Code 75356-9200  Purpose of Disbursement Transaction Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3785 Date of Disbursement 07 / 02 / 2008  Amount of Each Disbursement this Period 120.98  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>TRANSACTION FEES</b>
B.	Full Name (Last, First, Middle Initial) Bankcard  Mailing Address PO Box 569200  City Dallas State TX Zip Code 75356-9200  Purpose of Disbursement See Below Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3742 Date of Disbursement 07 / 28 / 2008  Amount of Each Disbursement this Period 871.48  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>SEE BELOW</b>
C.	Full Name (Last, First, Middle Initial) The Congressional Club  Mailing Address 2001 New Hampshire Ave NW  City Washington State DC Zip Code 20009-3414  Purpose of Disbursement Book Purchase Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3744 Date of Disbursement 07 / 28 / 2008  Amount of Each Disbursement this Period 480.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>[MEMO ITEM]</b> <b>MEMO: BOOK PURCHASE</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>992.46</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) House Members Dining Room  Mailing Address US Capitol  City Washington State DC Zip Code 20515-0001 Purpose of Disbursement Meeting Expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3745 Date of Disbursement 07 / 28 / 2008  Amount of Each Disbursement this Period 174.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: MEETING EXPENSE
<b>B.</b>	Full Name (Last, First, Middle Initial) The Kroger Company  Mailing Address 104 Vine Street  City Cincinnati State OH Zip Code 45202-1100 Purpose of Disbursement Travel Expenses Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3743 Date of Disbursement 07 / 28 / 2008  Amount of Each Disbursement this Period 46.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSES
<b>C.</b>	Full Name (Last, First, Middle Initial) Shell Oil  Mailing Address PO Box 2463  City Houston State TX Zip Code 77252-2463 Purpose of Disbursement Travel Expenses Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3746 Date of Disbursement 07 / 28 / 2008  Amount of Each Disbursement this Period 75.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSES

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

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
Gingrey for Congress

A.	Full Name (Last, First, Middle Initial) Bankcard	Transaction ID: 81001.E3817 Date of Disbursement 08 / 04 / 2008
	Mailing Address PO Box 569200	Amount of Each Disbursement this Period 184.76
	City Dallas State TX Zip Code 75356-9200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Transaction Fees Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		TRANSACTION FEES

B.	Full Name (Last, First, Middle Initial) Bankcard	Transaction ID: 81001.E3815 Date of Disbursement 08 / 18 / 2008
	Mailing Address PO Box 569200	Amount of Each Disbursement this Period 150.84
	City Dallas State TX Zip Code 75356-9200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement See Below-No Itemization Necessary Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SEE BELOW-NO ITEMIZATION NECESSARY

C.	Full Name (Last, First, Middle Initial) Bankcard	Transaction ID: 81012.E3916 Date of Disbursement 09 / 03 / 2008
	Mailing Address PO Box 569200	Amount of Each Disbursement this Period 299.21
	City Dallas State TX Zip Code 75356-9200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Transaction Fees Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		TRANSACTION FEES

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

634.81

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)  
Gingrey for Congress

A.	Full Name (Last, First, Middle Initial) Bankcard	Transaction ID: 81012.E3865 Date of Disbursement 09 / 17 / 2008
	Mailing Address PO Box 569200	Amount of Each Disbursement this Period 1155.85
	City Dallas State TX Zip Code 75356-9200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement See Below	SEE BELOW
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Double Tree	Transaction ID: 81012.E3908 Date of Disbursement 09 / 17 / 2008
	Mailing Address 9336 Civic Center Dr	Amount of Each Disbursement this Period 1077.45
	City Beverly Hills State CA Zip Code 90210-3604	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel Expenses	[MEMO ITEM] MEMO: TRAVEL EXPENSES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Michael Batylin	Transaction ID: 81012.E3871 Date of Disbursement 09 / 19 / 2008
	Mailing Address 2601 Myrtlewood Ln NW	Amount of Each Disbursement this Period 177.00
	City Kennesaw State GA Zip Code 30144-7428	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement for Mileage	REIMBURSEMENT FOR MILEAGE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1332.85
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial)  
Cass Football Boosters

Transaction ID: 81001.E3824  
Date of Disbursement

Mailing Address 738 Grassdale Rd NW

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	0	8

City Cartersville State GA Zip Code 30121-5007

Amount of Each Disbursement this Period

120.00
--------

Purpose of Disbursement  
Advertising

Category/ Type
-------------------

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

Candidate Name

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

ADVERTISING

State: District:

B.

