

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than 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

STRAIGHT TALK AMERICA

ADDRESS (number and street)

211 NORTH UNION STREET SUITE 200

☐Check if different  
than previously  
reported. (ACC)

ALEXANDRIA

VA

22314

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00413245

3. IS THIS  
REPORT☐NEW  
(N)**OR**☒AMENDED  
(A)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  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2006

through

07

31

2006

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

Keith Davis

Signature of Treasurer

Electronically Filed by Keith Davis

Date

10

10

2006

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

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
STRAIGHT TALK AMERICA

Report Covering the Period:

From:

|   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y |
| 0 | 7 |  | 0 | 1 |  | 2 | 0 | 0 | 6 |

To:

|   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y |
| 0 | 7 |  | 3 | 1 |  | 2 | 0 | 0 | 6 |

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1 <span>2006</span>   |                         | 1226502.62                        |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....   | 1697088.03              |                                   |
| (c) Total Receipts (from Line 19) .....  | 411112.70               | 4189947.80                        |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....             | 2108200.73              | 5416450.42                        |
| 7. Total Disbursements (from Line 31) .....  | 901433.40               | 4209683.09                        |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | 1206767.33              | 1206767.33                        |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 122440.46               |                                   |

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## 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 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

STRAIGHT TALK AMERICA

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 7 | 0 | 1 | 2 | 0 | 0 | 6 |

To:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 7 | 3 | 1 | 2 | 0 | 0 | 6 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 331880.73                     | 3223813.54                        |
| (i) Itemized (use Schedule A) .....  | 67423.78                      | 701352.52                         |
| (ii) Unitemized .....  | 399304.51                     | 3925166.06                        |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤   | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 11000.00                      | 244587.57                         |
| (c) Other Political Committees (such as PACs) .....  | 410304.51                     | 4169753.63                        |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤   |                               |                                   |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 808.19                        | 5018.05                           |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 12491.35                          |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 0.00                          | 2684.77                           |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 411112.70                     | 4189947.80                        |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 411112.70                     | 4189947.80                        |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. DISBURSEMENTS   |  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:   |  |                               |                                   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                      |  | 0.00                          | 0.00                              |
| (i) Federal Share.....  |  |                               |                                   |
| (ii) Non-Federal Share.....   |  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures.....   |  | 762912.16                     | 3113646.14                        |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....                           |  | 762912.16                     | 3113646.14                        |
| 22. Transfers to Affiliated/Other Party Committees.....   |  | 0.00                          | 3000.00                           |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....          |  | 55070.64                      | 492822.30                         |
| 24. Independent Expenditure (use Schedule E) .....  |  | 0.00                          | 0.00                              |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....  |  | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....   |  | 0.00                          | 0.00                              |
| 27. Loans Made.....   |  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:  |  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                   |  | 8010.00                       | 35110.00                          |
| (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 28(a), (b), and (c)) .....                            |  | 8010.00                       | 35110.00                          |
| 29. Other Disbursements.....  |  | 75440.60                      | 565104.65                         |
| 30. Federal Election Activity (2 U.S.C 431(20))   |  |                               |                                   |
| (a) Shared Federal Election Activity (from Schedule H6)   |  |                               |                                   |
| (i) Federal Share .....   |  | 0.00                          | 0.00                              |
| (ii) "Levin" Share .....  |  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                            |  | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....               |  | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..        |  | 901433.40                     | 4209683.09                        |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... |  | 901433.40                     | 4209683.09                        |

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 5

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 410304.51                     | 4169753.63                        |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 8010.00                       | 35110.00                          |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 402294.51                     | 4134643.63                        |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 762912.16                     | 3113646.14                        |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 808.19                        | 5018.05                           |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 762103.97                     | 3108628.09                        |

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 190

(check only one)

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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)  
STRAIGHT TALK AMERICA

|   |  |  |
|---|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. Arthur E. Allen, Jr.<br>Mailing Address 32 Buck Rd<br>Apt 116<br>City Hanover State NH Zip Code 03755<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation Retired<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 400.00            |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 7 / 1 9 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54126<br>Amount of Each Receipt this Period<br>100.00<br>Contribution |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Bruce Allen<br>Mailing Address 5915 Silver Springs Dr<br>Bldg 7<br>City El Paso State TX Zip Code 79912<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Saba, Inc. Occupation Owner<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 500.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 7 / 2 7 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54108<br>Amount of Each Receipt this Period<br>500.00<br>Contribution |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Bruce S. Allen<br>Mailing Address 12 Eaton Woods Rd<br>City East Kingston State NH Zip Code 03827<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation Retired<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 350.00                |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 7 / 1 9 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54144<br>Amount of Each Receipt this Period<br>100.00<br>Contribution |

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. Paul F. Amoruso

Mailing Address 2 Jericho Plz

City State Zip Code  
 Jericho NY 11753

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oxford and Simpson

Occupation  
Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53876

Amount of Each Receipt this Period

2500.00

Contribution

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

Mr. Ralph J. Anderson, Jr.

Mailing Address 2 Lexington Ct

City State Zip Code  
 Colts Neck NJ 07722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rockaway Partners

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53911

Amount of Each Receipt this Period

2000.00

Contribution

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

Mr. Weston Anderson

Mailing Address 763 La Para Ave

City State Zip Code  
 Palo Alto CA 94306

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.54180

Amount of Each Receipt this Period

100.00

Contribution

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

4600.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. Robert Scott Asen

Mailing Address 224 E 49th St

City State Zip Code  
 New York NY 10017

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Asen and Co., Inc.

Occupation  
 Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53850

Amount of Each Receipt this Period

5000.00

Contribution

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

Ms. Barbara A. Aton

Mailing Address 201 E Avocado Crest Rd

City State Zip Code  
 La Habra Heights CA 90631

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.54171

Amount of Each Receipt this Period

50.00

Contribution

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

Mr. Jefferson W. Baker

Mailing Address 1608 Rue Lemans

City State Zip Code  
 Slidell LA 70458

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Self

Occupation  
 Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.54191

Amount of Each Receipt this Period

250.00

Contribution

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

5300.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|   |  |                                     |   |  |
|---|--|-------------------------------------|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. Thomas D. Balliett   |  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 4 / 2 0 0 6 |  |
| Mailing Address 1177 Avenue Of The Americas   |  |                                     | <b>Transaction ID:</b> SA11A1.54106                             |  |
| City State Zip Code<br>New York NY 10036  |  |                                     | Amount of Each Receipt this Period<br>500.00                    |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |                                     | Contribution  |  |
| Name of Employer<br>Kramer, Levin, et al., LLP  |  | Occupation<br>Partner               |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>500.00  |   |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Paul A. Barthol  |  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 8 / 2 0 0 6 |  |
| Mailing Address 13296A Blueberry Ln<br>Apt 201  |  |                                     | <b>Transaction ID:</b> SA11A1.54063                             |  |
| City State Zip Code<br>Fairfax VA 22033   |  |                                     | Amount of Each Receipt this Period<br>150.00                    |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |                                     | Contribution  |  |
| Name of Employer<br>Marriott Courtyard  |  | Occupation<br>Night Auditor         |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>750.00  |   |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Lawrence E. Bathgate, III  |  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6 |  |
| Mailing Address 701 East Ave  |  |                                     | <b>Transaction ID:</b> SA11A1.53812                             |  |
| City State Zip Code<br>Bay Head NJ 08742  |  |                                     | Amount of Each Receipt this Period<br>5000.00                   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |                                     | Contribution  |  |
| Name of Employer<br>Embee Group   |  | Occupation<br>Investor              |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>5000.00 |   |  |

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

5650.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

**A.** Full Name (Last, First, Middle Initial)  
 Ms. T. Pamela Bathgate

Mailing Address 5 Linden Ln

City State Zip Code  
 Rumson NJ 07760

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
 Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53854

Amount of Each Receipt this Period

5000.00

Contribution

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

Mr. Lawrence L. Bebo

Mailing Address PO Box W

City State Zip Code  
 Berthoud CO 80513

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 L and M Enterprises, Inc.