Full Name (Last, First, Middle Initial)  
Cobb Republican Women

Transaction ID: 81001.E3771  
Date of Disbursement

Mailing Address PO Box 4476

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	0	8

City Marietta State GA Zip Code 30061-4476

Amount of Each Disbursement this Period

93.00
-------

Purpose of Disbursement  
Event Ticket

Category/ Type
-------------------

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

Candidate Name

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

EVENT TICKET

State: District:

C.

Full Name (Last, First, Middle Initial)  
Cobb Republican Women

Transaction ID: 81001.E3772  
Date of Disbursement

Mailing Address PO Box 4476

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	0	8

City Marietta State GA Zip Code 30061-4476

Amount of Each Disbursement this Period

30.00
-------

Purpose of Disbursement  
Event Ticket

Category/ Type
-------------------

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

Candidate Name

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

EVENT TICKET

State: District:

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

243.00
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TOTAL This Period (last page this line number only) .....

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial)  
Cobb Republican Women

Transaction ID: 81001.E3838  
Date of Disbursement

Mailing Address PO Box 4476

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	0	8

City State Zip Code  
Marietta GA 30061-4476

Amount of Each Disbursement this Period

66.00
-------

Purpose of Disbursement  
Event Ticket  
Candidate Name

Category/ Type
-------------------

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

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

EVENT TICKET

B.

Full Name (Last, First, Middle Initial)  
Cobb Republican Women

Transaction ID: 81012.E3868  
Date of Disbursement

Mailing Address PO Box 4476

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	0	8

City State Zip Code  
Marietta GA 30061-4476

Amount of Each Disbursement this Period

22.00
-------

Purpose of Disbursement  
Event Ticket  
Candidate Name

Category/ Type
-------------------

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

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

EVENT TICKET

C.

Full Name (Last, First, Middle Initial)  
Cobb Republican Women

Transaction ID: 81012.E3873  
Date of Disbursement

Mailing Address PO Box 4476

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	0	8

City State Zip Code  
Marietta GA 30061-4476

Amount of Each Disbursement this Period

44.00
-------

Purpose of Disbursement  
Event Ticket  
Candidate Name

Category/ Type
-------------------

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

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

EVENT TICKET

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

132.00
--------

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Community Bank of the South  Mailing Address 3016 Atlanta Rd SE  City Smyrna State GA Zip Code 30080-3856  Purpose of Disbursement Bank Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81001.E3783 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 0 8  Amount of Each Disbursement this Period 12.50  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>BANK FEES</b>	
<b>B.</b>	Full Name (Last, First, Middle Initial) Community Bank of the South  Mailing Address 3016 Atlanta Rd SE  City Smyrna State GA Zip Code 30080-3856  Purpose of Disbursement Bank Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81001.E3789 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 8  Amount of Each Disbursement this Period 24.87  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>BANK FEES</b>	
<b>C.</b>	Full Name (Last, First, Middle Initial) Community Bank of the South  Mailing Address 3016 Atlanta Rd SE  City Smyrna State GA Zip Code 30080-3856  Purpose of Disbursement Bank Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81001.E3818 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 8  Amount of Each Disbursement this Period 12.50  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>BANK FEES</b>	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>49.87</b>	
<b>TOTAL</b> This Period (last page this line number only) .....			

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial)  
Community Bank of the South

Transaction ID: 81001.E3820  
Date of Disbursement

Mailing Address 3016 Atlanta Rd SE

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	8

City State Zip Code  
Smyrna GA 30080-3856

Amount of Each Disbursement this Period

35.10
-------

Purpose of Disbursement  
Bank Fees  
Candidate Name

Category/  
Type

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

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

BANK FEES

B.

Full Name (Last, First, Middle Initial)  
Community Bank of the South

Transaction ID: 81012.E3917  
Date of Disbursement

Mailing Address 3016 Atlanta Rd SE

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	8

City State Zip Code  
Smyrna GA 30080-3856

Amount of Each Disbursement this Period

12.50
-------

Purpose of Disbursement  
Bank Fees  
Candidate Name

Category/  
Type

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

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

BANK FEES

C.

Full Name (Last, First, Middle Initial)  
Community Bank of the South

Transaction ID: 81012.E3919  
Date of Disbursement

Mailing Address 3016 Atlanta Rd SE

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	8

City State Zip Code  
Smyrna GA 30080-3856

Amount of Each Disbursement this Period

24.61
-------

Purpose of Disbursement  
Bank Fees  
Candidate Name

Category/  
Type

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

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

BANK FEES

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

72.21
-------

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

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

A.	Full Name (Last, First, Middle Initial) Corporate Ridge Associates	Transaction ID: 81001.E3747 Date of Disbursement 07 / 02 / 2008
	Mailing Address 3440 Town Point Dr NW # STE.100	Amount of Each Disbursement this Period 1260.00
	City Kennesaw State GA Zip Code 30144-7004	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Rent Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		RENT

B.	Full Name (Last, First, Middle Initial) Corporate Ridge Associates	Transaction ID: 81001.E3826 Date of Disbursement 08 / 01 / 2008
	Mailing Address 3440 Town Point Dr NW # STE.100	Amount of Each Disbursement this Period 1260.00
	City Kennesaw State GA Zip Code 30144-7004	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Rent Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		RENT

C.	Full Name (Last, First, Middle Initial) Corporate Ridge Associates	Transaction ID: 81001.E3841 Date of Disbursement 09 / 02 / 2008
	Mailing Address 3440 Town Point Dr NW # STE.100	Amount of Each Disbursement this Period 1260.00
	City Kennesaw State GA Zip Code 30144-7004	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Rent Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		RENT

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3780.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial)  
Georgia Power

Transaction ID: 81001.E3773  
Date of Disbursement

Mailing Address PO Box 1394

/   /

City State Zip Code  
Rome GA 30163-1394

Amount of Each Disbursement this Period

Purpose of Disbursement  
Utilities

Candidate Name

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

UTILITIES

State: District:

B.

Full Name (Last, First, Middle Initial)  
Georgia Power

Transaction ID: 81001.E3843  
Date of Disbursement

Mailing Address PO Box 1394

/   /

City State Zip Code  
Rome GA 30163-1394

Amount of Each Disbursement this Period

Purpose of Disbursement  
Utilities

Candidate Name

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

UTILITIES

State: District:

C.

Full Name (Last, First, Middle Initial)  
Billie Gingrey

Transaction ID: 81012.E3869  
Date of Disbursement

Mailing Address 632 N. St. Marys Lane

/   /

City State Zip Code  
Marietta GA 30064-

Amount of Each Disbursement this Period

Purpose of Disbursement  
Travel Expenses

Candidate Name

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

TRAVEL EXPENSES

State: District:

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)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial)  
Carol Goeas & Associates LLC

Mailing Address 1707 Prince St Apt 7

City Alexandria State VA Zip Code 22314-2804

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81001.E3757  
Date of Disbursement

07 / 08 / 2008

Amount of Each Disbursement this Period

4900.18

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

FUNDRAISING CONSULTING

B.

Full Name (Last, First, Middle Initial)  
Carol Goeas & Associates LLC

Mailing Address 1707 Prince St Apt 7

City Alexandria State VA Zip Code 22314-2804

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81001.E3839  
Date of Disbursement

08 / 21 / 2008

Amount of Each Disbursement this Period

858.82

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

FUNDRAISING CONSULTING

C.

Full Name (Last, First, Middle Initial)  
Harrison High School

Mailing Address 4500 Due West Rd NW

City Kennesaw State GA Zip Code 30152-3855

Purpose of Disbursement  
Advertising

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81001.E3769  
Date of Disbursement