Occupation  
 Contractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.53954

Amount of Each Receipt this Period

1000.00

Contribution

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

Mr. Luis A. Belmonte

Mailing Address 250 Walnut St

City State Zip Code  
 San Francisco CA 94118

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.54074

Amount of Each Receipt this Period

500.00

Contribution

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

6500.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|  |   |   |   |
|--|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. William W. Beyer  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 8 / 2 0 0 6 |   |
| Mailing Address 6309 Burnham Cir<br>Apt 203  |   | <b>Transaction ID:</b> SA11A1.54228                             |   |
| City<br>Inver Grove Height   | State<br>MN   | Zip Code<br>55076   | Amount of Each Receipt this Period<br>50.00   |
| FEC ID number of contributing federal political committee.<br>C  |   | Contribution  |   |
| Name of Employer<br><br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                              | Occupation<br>Retired<br>Aggregate Year-to-Date ▼<br>230.00         |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Ms. Marjorie Blachly  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 9 / 2 0 0 6 |   |
| Mailing Address 674 Deer Park Rd   |   | <b>Transaction ID:</b> SA11A1.54072                             |   |
| City<br>Dix Hills  | State<br>NY   | Zip Code<br>11746   | Amount of Each Receipt this Period<br>200.00  |
| FEC ID number of contributing federal political committee.<br>C  |   | Contribution  |   |
| Name of Employer<br><br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                              | Occupation<br>Retired<br>Aggregate Year-to-Date ▼<br>600.00         |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Roger A. Bodman   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6 |   |
| Mailing Address 414 River View Plz   |   | <b>Transaction ID:</b> SA11A1.53913                             |   |
| City<br>Trenton  | State<br>NJ   | Zip Code<br>08611   | Amount of Each Receipt this Period<br>2000.00 |
| FEC ID number of contributing federal political committee.<br>C  |   | Contribution  |   |
| Name of Employer<br>Public Strategies Impact, LLC<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Occupation<br>Senior Partner<br>Aggregate Year-to-Date ▼<br>2000.00 |   |   |

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

2250.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Merilee Bostock  
Mailing Address 7 S Manursing Is

City State Zip Code  
Rye NY 10580

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2006

Transaction ID: SA11A1.53809

Amount of Each Receipt this Period

5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Roy J. Bostock  
Mailing Address 7 S Manursing Is

City State Zip Code  
Rye NY 10580

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Morgan Stanley

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2006

Transaction ID: SA11A1.53803

Amount of Each Receipt this Period

5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Dr. Laurette M. Bryan  
Mailing Address 573 Rockledge Dr

City State Zip Code  
Rockledge FL 32955

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lers, Roberts, and Bryan,  
PA

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2006

Transaction ID: SA11A1.54121

Amount of Each Receipt this Period

250.00

Contribution

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

10250.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. Earl E. Buell

Mailing Address 8111 144th Ave E

City State Zip Code  
 Puyallup WA 98372

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.54181

Amount of Each Receipt this Period

50.00

Contribution

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

Mr. Charles H. Burke, Sr.

Mailing Address PO Box 998

City State Zip Code  
 Pierre SD 57501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.54159

Amount of Each Receipt this Period

100.00

Contribution

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

Mr. Dennis T. Butler

Mailing Address 64 Parkwyn Dr

City State Zip Code  
 Delmar NY 12054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of New York

Occupation

Telecom Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.54169

Amount of Each Receipt this Period

250.00

Contribution

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

400.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. Paul W. Butler

Mailing Address 1333 New Hampshire Ave NW

City State Zip Code  
 Washington DC 20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Akin, Gump, Strauss, et  
al.

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.54026

Amount of Each Receipt this Period

1000.00

Contribution

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

Mr. Leonard D. Byler

Mailing Address 105 Ray Cir

City State Zip Code  
 Hollister CA 95023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 9 / 2 0 0 6

Transaction ID: SA11A1.54231

Amount of Each Receipt this Period

50.00

Contribution

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

Ms. Charlotte K. Carleton

Mailing Address 401 E Linton Blvd  
 Apt 327

City State Zip Code  
 Delray Beach FL 33483

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.54057

Amount of Each Receipt this Period

300.00

Contribution

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

1350.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. Robert J. Caruso

Mailing Address **9 W 57th St**  
**FI 27**

City State Zip Code  
**New York NY 10019**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Highbridge Capital

Occupation  
 Managing Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**07 / 31 / 2006**

**Transaction ID: SA11A1.54032**

Amount of Each Receipt this Period

**1000.00**

Contribution

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

Amb. Henry E. Catto, Jr.

Mailing Address **200 Navarro St**  
**Ste 200**

City State Zip Code  
**San Antonio TX 78205**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Self

Occupation  
 Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**07 / 31 / 2006**

**Transaction ID: SA11A1.53844**

Amount of Each Receipt this Period

**5000.00**

Contribution

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

Mr. Sanford Caudill

Mailing Address **1901 Long Run Rd**

City State Zip Code  
**Louisville KY 40245**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Self

Occupation  
 Businessman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**07 / 10 / 2006**

**Transaction ID: SA11A1.54199**

Amount of Each Receipt this Period

**250.00**

Contribution

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

**6250.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. Steven E. Chancellor

Mailing Address PO Box 5669

City State Zip Code  
 Evansville IL 62242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Black Beauty Coal

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.53866

Amount of Each Receipt this Period

2500.00

Contribution

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

Mrs. Terri Chancellor

Mailing Address PO Box 5669

City State Zip Code  
 Evansville IL 62242

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.53868

Amount of Each Receipt this Period

2500.00

Contribution

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

Ms. Martha A. Christensen

Mailing Address 17271 N 87th Ave  
 Apt 2092

City State Zip Code  
 Peoria AZ 85382

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.54138

Amount of Each Receipt this Period

150.00

Contribution

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

5150.00

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



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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. Todd J. Christie

Mailing Address 520 Bernardsville Rd

City State Zip Code  
Mendham NJ 07945

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53919

Amount of Each Receipt this Period

2000.00

Contribution

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

Mr. Anthony S. Cicatiello

Mailing Address 1025 Sleepy Hollow Ln

City State Zip Code  
Plainfield NJ 07060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CN Communications, Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53985

Amount of Each Receipt this Period

1000.00

Contribution

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

Ms. Louise W. Clayton

Mailing Address 45 Sunset Dr

City State Zip Code  
Howell NJ 07731

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.54014

Amount of Each Receipt this Period

1000.00

Contribution

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

4000.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. Nicholas L. Coch

Mailing Address 1177 Avenue Of The Americas

City State Zip Code  
 New York NY 10036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kramer, Levin, et al., LLP

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.54219

Amount of Each Receipt this Period

250.00

Contribution

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

Mr. Leonard Cohen

Mailing Address 750 Broad St

City State Zip Code  
 Shrewsbury NJ 07702

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cohen Schatz

Occupation  
Real Estate Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53903

Amount of Each Receipt this Period

2000.00

Contribution

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

Mr. W. Warren Cole, Jr.

Mailing Address 3333 S Atlantic Ave  
 Apt 901

City State Zip Code  
 Daytona Beach Shor FL 32118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 1 9 / 2 0 0 6

Transaction ID: SA11A1.54130

Amount of Each Receipt this Period

100.00

Contribution

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

2350.00

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

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

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 19 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Mr. Thomas J. Collamore  
Mailing Address 101 Constitution Ave NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Altria Group, Inc.

Occupation  
Vice President, Public Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.54044

Amount of Each Receipt this Period

1000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. William N. Collings  
Mailing Address 335 N Booth St

City State Zip Code  
Dubuque IA 52001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.54233

Amount of Each Receipt this Period

75.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Kevin J. Collins  
Mailing Address 345 Rte 17 S

City State Zip Code  
Saddle River NJ 07458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.54008

Amount of Each Receipt this Period

1000.00

Contribution

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

2075.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Ms. Patricia L. Connors

Mailing Address 1962 E Valley Rd

City State Zip Code  
 Santa Barbara CA 93108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.54215

Amount of Each Receipt this Period

250.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Ms. Janet B. Constance

Mailing Address 1177 Avenue Of The Americas  
 Fl 26

City State Zip Code  
 New York NY 10036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kramer, Levin, et al., LLP

Occupation  
Partner & Firm Co-Chair

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.54217

Amount of Each Receipt this Period

250.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Henry G. Corey

Mailing Address 80 Hereford Rd

City State Zip Code  
 Bronxville NY 10708

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 9 / 2 0 0 6

Transaction ID: SA11A1.54230

Amount of Each Receipt this Period

75.00

Contribution

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

575.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|   |   |   |
|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. Brett Cosor  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 0 5 / 2 0 0 6 |
| Mailing Address 306 Alfandre St   |   | <b>Transaction ID:</b> SA11A1.54135                             |
| City Gaithersburg   | State MD                                  | Zip Code 20878  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Amount of Each Receipt this Period<br>50.00                     |
| Name of Employer<br>Video Networks, Inc.  | Occupation<br>Technology System Architect |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>450.00        |   |

Contribution

|   |                                     |   |
|---|-------------------------------------|---|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Michael Cox  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6 |
| Mailing Address 19 Bay Point Harbour  |                                     | <b>Transaction ID:</b> SA11A1.54016                             |
| City Point Pleasant Bor   | State NJ                            | Zip Code 08742  |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                     | Amount of Each Receipt this Period<br>1000.00                   |
| Name of Employer<br>QMed  | Occupation<br>President             |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |   |

Contribution

|   |                                    |   |
|---|------------------------------------|---|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Charles E. Crary   |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 0 / 2 0 0 6 |
| Mailing Address 8401 E Woodland Rd  |                                    | <b>Transaction ID:</b> SA11A1.54134                             |
| City Tucson   | State AZ                           | Zip Code 85749  |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                    | Amount of Each Receipt this Period<br>100.00                    |
| Name of Employer  | Occupation<br>Retired              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>400.00 |   |

Contribution

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

1150.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Mr. Charles E. Crary

Mailing Address 8401 E Woodland Rd

City State Zip Code  
Tucson AZ 85749

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 0 6

Transaction ID: SA11A1.54085

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Barry Croland

Mailing Address 243 Myrtle St

City State Zip Code  
Haworth NJ 07641

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Shapiro & Croland

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53989

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. David G. Crooks

Mailing Address 5699 Foxglove Pl

City State Zip Code  
Prescott AZ 86305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.54147

Amount of Each Receipt this Period

50.00

Contribution

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

1150.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 190

(check only one)

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|  |  |   |
|--|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. Robert Crouch<br>Mailing Address 60133 Quail View Dr<br>City Escondido State CA Zip Code 92026<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Self Occupation Farmer<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 300.00                          |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 9 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54163<br>Amount of Each Receipt this Period<br>200.00<br>Contribution  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Richard A. Crow<br>Mailing Address 578 N White Tail Dr<br>City Franktown State CO Zip Code 80116<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation Retired<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 300.00                            |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 2 4 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54152<br>Amount of Each Receipt this Period<br>100.00<br>Contribution  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. James S. Crown<br>Mailing Address 222 N La Salle St Ste 2000<br>City Chicago State IL Zip Code 60601<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Henry Crown and Co. Occupation President<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 2500.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.53874<br>Amount of Each Receipt this Period<br>2500.00<br>Contribution |
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶   |  | 2800.00   |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶   |  |   |

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

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

FOR LINE NUMBER: PAGE 24 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. W. B. Cunningham

Mailing Address 32 W Spring St

City State Zip Code  
 Alexandria VA 22301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cisco Systems, Inc.