07 / 18 / 2008

Amount of Each Disbursement this Period

175.00

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

ADVERTISING

SUBTOTAL of Disbursements This Page (optional) ▶

5934.00

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)  
Gingrey for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Horizon Production Group  Mailing Address PO Bos 1106  City Hiram State GA Zip Code 30141-  Purpose of Disbursement Event Production Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3754 Date of Disbursement 07 / 08 / 2008  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  EVENT PRODUCTION
<b>B.</b>	Full Name (Last, First, Middle Initial) Mitch Hunter  Mailing Address PO Box U  City Marietta State GA Zip Code 30061-1077  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81012.E3911 Date of Disbursement 09 / 30 / 2008  Amount of Each Disbursement this Period 2290.05  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  SALARY
<b>C.</b>	Full Name (Last, First, Middle Initial) Andrew Johnson  Mailing Address 319 Atlanta St SE Unit 314  City Marietta State GA Zip Code 30060-2268  Purpose of Disbursement Reimbursement for Mileage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3753 Date of Disbursement 07 / 08 / 2008  Amount of Each Disbursement this Period 150.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  REIMBURSEMENT FOR MILEAGE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3440.05
<b>TOTAL</b> 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)  
Gingrey for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Andrew Johnson</p> <p>Mailing Address 319 Atlanta St SE Unit 314</p> <p>City Marietta State GA Zip Code 30060-2268</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3846</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="427.07"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>SALARY</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Andrew Johnson</p> <p>Mailing Address 319 Atlanta St SE Unit 314</p> <p>City Marietta State GA Zip Code 30060-2268</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81012.E3910</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="427.07"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>SALARY</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Kennesaw Mountain HS Booster</p> <p>Mailing Address 1890 Kennesaw Due West Rd NW</p> <p>City Kennesaw State GA Zip Code 30152-4221</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3764</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>ADVERTISING</b></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="1054.14"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></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)  
Gingrey for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Kopier Net</p> <p>Mailing Address 1147 Jvl Ct Ste A</p> <p>City Marietta State GA Zip Code 30066-2771</p> <p>Purpose of Disbursement Office Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3774</p> <p>Date of Disbursement 07 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 166.38</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>OFFICE EQUIPMENT</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Kopier Net</p> <p>Mailing Address 1147 Jvl Ct Ste A</p> <p>City Marietta State GA Zip Code 30066-2771</p> <p>Purpose of Disbursement Office Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3844</p> <p>Date of Disbursement 09 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 345.67</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>OFFICE EQUIPMENT</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Kopier Net</p> <p>Mailing Address 1147 Jvl Ct Ste A</p> <p>City Marietta State GA Zip Code 30066-2771</p> <p>Purpose of Disbursement Office Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81012.E3866</p> <p>Date of Disbursement 09 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 178.06</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>OFFICE EQUIPMENT</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>690.11</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

A.	Full Name (Last, First, Middle Initial) Mail Boxes Etc.	Transaction ID: 81001.E3756 Date of Disbursement 07 / 08 / 2008
	Mailing Address 1000 Whitlock Ave NW Ste 320	Amount of Each Disbursement this Period 36.15
	City Marietta State GA Zip Code 30064-5449	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type SHIPPING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Mail Boxes Etc.	Transaction ID: 81001.E3833 Date of Disbursement 08 / 13 / 2008
	Mailing Address 1000 Whitlock Ave NW Ste 320	Amount of Each Disbursement this Period 78.88
	City Marietta State GA Zip Code 30064-5449	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type SHIPPING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Mail Boxes Etc.	Transaction ID: 81012.E3857 Date of Disbursement 09 / 05 / 2008
	Mailing Address 1000 Whitlock Ave NW Ste 320	Amount of Each Disbursement this Period 32.05
	City Marietta State GA Zip Code 30064-5449	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Shipping Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type SHIPPING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

147.08

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

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)  
Gingrey for Congress

A.	Full Name (Last, First, Middle Initial) Marietta Kiwanis Club <hr/> Mailing Address PO Box 3191 <hr/> City Marietta State GA Zip Code 30061- <hr/> Purpose of Disbursement Event Ticket Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3765 Date of Disbursement 07 / 11 / 2008 <hr/> Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EVENT TICKET
B.	Full Name (Last, First, Middle Initial) MH Strategies <hr/> Mailing Address 630 Oakledge Dr NW <hr/> City Marietta State GA Zip Code 30060-6936 <hr/> Purpose of Disbursement Fundraising Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3780 Date of Disbursement 07 / 31 / 2008 <hr/> Amount of Each Disbursement this Period 3170.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING CONSULTING
C.	Full Name (Last, First, Middle Initial) MH Strategies <hr/> Mailing Address 630 Oakledge Dr NW <hr/> City Marietta State GA Zip Code 30060-6936 <hr/> Purpose of Disbursement Fundraising Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81012.E3861 Date of Disbursement 09 / 10 / 2008 <hr/> Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING CONSULTING

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

6370.85

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Natl Republican Congressional Committee