Occupation  
Federal Government Affairs Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53965

Amount of Each Receipt this Period

1000.00

Contribution

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

Mr. Thomas F. Daly

Mailing Address 5 S Cherry Ln

City State Zip Code  
 Rumson NJ 07760

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McArthur and English

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53921

Amount of Each Receipt this Period

2000.00

Contribution

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

Mr. Richard B. Dannenberg

Mailing Address 34 Century Ridge Rd

City State Zip Code  
 Purchase NY 10577

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.54081

Amount of Each Receipt this Period

500.00

Contribution

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

3500.00

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



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

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

FOR LINE NUMBER: PAGE 25 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. Donald W. Davis

Mailing Address 1 Bellevue Ave

City State Zip Code  
 Bel Tiburon CA 94920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Solomon Smith Barney

Occupation  
Portfolio Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.54129

Amount of Each Receipt this Period

200.00

Contribution

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

Mr. Richard Davis

Mailing Address 211 N Union St  
 Ste 250

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Davis Manafort, Inc.

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.53820

Amount of Each Receipt this Period

5000.00

Contribution

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

Mrs. Judith W. Dawkins

Mailing Address 80 W River Rd

City State Zip Code  
 Rumson NJ 07760

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.54006

Amount of Each Receipt this Period

1000.00

Contribution

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

6200.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|   |  |   |  |
|---|--|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. Yervant S. Demirjian   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 2 1 / 2 0 0 6 |  |
| Mailing Address 444 S Flower St<br>14th Fl  |  | <b>Transaction ID:</b> SA11A1.53826                             |  |
| City State Zip Code<br>Los Angeles CA 90071   |  | Amount of Each Receipt this Period<br>5000.00                   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Contribution  |  |
| Name of Employer Occupation<br>Cedars Bank Bank Director  |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>5000.00                             |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Benjamin J. Denihan  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6 |  |
| Mailing Address 1040 5th Ave<br>Apt 9A  |  | <b>Transaction ID:</b> SA11A1.54116                             |  |
| City State Zip Code<br>New York NY 10028  |  | Amount of Each Receipt this Period<br>500.00                    |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Contribution  |  |
| Name of Employer Occupation<br>Affinia Hotel Executive Director   |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>500.00                              |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Max O. Dickey  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 8 / 2 0 0 6 |  |
| Mailing Address 10755 W Cheryl Dr   |  | <b>Transaction ID:</b> SA11A1.54176                             |  |
| City State Zip Code<br>Sun City AZ 85351  |  | Amount of Each Receipt this Period<br>50.00                     |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Contribution  |  |
| Name of Employer Occupation<br>Retired  |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>250.00                              |  |

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

5550.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Nancy W. Downing  
Mailing Address 1829 Shoreham Dr

City State Zip Code  
Charlotte NC 28211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2006

Transaction ID: SA11A1.54133

Amount of Each Receipt this Period

200.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. James R. Dunaway  
Mailing Address 500 Alta Dr

City State Zip Code  
Fort Worth TX 76107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 24 / 2006

Transaction ID: SA11A1.54110

Amount of Each Receipt this Period

500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. William H. Eastburn  
Mailing Address 60 E Court St

City State Zip Code  
Doylestown PA 18901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eastburn & Gray

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2006

Transaction ID: SA11A1.54205

Amount of Each Receipt this Period

250.00

Contribution

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

950.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Mr. Eugene C. Edminster

Mailing Address 5754 E Grant Rd

City State Zip Code  
Tucson AZ 85712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.54168

Amount of Each Receipt this Period

75.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. John C. Ekarius

Mailing Address 14 Lawrence Dr

City State Zip Code  
Brick NJ 08724

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Drexel University Med

Occupation

Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.54002

Amount of Each Receipt this Period

1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. A. W. Epp

Mailing Address 6335 O St  
Apt 538

City State Zip Code  
Lincoln NE 68510

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.54067

Amount of Each Receipt this Period

225.00

Contribution

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

1300.00

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

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

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

FOR LINE NUMBER: PAGE 29 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Mr. C. Karl Eppler  
Mailing Address 420 Bermuda Isles Cir

City State Zip Code  
Venice FL 34292

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 0 6

Transaction ID: SA11A1.54156

Amount of Each Receipt this Period

100.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Todd Ewing  
Mailing Address 3512 Bradley Ln

City State Zip Code  
Chevy Chase MD 20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tobin, O'Connor, and Ewing

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.54084

Amount of Each Receipt this Period

500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. David J. Farris  
Mailing Address 71 Crest Dr

City State Zip Code  
Bernardsville NJ 07924

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53956

Amount of Each Receipt this Period

1000.00

Contribution

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

1600.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mrs. Marjorie Fisher

Mailing Address 8545 Carmel Valley Rd

City State Zip Code  
Carmel CA 93923

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 0 6

Transaction ID: SA11A1.54141

Amount of Each Receipt this Period

100.00

Contribution

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

Mr. Gerald F. Fitzgerald

Mailing Address 50 N Brockway 3-8  
PO Box A

City State Zip Code  
Palatine IL 60078

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.53824

Amount of Each Receipt this Period

5000.00

Contribution

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

The Hon. Peter G. Fitzgerald

Mailing Address 1320 Old Chain Bridge Rd  
Ste 420

City State Zip Code  
McLean VA 22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Chain Bridge Mgmt.

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53848

Amount of Each Receipt this Period

5000.00

Contribution

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

10100.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

|  |  |   |
|--|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mrs. Deborah Flexner<br>Mailing Address 136 E 80th St<br>City State Zip Code<br>New York NY 10021<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Homemaker<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>5000.00  |  | Date of Receipt<br>MM / DD / YYYY<br>07 / 14 / 2006<br><b>Transaction ID:</b> SA11A1.53816<br>Amount of Each Receipt this Period<br>5000.00<br>Contribution |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Thomas M. Flexner<br>Mailing Address 136 E 80th St<br>City State Zip Code<br>New York NY 10021<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Bear Stearns Vice Chairman<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>5000.00  |  | Date of Receipt<br>MM / DD / YYYY<br>07 / 14 / 2006<br><b>Transaction ID:</b> SA11A1.53813<br>Amount of Each Receipt this Period<br>5000.00<br>Contribution |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Austin T. Fragomen<br>Mailing Address 515 Madison Ave<br>15th Fl<br>City State Zip Code<br>New York NY 10022<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Fragomen, Del Rey, Bernsen, and Loewy Co-Managing Partner<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>2000.00 |  | Date of Receipt<br>MM / DD / YYYY<br>07 / 31 / 2006<br><b>Transaction ID:</b> SA11A1.53889<br>Amount of Each Receipt this Period<br>2000.00<br>Contribution |
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶   |  | 12000.00  |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶   |  |   |

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

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

FOR LINE NUMBER: PAGE 32 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|   |                                    |   |
|---|------------------------------------|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. Ted Frank  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 2 0 / 2 0 0 6 |
| Mailing Address 901 N. Monroe Street<br>#1007   |                                    | <b>Transaction ID:</b> SA11A1.58151                             |
| City<br>Arlington   | State<br>VA                        | Zip Code<br>22201   |
| FEC ID number of contributing federal political committee.<br><input checked="" type="checkbox"/>                               |                                    | Amount of Each Receipt this Period<br>500.00                    |
| Name of Employer<br>American Enterprise Institute   | Occupation<br>Resident Fellow      |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00 |   |

Contribution

|   |                                    |   |
|---|------------------------------------|---|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Robert D. Franks   |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6 |
| Mailing Address 11 Heather Ln   |                                    | <b>Transaction ID:</b> SA11A1.54120                             |
| City<br>Warren  | State<br>NJ                        | Zip Code<br>07059   |
| FEC ID number of contributing federal political committee.<br><input checked="" type="checkbox"/>                               |                                    | Amount of Each Receipt this Period<br>500.00                    |
| Name of Employer<br>HINJ  | Occupation<br>President            |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00 |   |

Contribution

|   |                                     |   |
|---|-------------------------------------|---|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. David I. Fuente  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6 |
| Mailing Address 115 Neale Ave   |                                     | <b>Transaction ID:</b> SA11A1.53834                             |
| City<br>Aspen   | State<br>CO                         | Zip Code<br>81611   |
| FEC ID number of contributing federal political committee.<br><input checked="" type="checkbox"/>                               |                                     | Amount of Each Receipt this Period<br>5000.00                   |
| Name of Employer<br>Office Depot, Inc.  | Occupation<br>Director              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00 |   |

Contribution

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

6000.00

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



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

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

FOR LINE NUMBER: PAGE 33 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. Lonnie A. Garvin, Jr.