Mailing Address 320 1st St SE

City Washington State DC Zip Code 20003-1838

Purpose of Disbursement

Blast Fax

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 81001.C12085IK

Date of Disbursement

09 / 05 / 2008

Amount of Each Disbursement this Period

98.00

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

IN KIND: BLAST FAX

**B.** Full Name (Last, First, Middle Initial)  
Natl Republican Congressional Committee

Mailing Address 320 1st St SE

City Washington State DC Zip Code 20003-1838

Purpose of Disbursement

Event Ticket

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 81012.E3855

Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

2600.00

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

EVENT TICKET

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

Mailing Address 38 Freedom Dr NE

City Cartersville State GA Zip Code 30121-8096

Purpose of Disbursement

See Below

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 81012.E3876

Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

206.71

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

SEE BELOW

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

2904.71

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Gingrey for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Home Depot Mailing Address 2350 Dallas Hwy SW City Marietta State GA Zip Code 30064-2750 Purpose of Disbursement Wood Stakes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81013.E3920 <b>Date of Disbursement</b> 09 / 25 / 2008 Amount of Each Disbursement this Period 206.71 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: WOOD STAKES	
	<b>B.</b> Full Name (Last, First, Middle Initial) Professional Data Services Mailing Address 264 N Lumpkin St # 202 City Athens State GA Zip Code 30601-2742 Purpose of Disbursement Compliance Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81001.E3748 <b>Date of Disbursement</b> 07 / 02 / 2008 Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 COMPLIANCE CONSULTING
	<b>C.</b> Full Name (Last, First, Middle Initial) Professional Data Services Mailing Address 264 N Lumpkin St # 202 City Athens State GA Zip Code 30601-2742 Purpose of Disbursement Compliance Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81001.E3825 <b>Date of Disbursement</b> 08 / 01 / 2008 Amount of Each Disbursement this Period 1502.94 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 COMPLIANCE CONSULTING
	<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ►	
<b>TOTAL</b> This Period (last page this line number only) ..... ►		

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

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Professional Data Services</p> <p>Mailing Address 264 N Lumpkin St # 202</p> <p>City Athens State GA Zip Code 30601-2742</p> <p>Purpose of Disbursement Compliance Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3842</p> <p>Date of Disbursement 09 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>COMPLIANCE CONSULTING</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Elizabeth Rhodes</p> <p>Mailing Address 732 Cheatham Hill Rd SW</p> <p>City Marietta State GA Zip Code 30064-2906</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3791</p> <p>Date of Disbursement 07 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 2399.19</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>SALARY</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Elizabeth Rhodes</p> <p>Mailing Address 732 Cheatham Hill Rd SW</p> <p>City Marietta State GA Zip Code 30064-2906</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3822</p> <p>Date of Disbursement 08 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 2399.19</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>SALARY</b></p>

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

6298.38

**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)  
Gingrey for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Elizabeth Rhodes  Mailing Address 732 Cheatham Hill Rd SW  City Marietta State GA Zip Code 30064-2906  Purpose of Disbursement Salary Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81012.E3912 <b>Date of Disbursement</b> 09 / 30 / 2008  Amount of Each Disbursement this Period 2399.19  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>SALARY</b>	
<b>B.</b>	Full Name (Last, First, Middle Initial) SCM Associates  Mailing Address 10 Main St  City Jaffrey State NH Zip Code 03452-6193  Purpose of Disbursement Direct Marketing Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81001.E3830 <b>Date of Disbursement</b> 08 / 13 / 2008  Amount of Each Disbursement this Period 3696.80  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>DIRECT MARKETING</b>	
<b>C.</b>	Full Name (Last, First, Middle Initial) SCM Associates  Mailing Address 10 Main St  City Jaffrey State NH Zip Code 03452-6193  Purpose of Disbursement Direct Marketing Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81012.E3863 <b>Date of Disbursement</b> 09 / 17 / 2008  Amount of Each Disbursement this Period 470.45  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>DIRECT MARKETING</b>	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6566.44</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial)  
Sheriffs Corn Boilin

Mailing Address PO Box 4715

City State Zip Code  
Marietta GA 30061-

Purpose of Disbursement  
Event Ticket  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: 81001.E3767  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

EVENT TICKET

B.

Full Name (Last, First, Middle Initial)  
The Stoneridge Group

Mailing Address 13010 Morris Road  
Sixth Floor

City State Zip Code  
Alpharetta GA 30004-

Purpose of Disbursement  
Website Support  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: 81001.E3775  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

WEBSITE SUPPORT

C.

Full Name (Last, First, Middle Initial)  
Mrs. Cynthia Crane Suto

Mailing Address 566 Laurel Wood Ct SW

City State Zip Code  
Marietta GA 30064-3974

Purpose of Disbursement  
Event Photography  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: 81012.E3859  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

EVENT PHOTOGRAPHY

**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)  
Gingrey for Congress

A.	Full Name (Last, First, Middle Initial) Temple High School Booster Club <hr/> Mailing Address 589 Sage St <hr/> City Temple State GA Zip Code 30179-3724 <hr/> Purpose of Disbursement Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3834 Date of Disbursement 08 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ADVERTISING
B.	Full Name (Last, First, Middle Initial) Verizon Wireless <hr/> Mailing Address PO Box 105378 <hr/> City Atlanta State GA Zip Code 30348-5378 <hr/> Purpose of Disbursement Cell Phone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3755 Date of Disbursement 07 / 08 / 2008 <hr/> Amount of Each Disbursement this Period 93.26 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CELL PHONE
C.	Full Name (Last, First, Middle Initial) Verizon Wireless <hr/> Mailing Address PO Box 105378 <hr/> City Atlanta State GA Zip Code 30348-5378 <hr/> Purpose of Disbursement Cell Phone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3831 Date of Disbursement 08 / 13 / 2008 <hr/> Amount of Each Disbursement this Period 217.07 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CELL PHONE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>460.33</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 105378 City Atlanta State GA Zip Code 30348-5378 Purpose of Disbursement Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 81001.E3845 Date of Disbursement 09 / 05 / 2008 Amount of Each Disbursement this Period 86.41 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CELL PHONE
<b>B.</b>	Full Name (Last, First, Middle Initial) Joshua Waller Mailing Address 2284 Lakewood Dr NW City Kennesaw State GA Zip Code 30152-3416 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 81001.E3792 Date of Disbursement 07 / 31 / 2008 Amount of Each Disbursement this Period 1041.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY
<b>C.</b>	Full Name (Last, First, Middle Initial) Joshua Waller Mailing Address 2284 Lakewood Dr NW City Kennesaw State GA Zip Code 30152-3416 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 81001.E3823 Date of Disbursement 08 / 29 / 2008 Amount of Each Disbursement this Period 1041.42 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY

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

2169.26

**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)  
Gingrey for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Joshua Waller</p> <p>Mailing Address 2284 Lakewood Dr NW</p> <p>City Kennesaw State GA Zip Code 30152-3416</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81012.E3913</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1041.43"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>SALARY</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Wallis Printing</p> <p>Mailing Address PO Box 1554</p> <p>City Rome State GA Zip Code 30162-1554</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3751</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1950.40"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PRINTING</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Washington Literacy Council</p> <p>Mailing Address 1918 18th St NW Suite B2</p> <p>City Washington State DC Zip Code 20009-</p> <p>Purpose of Disbursement Event Ticket</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3849</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="128.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>EVENT TICKET</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3119.83</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>82186.36</b>

# 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 115 / 126

<input type="checkbox"/> 17	<input checked="" 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

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)  
Gingrey for Congress

A.	Full Name (Last, First, Middle Initial) Georgian Republican Party <hr/> Mailing Address 5600 Roswell Rd NE Ste 200 <hr/> City Atlanta State GA Zip Code 30342-1150 <hr/> Purpose of Disbursement Transfer of Excess Funds <hr/> Candidate Name GEORGIA REPUBLICAN PARTY <hr/> 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:	Transaction ID: 81001.E3763 Date of Disbursement 07 / 11 / 2008 <hr/> Amount of Each Disbursement this Period 10000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Georgian Republican Party <hr/> Mailing Address 5600 Roswell Rd NE Ste 200 <hr/> City Atlanta State GA Zip Code 30342-1150 <hr/> Purpose of Disbursement Transfer of Excess Funds <hr/> Candidate Name GEORGIA REPUBLICAN PARTY <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 81012.E3879 Date of Disbursement 09 / 29 / 2008 <hr/> Amount of Each Disbursement this Period 15000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Natl Republican Congressional Committee <hr/> Mailing Address 320 1st St SE <hr/> City Washington State DC Zip Code 20003-1838 <hr/> Purpose of Disbursement Transfer of Excess Funds <hr/> Candidate Name NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE <hr/> 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:	Transaction ID: 81001.E3793 Date of Disbursement 07 / 14 / 2008 <hr/> Amount of Each Disbursement this Period 70000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	95000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 17	<input checked="" 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)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial)  
Natl Republican Congressional Committee