Mailing Address PO Box 1136

City State Zip Code  
Aiken SC 29802

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southeastern Mortgage Con-  
sultants

Occupation  
Lending Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.53948

Amount of Each Receipt this Period

100.00

Contribution

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

Mr. Stanley L. Gender

Mailing Address 1100 Alta Loma Rd  
Apt 1503

City State Zip Code  
Los Angeles CA 90069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PFR Engineering Systems,  
Inc.

Occupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.54172

Amount of Each Receipt this Period

125.00

Contribution

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

Mr. Roger Gendron

Mailing Address 2214 Allens Ln

City State Zip Code  
Wilmington NC 28403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SSDC, Inc.

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.53973

Amount of Each Receipt this Period

1000.00

Contribution

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

1225.00

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

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

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 34 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. Sean D. Gertner

Mailing Address 421 Hope Chapel Rd

City State Zip Code  
 Lakewood NJ 08701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gluck, Allen, and Gertner

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.54065

Amount of Each Receipt this Period

750.00

Contribution

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

Mr. E. Peter Gillette, Jr.

Mailing Address 192 Bank St SE

City State Zip Code  
 Minneapolis MN 55414

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.54088

Amount of Each Receipt this Period

250.00

Contribution

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

Ms. Hazel S. Gluck

Mailing Address 1 2nd St

City State Zip Code  
 Brick NJ 08724

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MBI-GluckShaw

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53952

Amount of Each Receipt this Period

1000.00

Contribution

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

2000.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

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

Mr. Neil J. Goldmacher

Mailing Address 125 Park Ave

City State Zip Code  
**New York NY 10017**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Newmark Knight Frank

Occupation  
Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
**07 31 2006**

**Transaction ID: SA11A1.53909**

Amount of Each Receipt this Period

2000.00

Contribution

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

Mr. Gary J. Goodman

Mailing Address 6221 E Sage Dr

City State Zip Code  
**Paradise Vly AZ 85253**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Bermuda Water Co., Inc.

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
**07 18 2006**

**Transaction ID: SA11A1.54123**

Amount of Each Receipt this Period

400.00

Contribution

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

Mr. Robert B. Goodrich

Mailing Address 115 W Inlet Rd

City State Zip Code  
**Ocean City NJ 08226**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Computer Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
**07 05 2006**

**Transaction ID: SA11A1.54068**

Amount of Each Receipt this Period

100.00

Contribution

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

**2500.00**

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

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

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jeffrey P. Gould  
Mailing Address 73 Catspaw Cpe

City State Zip Code  
Coronado CA 92118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 0 6

Transaction ID: SA11A1.54234

Amount of Each Receipt this Period

60.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Oliver R. Grace  
Mailing Address 55 Brookville Rd

City State Zip Code  
Glen Head NY 11545

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Anglo-American Security  
Fund

Occupation

General Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53796

Amount of Each Receipt this Period

5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Dr. Jonathan Grantham  
Mailing Address 1021 Rustic Rdg

City State Zip Code  
Joplin MO 64804

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Freeman Health System

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 1 / 2 0 0 6

Transaction ID: SA11A1.54092

Amount of Each Receipt this Period

500.00

Contribution

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

5560.00

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

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

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 37 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|   |   |   |
|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mrs. Marta Gutierrez   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6 |
| Mailing Address 1433 Hooper Ave<br>Ste 121  |   | <b>Transaction ID:</b> SA11A1.53907                             |
| City State Zip Code<br>Toms River NJ 08753  | Amount of Each Receipt this Period<br>2000.00 |   |
| FEC ID number of contributing federal political committee.<br>C   | Contribution                                  |   |
| Name of Employer<br>Occupation<br>Homemaker   |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2000.00           |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Richard O. Haase   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 4 / 2 0 0 6 |
| Mailing Address 7026 Elizabeth Dr   |   | <b>Transaction ID:</b> SA11A1.53979                             |
| City State Zip Code<br>McLean VA 22101  | Amount of Each Receipt this Period<br>1000.00 |   |
| FEC ID number of contributing federal political committee.<br>C   | Contribution                                  |   |
| Name of Employer<br>Occupation<br>Millenium Real Estate Real Estate Appraiser   |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Richard T. Hale  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 8 / 2 0 0 6 |
| Mailing Address 6876 Casey Rd   |   | <b>Transaction ID:</b> SA11A1.54170                             |
| City State Zip Code<br>Mechanicsburg OH 43044   | Amount of Each Receipt this Period<br>50.00   |   |
| FEC ID number of contributing federal political committee.<br>C   | Contribution                                  |   |
| Name of Employer<br>Occupation<br>Electric Eel Manufacturing Co., Inc. Consultant   |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>275.00            |   |

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

3050.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Col. Harold H. Hall, Jr.  
Mailing Address 18 Powder Creek Dr

City State Zip Code  
Belleville IL 62223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Strano and Associates

Occupation  
Real Estate Salesperson

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 12 / 2006

Transaction ID: SA11A1.54139

Amount of Each Receipt this Period

100.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. John M. Hansen  
Mailing Address 55 Overlook Dr

City State Zip Code  
Westfield MA 01085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 24 / 2006

Transaction ID: SA11A1.54232

Amount of Each Receipt this Period

75.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mark Hansen  
Mailing Address 4444 Hadfield Ln NW

City State Zip Code  
Washington DC 20007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kellogg, Hubert, and Hans-  
en

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2006

Transaction ID: SA11A1.54018

Amount of Each Receipt this Period

1000.00

Contribution

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

1175.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Mr. Joshua J. Harris

Mailing Address 1085 Park Ave

City State Zip Code  
 New York NY 10128

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allied Waste Industries

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.53818

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mrs. Marjorie R. Harris

Mailing Address 1085 Park Ave  
 Apt 5C

City State Zip Code  
 New York NY 10128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.53798

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Andrew Heaney

Mailing Address 10 E 85th St  
 Apt 9A

City State Zip Code  
 New York NY 10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heat USA

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53828

Amount of Each Receipt this Period

5000.00

Contribution

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

15000.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|   |  |   |   |  |
|---|--|---|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Ms. Joan M. Heaney   |  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6 |  |
| Mailing Address 93 Wolver Hollow Rd   |  |   | <b>Transaction ID:</b> SA11A1.53932                             |  |
| City State Zip Code<br>Glen Head NY 11545   |  | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  | Contribution                                  |   |  |
| Name of Employer Occupation<br>Retired  |  |   |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>1100.00           |   |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Robert F. Hernandez  |  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 0 / 2 0 0 6 |  |
| Mailing Address 217 NW 43rd St  |  |   | <b>Transaction ID:</b> SA11A1.54157                             |  |
| City State Zip Code<br>Kansas City MO 64116   |  | Amount of Each Receipt this Period<br>100.00  |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  | Contribution                                  |   |  |
| Name of Employer Occupation<br>Retired  |  |   |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>300.00            |   |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Robert Hess  |  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6 |  |
| Mailing Address PO Box 198  |  |   | <b>Transaction ID:</b> SA11A1.54062                             |  |
| City State Zip Code<br>Parlin NJ 08859  |  | Amount of Each Receipt this Period<br>800.00  |   |  |
| FEC ID number of contributing federal political committee.<br>C   |  | Contribution                                  |   |  |
| Name of Employer Occupation<br>Hess Brothers, Inc. President  |  |   |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>800.00            |   |  |

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

1900.00

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



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

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

FOR LINE NUMBER: PAGE 41 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Mr. Albert J. Hettinger, III  
Mailing Address 323 Quaker Hill Rd

City State Zip Code  
Pawling NY 12564

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Horse Breeder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.53926

Amount of Each Receipt this Period

1500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Luther L. Hill, Jr.  
Mailing Address 1209 Bell Ave

City State Zip Code  
Des Moines IA 50315

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nyemaster Law Firm

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 0 6

Transaction ID: SA11A1.53950

Amount of Each Receipt this Period

1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Ms. Melody L. Hobson  
Mailing Address 200 E Randolph St  
Ste 2900

City State Zip Code  
Chicago IL 60601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ariel Capital Mgmt.

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.54022

Amount of Each Receipt this Period

1000.00

Contribution

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

3500.00

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

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

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

FOR LINE NUMBER: PAGE 42 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Ms. Maureen E. Hoffman

Mailing Address 3069 Governors Xing

City State Zip Code

Wall Township

NJ

07719

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.54024

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mrs. Therese Hoffman

Mailing Address 1119 Pennsylvania Ave

City State Zip Code

Manasquan

NJ

08736

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53923

Amount of Each Receipt this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. James C. Holzwarth

Mailing Address 7555 County Road 160  
Apt 1

City State Zip Code

Salida

CO

81201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.54160

Amount of Each Receipt this Period

150.00

Contribution

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

3150.00

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

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

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

FOR LINE NUMBER: PAGE 43 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. William K. Hoyt, Jr.