Transaction ID: 81001.E3850

Date of Disbursement

Mailing Address 320 1st St SE

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	0	8

City Washington State DC Zip Code 20003-1838

Amount of Each Disbursement this Period

200000.00
-----------

Purpose of Disbursement  
Transfer of Excess Funds

Category/ Type
-------------------

Candidate Name  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

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

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

200000.00
-----------

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

295000.00
-----------

# 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)

<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)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial)  
Steve Austria for Congress

Transaction ID: 81012.E3853  
Date of Disbursement

Mailing Address 2537 Obetz Dr

09 /  29 /  2008

City Dayton State OH Zip Code 45434-6956

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/Type

CONTRIBUTION  
Candidate Name STEVE C AUSTRIA

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

Office Sought:  House  Senate  President  
State: OH District: 07

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
Friends of Irwin Bagwell

Transaction ID: 81001.E3840  
Date of Disbursement

Mailing Address 100 Bagwell Rd SW

08 /  22 /  2008

City Cave Spring State GA Zip Code 30124-2526

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/Type

CONTRIBUTION  
Candidate Name

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

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
Lou Barletta for Congress

Transaction ID: 81012.E3852  
Date of Disbursement

Mailing Address PO Box 128

09 /  29 /  2008

City Hazleton State PA Zip Code 18201-0128

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/Type

CONTRIBUTION  
Candidate Name LOU BARLETTA

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

Office Sought:  House  Senate  President  
State: PA District: 11

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

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 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)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial)  
Friends of John Barrasso

Transaction ID: 81012.E3872  
Date of Disbursement

Mailing Address PO Box 52008

09 /  21 /  2008

City Casper State WY Zip Code 82605-2008

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Category/Type

Candidate Name  
JOHN A BARRASSO

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

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: WY District: 00

B.

Full Name (Last, First, Middle Initial)  
Steve Chabot for Congress

Transaction ID: 81012.E3909  
Date of Disbursement

Mailing Address 3014 Harrison Ave

09 /  17 /  2008

City Cincinnati State OH Zip Code 45211-5702

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Category/Type

Candidate Name  
STEVE CHABOT

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

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: OH District: 01

C.

Full Name (Last, First, Middle Initial)  
Cobb County Republican Party

Transaction ID: 81001.E3752  
Date of Disbursement

Mailing Address PO Box 70545

07 /  02 /  2008

City Marietta State GA Zip Code 30007-0545

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Category/Type

Candidate Name

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

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

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

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)  
Gingrey for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Frank Cox for Magistrate Court</p> <p>Mailing Address 802 Colston Road</p> <p>City Marietta State GA Zip Code 30064-</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3759</p> <p>Date of Disbursement 07 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lincoln Diaz-Balart for Congress</p> <p>Mailing Address 95 Merrick Way Ste 250</p> <p>City Coral Gables State FL Zip Code 33134-5314</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name LINCOLN DIAZ-BALART</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District: 21</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3794</p> <p>Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mario Diaz-Balart for Congress</p> <p>Mailing Address 95 Merrick Way Ste 250</p> <p>City Coral Gables State FL Zip Code 33134-5314</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name MARIO DIAZ-BALART</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District: 25</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81001.E3795</p> <p>Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

A.	Full Name (Last, First, Middle Initial) Tom Feeney for Congress	Transaction ID: 81001.E3796 Date of Disbursement 07 / 16 / 2008
	Mailing Address PO Box 622345	Amount of Each Disbursement this Period 1000.00
	City Oviedo State FL Zip Code 32762-2345	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name TOM FEENEY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Chris Hackett for Congress	Transaction ID: 81001.E3797 Date of Disbursement 07 / 16 / 2008
	Mailing Address 23 Dallas Village Shopping Ctr	Amount of Each Disbursement this Period 1000.00
	City Dallas State PA Zip Code 18612-1231	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name CHRISTOPHER LAWRENCE HACKETT Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Andy Harris for Congress	Transaction ID: 81012.E3851 Date of Disbursement 09 / 29 / 2008
	Mailing Address PO Box 1527	Amount of Each Disbursement this Period 1000.00
	City Annapolis State MD Zip Code 21404-1527	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name ANDREW P HARRIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 01 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial)  
Hunter Hill State Senate Campaign

Mailing Address 4355 Cobb Pkwy Ste J277

City Atlanta State GA Zip Code 30339-3887

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81012.E3877

Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

500.00

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

B.