Mailing Address 731 S Main St

City State Zip Code  
Winston Salem NC 27101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 24 / 2006

Transaction ID: SA11A1.54145

Amount of Each Receipt this Period

150.00

Contribution

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

Mr. Tom Huening

Mailing Address 451 Cornell Ave

City State Zip Code  
San Mateo CA 94402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
San Mateo County

Occupation  
Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2006

Transaction ID: SA11A1.54203

Amount of Each Receipt this Period

250.00

Contribution

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

Mrs. Margaret B. Humleker

Mailing Address 633 Ledgeview Blvd

City State Zip Code  
Fond du Lac WI 54935

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 18 / 2006

Transaction ID: SA11A1.53933

Amount of Each Receipt this Period

225.00

Contribution

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

625.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|   |  |  |   |
|---|--|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. Wally Humphress<br>Mailing Address 6902 Foxglove Rd<br>City State Zip Code<br>Coulterville IL 62237<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Retired<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>350.00                                      |  |  | Date of Receipt<br>MM / DD / YYYY<br>07 / 27 / 2006<br><b>Transaction ID:</b> SA11A1.54148<br>Amount of Each Receipt this Period<br>200.00<br>Contribution  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. William J. Hunckler, III<br>Mailing Address 1 N Wacker Dr<br>Ste 2323<br>City State Zip Code<br>Chicago IL 60606<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Tuesday Morning Corp. Director<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>2500.00 |  |  | Date of Receipt<br>MM / DD / YYYY<br>07 / 31 / 2006<br><b>Transaction ID:</b> SA11A1.53878<br>Amount of Each Receipt this Period<br>2500.00<br>Contribution |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. J. Robert Jones, III<br>Mailing Address 42 Sasco Creek Rd<br>City State Zip Code<br>Westport CT 06880<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Retired<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>1000.00                                   |  |  | Date of Receipt<br>MM / DD / YYYY<br>07 / 10 / 2006<br><b>Transaction ID:</b> SA11A1.53971<br>Amount of Each Receipt this Period<br>1000.00<br>Contribution |

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

3700.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 190

(check only one)

|   |                              |                              |   |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial)  
Mr. William G. Kagler

Mailing Address 18 Hampton Ln

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Cincinnati | OH    | 45208    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 1 |   | 2 | 0 | 0 | 6 |

Transaction ID: SA11A1.53924

Amount of Each Receipt this Period

500.00

Contribution

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

Mr. Alex Kaufman

Mailing Address 1020 King George Post Rd

|       |       |          |
|-------|-------|----------|
| City  | State | Zip Code |
| Fords | NJ    | 08863    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kaufman HoldingsOccupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 1 |   | 2 | 0 | 0 | 6 |

Transaction ID: SA11A1.53830

Amount of Each Receipt this Period

5000.00

Contribution

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

Mr. Michael K. Kellogg

Mailing Address 1615 M St NW  
Ste 400

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20036    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kellogg, Huber, Hansen,  
et al.Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 1 |   | 2 | 0 | 0 | 6 |

Transaction ID: SA11A1.53938

Amount of Each Receipt this Period

1000.00

Contribution

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

6500.00

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

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

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

FOR LINE NUMBER: PAGE 46 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. Peter R. Kellogg

Mailing Address **48 Wall St**  
**Fl 30**

City State Zip Code  
**New York NY 10005**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**07 / 31 / 2006**

Transaction ID: SA11A1.54028

Amount of Each Receipt this Period

**1000.00**

Contribution

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

Mr. Colin P. Kelly

Mailing Address **840 Appletree Ln**

City State Zip Code  
**Glenview IL 60025**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**07 / 18 / 2006**

Transaction ID: SA11A1.54094

Amount of Each Receipt this Period

**500.00**

Contribution

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

Mr. Peter R. Kemmerer

Mailing Address **37 N Main St**

City State Zip Code  
**Cranbury NJ 08512**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Mesa Verde, Inc.

Occupation  
 President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**07 / 31 / 2006**

Transaction ID: SA11A1.53943

Amount of Each Receipt this Period

**1000.00**

Contribution

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

**2500.00**

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

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

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

FOR LINE NUMBER: PAGE 47 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|   |  |  |  |
|---|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Prof. Orin Kerr<br>Mailing Address 129 N Fillmore St<br>City State Zip Code<br>Arlington VA 22201<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer George Washington University<br>Occupation Professor<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>500.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 0 6 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54096<br>Amount of Each Receipt this Period<br>500.00<br>Contribution |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Ms. Vivian L. Kimble<br>Mailing Address 8 Huntsman<br>City State Zip Code<br>Lemont IL 60439<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>Occupation Retired<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>500.00                                     |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 2 4 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54077<br>Amount of Each Receipt this Period<br>250.00<br>Contribution |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Ms. Eva H. Kirk<br>Mailing Address 4120 Tantara Rd<br>City State Zip Code<br>Toledo OH 43623<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>Occupation Homemaker<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>350.00                                   |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 2 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54146<br>Amount of Each Receipt this Period<br>150.00<br>Contribution |

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 48 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. Arland T. Kline

Mailing Address PO Box 55

City State Zip Code  
 Miami FL 33255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 1 / 2 0 0 6

Transaction ID: SA11A1.54207

Amount of Each Receipt this Period

250.00

Contribution

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

Mr. J. Burke Knapp

Mailing Address 501 Portola Rd  
 Apt 8093

City State Zip Code  
 Portola Valley CA 94028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 9 / 2 0 0 6

Transaction ID: SA11A1.54142

Amount of Each Receipt this Period

50.00

Contribution

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

Mr. Wade S. Kolb, Jr.

Mailing Address 107 N Main St

City State Zip Code  
 Sumter SC 29150

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Self

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.53981

Amount of Each Receipt this Period

1000.00

Contribution

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

1300.00

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



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

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

FOR LINE NUMBER: PAGE 49 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** Mr. Randall Krakauer

Mailing Address 29 Lorrie Ln

City State Zip Code  
 Princeton Junction NJ 08550

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Aetna

Occupation  
Medicare Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53879

Amount of Each Receipt this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

**B.** Ms. Kathleen K. Krehbiel

Mailing Address 505 S County Line Rd

City State Zip Code  
 Hinsdale IL 60521

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.53814

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

**C.** Mr. Alan J. Kristel

Mailing Address 900 Grand Blvd

City State Zip Code  
 Deer Park NY 11729

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Commercial Envelope Mfg.  
Co.

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.54179

Amount of Each Receipt this Period

250.00

Contribution

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

7250.00

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

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

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

FOR LINE NUMBER: PAGE 50 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert J. Kwait

Mailing Address 28325 Belcourt Rd

City State Zip Code  
Cleveland OH 44124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 24 2006

Transaction ID: SA11A1.53951

Amount of Each Receipt this Period

500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Judy M. Lamana

Mailing Address 7632 Bear Wallow Dr

City State Zip Code  
Warrenton VA 20186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Broker Power, Inc.

Occupation  
Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
07 10 2006

Transaction ID: SA11A1.54195

Amount of Each Receipt this Period

250.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Edwin C. Lamb

Mailing Address 3031 W Palmaire Ave

City State Zip Code  
Phoenix AZ 85051

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MCP Industries

Occupation  
Civil Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
07 18 2006

Transaction ID: SA11A1.54143

Amount of Each Receipt this Period

100.00

Contribution

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

850.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 190

(check only one)

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Mr. David Gerard Lambert

Mailing Address 320 Ridgeview Dr

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Palm Beach | FL    | 33480    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53870

Amount of Each Receipt this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Darrell A. Large

Mailing Address 583 Kumukahi Pl

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Honolulu | HI    | 96825    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.54221

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Armand Lembo, Jr.

Mailing Address 406 8th Ave

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Sea Girt | NJ    | 08750    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lemcor

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53987

Amount of Each Receipt this Period

1000.00

Contribution

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

3750.00

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

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

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

FOR LINE NUMBER: PAGE 52 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Mr. Howard Lester  
Mailing Address 3250 Van Ness Ave

City State Zip Code  
San Francisco CA 94109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Williams-Sonoma, Inc.

Occupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3850.73

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58146

Amount of Each Receipt this Period

3850.73

In-kind - Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Michael J. Letchinger  
Mailing Address 2709 Rittenhouse St NW

City State Zip Code  
Washington DC 20015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Potomac Golf Properties

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.53977

Amount of Each Receipt this Period

1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Barry J. Lind  
Mailing Address 1000 W Washington Blvd  
Apt 502

City State Zip Code  
Chicago IL 60607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
2217 Group, LLC

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.53887

Amount of Each Receipt this Period

2000.00

Contribution

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

6850.73

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

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

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

FOR LINE NUMBER: PAGE 53 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|  |  |  |  |
|--|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mrs. Dorothy C. Lutz<br>Mailing Address 1737 Princeton Dr<br>City State Zip Code<br>State College PA 16803<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Homemaker<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>265.00                                  |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 2 4 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54173<br>Amount of Each Receipt this Period<br>50.00<br>Contribution  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Walter S. Mack, Jr.<br>Mailing Address 225 Central Park W<br>Apt 1401<br>City State Zip Code<br>New York NY 10024<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Doar, Rieck, and Mack Attorney<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>1150.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 0 5 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.53931<br>Amount of Each Receipt this Period<br>50.00<br>Contribution  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Stephen Paul Mahinka<br>Mailing Address 1111 Pennsylvania Ave NW<br>City State Zip Code<br>Washington DC 20004<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Morgan Lewis Attorney<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>500.00              |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 4 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54102<br>Amount of Each Receipt this Period<br>500.00<br>Contribution |

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

600.00

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

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

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

FOR LINE NUMBER: PAGE 54 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Mr. James A. Mahoney, Jr.

Mailing Address 4905 Cumberland Ave

City State Zip Code  
 Chevy Chase MD 20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Museum Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.54073

Amount of Each Receipt this Period

150.00

Contribution

Full Name (Last, First, Middle Initial)

B. The Hon. Frederic V. Malek

Mailing Address 1455 Pennsylvania Ave NW  
 Ste 350

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thayer Capital Partners

Occupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53838

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. James R. Maloney

Mailing Address 508 W Harmont Dr

City State Zip Code  
 Phoenix AZ 85021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. Department of Justice

Occupation  
Investigator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.54124

Amount of Each Receipt this Period

200.00

Contribution

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

5350.00

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

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

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

FOR LINE NUMBER: PAGE 55 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|   |                                     |   |   |
|---|-------------------------------------|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. Alfred K. Mann   |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 2 7 / 2 0 0 6 |   |
| Mailing Address 309 Florence Ave<br>Apt N224  |                                     | <b>Transaction ID:</b> SA11A1.54079                             |   |
| City<br>Jenkintown  | State<br>PA                         | Zip Code<br>19046   | Amount of Each Receipt this Period<br>500.00  |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Contribution  |   |
| Name of Employer<br>  | Occupation<br>Retired               |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00  |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Clark W. Martin  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6 |   |
| Mailing Address 918 Roeloffs Rd   |                                     | <b>Transaction ID:</b> SA11A1.53992                             |   |
| City<br>Yardley   | State<br>PA                         | Zip Code<br>19067   | Amount of Each Receipt this Period<br>1000.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Contribution  |   |
| Name of Employer<br>MBI-GluckShaw   | Occupation<br>Consultant            |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Ms. Kathryn L. Martin  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 0 4 / 2 0 0 6 |   |
| Mailing Address 309 W 78th St<br>Apt 3  |                                     | <b>Transaction ID:</b> SA11A1.54186                             |   |
| City<br>New York  | State<br>NY                         | Zip Code<br>10024   | Amount of Each Receipt this Period<br>250.00  |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Contribution  |   |
| Name of Employer<br>SPG, Inc.   | Occupation<br>Recruiter             |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00  |   |   |

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 56 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Ms. Kathryn L. Martin

Mailing Address 309 W 78th St  
Apt 3

City State Zip Code  
New York NY 10024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SPG, Inc.

Occupation  
Recruiter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y  
07 04 2006

Transaction ID: SA11A1.58135

Amount of Each Receipt this Period

30.00

Contribution

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

Mr. Richard M. Maser

Mailing Address 68 Rivergate Way

City State Zip Code  
Long Branch NJ 07740

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Maser Engineering

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2006

Transaction ID: SA11A1.54034

Amount of Each Receipt this Period

1000.00

Contribution

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

Capt. Eugene M. Masica, USN

Mailing Address 37 S Saint Andrews Dr

City State Zip Code  
Ormond Beach FL 32174

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
07 28 2006

Transaction ID: SA11A1.54177

Amount of Each Receipt this Period

50.00

Contribution

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

1080.00

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



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

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

FOR LINE NUMBER: PAGE 57 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Kathy Mayer  
Mailing Address 172 Long Neck Point Rd

City State Zip Code  
Darien CT 06820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 31 2006

Transaction ID: SA11A1.53846

Amount of Each Receipt this Period

5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. William E. Mayer  
Mailing Address 172 Long Neck Point Rd

City State Zip Code  
Darien CT 06820

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Park Ave. Equity Partners

Occupation  
Senior Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 31 2006

Transaction ID: SA11A1.53856

Amount of Each Receipt this Period

5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Anthony J. Mazza

Mailing Address 205 S Mill St  
Ste 301A

City State Zip Code  
Aspen CO 81611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
M and W Properties

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 31 2006

Transaction ID: SA11A1.53832

Amount of Each Receipt this Period

5000.00

Contribution

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

15000.00

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

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

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

FOR LINE NUMBER: PAGE 58 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Ms. Leslie E. McClelland

Mailing Address PO Box 310

City State Zip Code  
 Lancaster OH 43130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cyril Scott

Occupation  
Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.53968

Amount of Each Receipt this Period

500.00

Contribution

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

Dr. William C. McCormick

Mailing Address 2863 Palmer Dr

City State Zip Code  
 Sierra Vista AZ 85650

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.53929

Amount of Each Receipt this Period

500.00

Contribution

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

Mr. John D. McGrane

Mailing Address 1111 Pennsylvania Ave NW

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Morgan Lewis

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.53975

Amount of Each Receipt this Period

1000.00

Contribution

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

2000.00

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

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

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

FOR LINE NUMBER: PAGE 59 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|   |  |  |   |
|---|--|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mrs. Judith S. McLendon<br>Mailing Address 850 Clayton Ave<br>City State Zip Code<br>Bay Head NJ 08742<br>FEC ID number of contributing federal political committee. C<br>Name of Employer Occupation<br>Homemaker<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>2000.00 |  |  | Date of Receipt<br>MM / DD / YYYY<br>07 / 31 / 2006<br><b>Transaction ID:</b> SA11A1.53901<br>Amount of Each Receipt this Period<br>2000.00<br>Contribution |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Denman K. McNear<br>Mailing Address 10 Turnagain Rd<br>City State Zip Code<br>Kentfield CA 94904<br>FEC ID number of contributing federal political committee. C<br>Name of Employer Occupation<br>Retired<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>500.00      |  |  | Date of Receipt<br>MM / DD / YYYY<br>07 / 18 / 2006<br><b>Transaction ID:</b> SA11A1.54076<br>Amount of Each Receipt this Period<br>500.00<br>Contribution  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Joseph M. McVaugh<br>Mailing Address HC 3 Box 516<br>City State Zip Code<br>Payson AZ 85541<br>FEC ID number of contributing federal political committee. C<br>Name of Employer Occupation<br>Retired<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>300.00           |  |  | Date of Receipt<br>MM / DD / YYYY<br>07 / 28 / 2006<br><b>Transaction ID:</b> SA11A1.54158<br>Amount of Each Receipt this Period<br>100.00<br>Contribution  |

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

2600.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|  |  |  |   |
|--|--|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mrs. Adrienne P. McWilliam<br>Mailing Address 176 Alpine Trail Dr<br>City State Zip Code<br>Draper UT 84020<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Retired<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>500.00                       |  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 7 / 2 1 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54083<br>Amount of Each Receipt this Period<br>100.00<br>Contribution  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. David S. Meiskin<br>Mailing Address 7 Wildflower Ct<br>City State Zip Code<br>Manalapan NJ 07726<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Windsor Mgmt. Real Estate Developer<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>2000.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.53893<br>Amount of Each Receipt this Period<br>2000.00<br>Contribution |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Chaim Melcer<br>Mailing Address 1226 Tuxedo Ter<br>City State Zip Code<br>Lakewood NJ 08701<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Self Investor<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>4000.00                            |  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.53858<br>Amount of Each Receipt this Period<br>4000.00<br>Contribution |

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

6100.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mailing Address 1226 Tuxedo Ter

City State Zip Code  
Lakewood NJ 08701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53994

Amount of Each Receipt this Period

1000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Katharine E. Merck

Mailing Address 1010 Waltham St  
Apt F19

City State Zip Code  
Lexington MA 02421

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.54071

Amount of Each Receipt this Period

300.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Norman J. Metcalfe

Mailing Address 2007 Bayadere Ter

City State Zip Code  
Corona Del Mar CA 92625

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ryland Group

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.53928

Amount of Each Receipt this Period

1000.00

Contribution

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

2300.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. Roberto Mignone

Mailing Address 9 Essex Pl

City State Zip Code  
 Bronxville NY 10708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bridger Capital

Occupation  
Investment Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 0 / 2 0 0 6

Transaction ID: SA11A1.53810

Amount of Each Receipt this Period

5000.00

Contribution

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

Milestone Capital Management, LLC

Mailing Address 1775 Eye St NW  
 Ste 800

City State Zip Code  
 Washington DC 20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.53862

Amount of Each Receipt this Period

3000.00

Partnership Contribution  
(See Memo)

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

Mr. Murry Guntz

Mailing Address 1775 Eye St NW  
 Ste 800

City State Zip Code  
 Washington DC 20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Milestone Capital Managem-  
ent, LLC

Occupation  
Managing Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.53862.0

Amount of Each Receipt this Period

3000.00

Contribution

[MEMO ITEM]

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

8000.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

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

Mr. James H. Mintun, Jr.

Mailing Address 2 Beach Pl

City State Zip Code  
**Fredonia NY 14063**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
**Retired**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**07 / 10 / 2006**

**Transaction ID: SA11A1.53947**

Amount of Each Receipt this Period

**1000.00**

Contribution

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

Mr. John E. Mitchell

Mailing Address 6225 Mineral Point Rd  
Apt 44

City State Zip Code  
**Madison WI 53705**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
**Retired**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**07 / 10 / 2006**

**Transaction ID: SA11A1.54193**

Amount of Each Receipt this Period

**250.00**

Contribution

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

Mr. William S. Moore, Jr.

Mailing Address 511 Wildbrook Ln

City State Zip Code  
**Birmingham AL 35216**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
**Retired**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**600.00**

Date of Receipt

**07 / 19 / 2006**

**Transaction ID: SA11A1.54070**

Amount of Each Receipt this Period

**100.00**

Contribution

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

**1350.00**

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

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

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Mr. Edward K. Mullen  
Mailing Address 136 Holmes Mill Rd

City State Zip Code  
Cream Ridge NJ 08514

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53895

Amount of Each Receipt this Period

2000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. W. L. Neuendorff  
Mailing Address 590 Camino Mojado

City State Zip Code  
Sierra Vista AZ 85635

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Signal Solutions, Inc.