Full Name (Last, First, Middle Initial)  
Lynn Jenkins for Congress

Mailing Address PO Box 1441

City Topeka State KS Zip Code 66601-1441

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
LYNN JENKINS

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: KS District: 02

Transaction ID: 81012.E3854

Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

1000.00

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

C.

Full Name (Last, First, Middle Initial)  
Kell for Superior Court

Mailing Address 4137 Chadds Xing

City Marietta State GA Zip Code 30062-6014

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81001.E3782

Date of Disbursement

07 / 12 / 2008

Amount of Each Disbursement this Period

250.00

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

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

1750.00

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)

PAGE 122 / 126

<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)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Committee to Elect Barry Loudermilk

Mailing Address P.O. Box 436

City State Zip Code  
Cassville GA 30123-

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81012.E3867

Date of Disbursement

09 / 18 / 2008

Amount of Each Disbursement this Period

500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Military Order of the Purple Heart

Mailing Address Homeless Veterans Program  
5413-B Backlick Rd

City State Zip Code  
Springfield VA 22151-3960

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81001.E3776

Date of Disbursement

07 / 28 / 2008

Amount of Each Disbursement this Period

1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Shelley Moore Capito for Congress

Mailing Address PO Box 11519

City State Zip Code  
Charleston WV 25339-1519

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
SHELLEY MOORE CAPITO

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: WV District: 02

Transaction ID: 81001.E3799

Date of Disbursement

07 / 16 / 2008

Amount of Each Disbursement this Period

1000.00

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

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

2500.00

**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)  
Gingrey for Congress

**A.** Full Name (Last, First, Middle Initial)  
Olson for Congress Committee

Mailing Address PO Box 16381

City State Zip Code  
Sugar Land TX 77496-6381

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
PETER G OLSON

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: TX District: 22

Transaction ID: 81001.E3848

Date of Disbursement

08 / 13 / 2008

Amount of Each Disbursement this Period

1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
People for English

Mailing Address PO Box 1940

City State Zip Code  
Erie PA 16507-0940

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
PHILIP S. ENGLISH

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: PA District: 03

Transaction ID: 81001.E3847

Date of Disbursement

08 / 13 / 2008

Amount of Each Disbursement this Period

1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Committee to Re-Elect Dorothy Robinson

Mailing Address 596 Charlton Court

City State Zip Code  
Marietta GA 30064-

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81001.E3762

Date of Disbursement

07 / 11 / 2008

Amount of Each Disbursement this Period

500.00

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

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

2500.00

**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)  
Gingrey for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Friends of Chip Rogers <hr/> Mailing Address PO Box 813 <hr/> City Woodstock State GA Zip Code 30188-0813 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name _____ <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81012.E3862 Date of Disbursement 09 / 16 / 2008 <hr/> Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Stivers for Congress <hr/> Mailing Address 81 S 5th St <hr/> City Columbus State OH Zip Code 43215-4323 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name STEVE STIVERS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3798 Date of Disbursement 07 / 16 / 2008 <hr/> 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
<b>C.</b>	Full Name (Last, First, Middle Initial) United Arts of Cobb <hr/> Mailing Address 1985 N Park PI SE <hr/> City Atlanta State GA Zip Code 30339-2004 <hr/> Purpose of Disbursement DONATION Candidate Name _____ <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81001.E3770 Date of Disbursement 07 / 24 / 2008 <hr/> Amount of Each Disbursement this Period 2500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

4000.00

**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)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial)  
Kelli Wolk for Probate Judge

Mailing Address 393 North Hillcrest Drive

City Marietta State GA Zip Code 30064-

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81001.E3761

Date of Disbursement

<sup>M</sup>	<sup>M</sup>	/	<sup>D</sup>	<sup>D</sup>	/	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>
0	7		1	1		2	0	0	8

Amount of Each Disbursement this Period

500.00
--------

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

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

500.00

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

22750.00

**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 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)  
Gingrey for Congress

A.

Full Name (Last, First, Middle Initial)  
Douglas Hertz

Mailing Address 3741 Paces Valley Rd NW

City Atlanta State GA Zip Code 30327-3207

Purpose of Disbursement  
Refund of Contribution

Candidate Name

010  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80709.E3695

Date of Disbursement

07 / 02 / 2008

Amount of Each Disbursement this Period

2300.00

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

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

2300.00

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

2300.00