Occupation

Electronics Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.54060

Amount of Each Receipt this Period

100.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Floyd Ligon Norton, IV  
Mailing Address 1111 Pennsylvania Ave NW

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Morgan Lewis

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.54100

Amount of Each Receipt this Period

500.00

Contribution

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

2600.00

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



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

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

Mr. Robert A. Nova

Mailing Address 13702 179th Ave SE

City State Zip Code  
**Monroe WA 98272**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
**07 19 2006**

**Transaction ID: SA11A1.54087**

Amount of Each Receipt this Period

250.00

Contribution

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

Mr. Robert O'Leary

Mailing Address 6205 Peachtree Dunwoody Rd NE

City State Zip Code  
**Atlanta GA 30328**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Cox Enterprises, Inc.

Occupation

Executive VP/CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
**07 26 2006**

**Transaction ID: SA11A1.54114**

Amount of Each Receipt this Period

500.00

Contribution

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

Mrs. Fran Orr

Mailing Address 801 N Howard St  
Apt 103

City State Zip Code  
**Alexandria VA 22304**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Coldwell Banker

Occupation

Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
**07 18 2006**

**Transaction ID: SA11A1.54213**

Amount of Each Receipt this Period

250.00

Contribution

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

1000.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Dr. Mehmet C. Oz  
Mailing Address 14 Edgewater Rd

City State Zip Code  
Cliffside Pk NJ 07010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NY Presbyterian Hospital

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.54197

Amount of Each Receipt this Period

250.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Dan S. Palmer, Jr.  
Mailing Address 223 Wilshire Blvd  
Ste 800

City State Zip Code  
Santa Monica CA 90401

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Palmer Investments, Inc.

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.53822

Amount of Each Receipt this Period

5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. John M. Percival  
Mailing Address 301 Carpenter Dr

City State Zip Code  
Hollister CA 95023

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.53957

Amount of Each Receipt this Period

250.00

Contribution

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

5500.00

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

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

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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

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

Mr. Leonard C. Perham

Mailing Address PO Box 2610

City State Zip Code  
**Saratoga CA 95070**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
**Retired**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**07 / 24 / 2006**

**Transaction ID: SA11A1.54225**

Amount of Each Receipt this Period

**250.00**

Contribution

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

Mr. George W. Perry

Mailing Address 5908 Fallsview Ln

City State Zip Code  
**Dallas TX 75252**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
**Retired**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**07 / 19 / 2006**

**Transaction ID: SA11A1.53940**

Amount of Each Receipt this Period

**1000.00**

Contribution

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

Mr. Elliott W. Phillips

Mailing Address 1615 S Bryan St  
Apt 2

City State Zip Code  
**Amarillo TX 79102**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
**Retired**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**400.00**

Date of Receipt

**07 / 18 / 2006**

**Transaction ID: SA11A1.54128**

Amount of Each Receipt this Period

**300.00**

Contribution

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

**1550.00**

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

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

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Mr. Roger L. Pock  
Mailing Address 201 N Meridian Ave

City State Zip Code  
Oklahoma City OK 73107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cimarron Steak House

Occupation  
Restaurant Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 27 2006

Transaction ID: SA11A1.53927

Amount of Each Receipt this Period

250.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Daniel H. Polett  
Mailing Address 954 Stony Ln

City State Zip Code  
Gladwyne PA 19035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Car Dealer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2006

Transaction ID: SA11A1.53872

Amount of Each Receipt this Period

2500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Ms. Wendy Poole  
Mailing Address 40428 Spectacular Bid Pl

City State Zip Code  
Leesburg VA 20176

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Administrative Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
07 05 2006

Transaction ID: SA11A1.54162

Amount of Each Receipt this Period

50.00

Contribution

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

2800.00

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

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

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

FOR LINE NUMBER: PAGE 69 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|   |  |   |
|---|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. Vincent J. Puma<br>Mailing Address 208 E 51st St<br>Ste 390<br>City State Zip Code<br>New York NY 10022<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Hudson Capital Partners Investment Banker<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>1000.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54056<br>Amount of Each Receipt this Period<br>1000.00<br>Contribution |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Forrest Ramsey, Jr.<br>Mailing Address 1700 Stoney Brook Rd<br>City State Zip Code<br>Bedford VA 24523<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Retired<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>250.00                                     |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 9 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54189<br>Amount of Each Receipt this Period<br>150.00<br>Contribution  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Robert W. Ray<br>Mailing Address 27 Rumson Rd<br>City State Zip Code<br>Rumson NJ 07760<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Kelley, Drye, and Warren, LLP Attorney<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼<br>1000.00                    |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54036<br>Amount of Each Receipt this Period<br>1000.00<br>Contribution |

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

2150.00

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

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

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

FOR LINE NUMBER: PAGE 70 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harry L. Reed  
Mailing Address 5422 Dumfries Dr

City State Zip Code  
Houston TX 77096

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
South Texas College of Law

Occupation  
Law Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 18 / 2006

Transaction ID: SA11A1.54229

Amount of Each Receipt this Period

225.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard G. Reed  
Mailing Address 305 Cameron St

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Stevens, Reed, Curcio, and  
Co.

Occupation  
Media Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2006

Transaction ID: SA11A1.53945

Amount of Each Receipt this Period

1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. William E. Reitz  
Mailing Address 425 McCall Ave

City State Zip Code  
West Islip NY 11795

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
T-Mobile

Occupation  
Switch Technician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 19 / 2006

Transaction ID: SA11A1.54082

Amount of Each Receipt this Period

100.00

Contribution

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

1325.00

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

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

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

FOR LINE NUMBER: PAGE 71 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Mr. Jeffrey Joseph Renzulli

Mailing Address 1021 N Garfield St  
Apt 226

City State Zip Code  
Arlington VA 22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Watt, Tieder, Hoffar

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2006

Transaction ID: SA11A1.54118

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Stewart A. Resnick

Mailing Address 11444 W Olympic Blvd

City State Zip Code  
Los Angeles CA 90064

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Roll Intl. Corp.

Occupation  
Chairman/President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2006

Transaction ID: SA11A1.53794

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Allan E. Reznick

Mailing Address 1177 Avenue Of The Americas

City State Zip Code  
New York NY 10036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kramer, Levin, et al., LLP

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2006

Transaction ID: SA11A1.54098

Amount of Each Receipt this Period

500.00

Contribution

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

6000.00

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

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

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

FOR LINE NUMBER: PAGE 72 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. Howard Rich

Mailing Address 289 Ocean Ave

City State Zip Code  
 Marblehead MA 01945

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.54069

Amount of Each Receipt this Period

150.00

Contribution

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

Mr. Lunsford Richardson

Mailing Address 7 Indian Spring Rd

City State Zip Code  
 Norwalk CT 06853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Richardson and Associates

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.54086

Amount of Each Receipt this Period

250.00

Contribution

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

Ms. Cynthia Riggs

Mailing Address 350A Dover Milton Rd

City State Zip Code  
 Oak Ridge NJ 07438

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 9 / 2 0 0 6

Transaction ID: SA11A1.54165

Amount of Each Receipt this Period

300.00

Contribution

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

700.00

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



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

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

FOR LINE NUMBER: PAGE 73 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|  |  |  |   |
|--|--|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. James F. Rill<br>Mailing Address 1299 Pennsylvania Ave NW<br>City State Zip Code<br>Washington DC 20004<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>Howrey, Simon, Arnold, and White<br>Occupation<br>Partner<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>5000.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.53807<br>Amount of Each Receipt this Period<br>5000.00<br>Contribution |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Edward J. Robbins<br>Mailing Address 1782 Wachusett St<br>City State Zip Code<br>Jefferson MA 01522<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>Self<br>Occupation<br>Investor<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>250.00                                 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 2 4 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54223<br>Amount of Each Receipt this Period<br>250.00<br>Contribution  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Lawrence W. Roberts<br>Mailing Address 9 Vista Pl<br>City State Zip Code<br>Red Bank NJ 07701<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>Retired<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>2000.00   |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.53905<br>Amount of Each Receipt this Period<br>2000.00<br>Contribution |

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

7250.00

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

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

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

FOR LINE NUMBER: PAGE 74 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|   |   |   |
|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. Richard L. Robinson  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 8 / 2 0 0 6 |
| Mailing Address 39 Polo Club Cir  |   | <b>Transaction ID:</b> SA11A1.53936                             |
| City State Zip Code<br>Denver CO 80209  | Amount of Each Receipt this Period<br>1000.00 |   |
| FEC ID number of contributing federal political committee.<br>C   | Contribution                                  |   |
| Name of Employer Robinson Dairy, LLC<br>Occupation CEO  | Aggregate Year-to-Date ▼<br>1000.00           |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |

|   |   |   |
|---|---|---|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Geoffrey C. Rockhill   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6 |
| Mailing Address 180 Riverside Dr Apt 12E  |   | <b>Transaction ID:</b> SA11A1.53996                             |
| City State Zip Code<br>New York NY 10024  | Amount of Each Receipt this Period<br>1000.00 |   |
| FEC ID number of contributing federal political committee.<br>C   | Contribution                                  |   |
| Name of Employer Newmark Knight Frank<br>Occupation Real Estate   | Aggregate Year-to-Date ▼<br>1000.00           |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |

|   |  |   |
|---|--|---|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. E. King Rogers   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 8 / 2 0 0 6 |
| Mailing Address 2801 Mikes Rd   |  | <b>Transaction ID:</b> SA11A1.54132                             |
| City State Zip Code<br>Buyck MN 55771   | Amount of Each Receipt this Period<br>100.00 |   |
| FEC ID number of contributing federal political committee.<br>C   | Contribution                                 |   |
| Name of Employer Dayton Hudson Corp.<br>Occupation Vice President   | Aggregate Year-to-Date ▼<br>400.00           |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |

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

2100.00

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

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

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

FOR LINE NUMBER: PAGE 75 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

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

Mr. Joseph Roselle

Mailing Address 441 Oval Rd

City State Zip Code  
**Manasquan NJ 08736**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
**07 31 2006**

Transaction ID: SA11A1.54004

Amount of Each Receipt this Period

1000.00

Contribution

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

Mr. Kenneth A. Rosen

Mailing Address 65 Livingston Ave

City State Zip Code  
**Roseland NJ 07068**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Lowenstein Sandler

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
**07 31 2006**

Transaction ID: SA11A1.54010

Amount of Each Receipt this Period

1000.00

Contribution

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

Mr. Joseph D. Roxe

Mailing Address 450 Park Ave  
 Fl 6

City State Zip Code  
**New York NY 10022**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Bay Holdings, LLC

Occupation

Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
**07 21 2006**

Transaction ID: SA11A1.53962

Amount of Each Receipt this Period

1000.00

Contribution

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

**3000.00**

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

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

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

FOR LINE NUMBER: PAGE 76 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

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

Mr. William J. Rushton, III

Mailing Address PO Box 2606

City State Zip Code  
**Birmingham AL 35202**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
**Retired**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**07 / 19 / 2006**

**Transaction ID: SA11A1.53942**

Amount of Each Receipt this Period

**1000.00**

Contribution

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

Mr. Sean Rutter

Mailing Address 13460 Bobby Ln

City State Zip Code  
**Elm Grove WI 53122**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Ernst & Young**

Occupation  
**Partner**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**07 / 10 / 2006**

**Transaction ID: SA11A1.54201**

Amount of Each Receipt this Period

**250.00**

Contribution

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

Mr. Charles H. Salisbury, Jr.

Mailing Address 300 E Lombard St  
 Ste 620

City State Zip Code  
**Baltimore MD 21202**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Salisbury Broadcasting Co.**

Occupation  
**President**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**375.00**

Date of Receipt

**07 / 18 / 2006**

**Transaction ID: SA11A1.54137**

Amount of Each Receipt this Period

**375.00**

Contribution

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

**1625.00**

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

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

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

FOR LINE NUMBER: PAGE 77 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

**A.** Full Name (Last, First, Middle Initial)  
 Ms. Ann M. Scheuer

Mailing Address 217 Park St

City State Zip Code  
 New Canaan CT 06840

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
 Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.54112

Amount of Each Receipt this Period

500.00

Contribution

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

Mr. Walter J. Schloss

Mailing Address 350 Park Ave

City State Zip Code  
 New York NY 10022

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Self

Occupation  
 Financial Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.54066

Amount of Each Receipt this Period

500.00

Contribution

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

Mrs. Jennifer D. Schmuckler

Mailing Address PO Box 181

City State Zip Code  
 New Vernon NJ 07976

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
 Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53808

Amount of Each Receipt this Period

5000.00

Contribution

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

6000.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 190

(check only one)

|   |                              |                              |   |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|   |                          |   |   |
|---|--------------------------|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. Randy G. Schriver  |                          | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 2 8 / 2 0 0 6 |   |
| Mailing Address 2300 Clarendon Blvd<br>Ste 601  |                          | <b>Transaction ID:</b> SA11A1.53983                             |   |
| City<br>Arlington   | State<br>VA              | Zip Code<br>22201   | Amount of Each Receipt this Period<br>1000.00 |
| FEC ID number of contributing federal political committee.<br>C   |                          | Contribution  |   |
| Name of Employer<br>Armitage Intl.  | Occupation<br>Consultant | Aggregate Year-to-Date ▼<br>1000.00                             |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Richard W. Selph   |                          | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 2 7 / 2 0 0 6 |   |
| Mailing Address 2301 Scott St<br>Apt 1  |                          | <b>Transaction ID:</b> SA11A1.54153                             |   |
| City<br>San Francisco   | State<br>CA              | Zip Code<br>94115   | Amount of Each Receipt this Period<br>100.00  |
| FEC ID number of contributing federal political committee.<br>C   |                          | Contribution  |   |
| Name of Employer<br>United Airlines   | Occupation<br>Pilot      | Aggregate Year-to-Date ▼<br>300.00                              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mrs. Ruth N. Sharkey   |                          | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6 |   |
| Mailing Address 195 High Tor Dr   |                          | <b>Transaction ID:</b> SA11A1.54040                             |   |
| City<br>Watchung  | State<br>NJ              | Zip Code<br>07069   | Amount of Each Receipt this Period<br>1000.00 |
| FEC ID number of contributing federal political committee.<br>C   |                          | Contribution  |   |
| Name of Employer  | Occupation<br>Retired    | Aggregate Year-to-Date ▼<br>1000.00                             |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |   |   |

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

2100.00

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

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

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

FOR LINE NUMBER: PAGE 79 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. Thomas J. Sharkey, Jr.

Mailing Address 1056 Johnston Dr

City State Zip Code

Watchung NJ 07069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bank of America

Occupation  
Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2006

Transaction ID: SA11A1.54046

Amount of Each Receipt this Period

1000.00

Contribution

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

Mr. Thomas J. Sharkey

Mailing Address 195 High Tor Dr

City State Zip Code

Watchung NJ 07069

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2006

Transaction ID: SA11A1.54048

Amount of Each Receipt this Period

1000.00

Contribution

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

Ms. Judith Shaw

Mailing Address 735 Prospect Ave

City State Zip Code

Princeton NJ 08540

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MBI-GluckShaw

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2006

Transaction ID: SA11A1.53959

Amount of Each Receipt this Period

1000.00

Contribution

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

3000.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Mr. Timothy H. Shinn

Mailing Address 111 N Michigan Ave

City State Zip Code  
Kenilworth NJ 07033

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
United Crane

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2006

Transaction ID: SA11A1.54050

Amount of Each Receipt this Period

1000.00

Contribution

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

Mr. Seymour Silver

Mailing Address 942 Navesink River Rd

City State Zip Code  
Rumson NJ 07760

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Silver Enterprises

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2006

Transaction ID: SA11A1.53915

Amount of Each Receipt this Period

2000.00

Contribution

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

Mr. Donald M. Sladkin

Mailing Address 7009 Masters Dr

City State Zip Code  
Potomac MD 20854

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 31 2006

Transaction ID: SA11A1.53836

Amount of Each Receipt this Period

5000.00

Contribution

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

8000.00

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



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

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 81 / 190

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

|   |                                    |   |  |
|---|------------------------------------|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. Britton Smith  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 2 4 / 2 0 0 6 |  |
| Mailing Address 300 W Arrington St<br>Ste 250   |                                    | <b>Transaction ID:</b> SA11A1.54058                             |  |
| City Farmington   | State NM                           | Zip Code 87401  | Amount of Each Receipt this Period<br>200.00 |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                    | Contribution  |  |
| Name of Employer<br>Smith, Oldfield, and Associates   | Occupation<br>CPA                  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>850.00 |   |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Capt. Gerald W. Smith, USN   |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 9 / 2 0 0 6 |  |
| Mailing Address PO Box 449  |                                    | <b>Transaction ID:</b> SA11A1.54127                             |  |
| City Graham   | State TX                           | Zip Code 76450  | Amount of Each Receipt this Period<br>100.00 |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                    | Contribution  |  |
| Name of Employer  | Occupation<br>Retired              |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>400.00 |   |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Scotty A. Smith  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 2 4 / 2 0 0 6 |  |
| Mailing Address 2081 Little Bear Rd   |                                    | <b>Transaction ID:</b> SA11A1.54226                             |  |
| City Gallatin Gateway   | State MT                           | Zip Code 59730  | Amount of Each Receipt this Period<br>115.00 |
| FEC ID number of contributing federal political committee. <b>C</b>   |                                    | Contribution  |  |
| Name of Employer<br>Self  | Occupation<br>Engineer             |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>240.00 |   |  |

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

415.00

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

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

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Dr. Thomas V. Sollas, Jr.

Mailing Address 79 Bay Point Harbour

City State Zip Code  
 Point Pleasant Bor NJ 08742

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Clayton Mgmt. Co., LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53917

Amount of Each Receipt this Period

2000.00

Contribution

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

Mr. Saul Solomon

Mailing Address 535 Marriott Dr

City State Zip Code  
 Nashville TN 37214

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bridgestone

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.54104

Amount of Each Receipt this Period

500.00

Contribution

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

Mr. Hans Sommer

Mailing Address 24 Los Monteros Dr

City State Zip Code  
 Dana Point CA 92629

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.54187

Amount of Each Receipt this Period

150.00

Contribution

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

2650.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. Lester D. Speyer

Mailing Address 87 Valley Frg

City State Zip Code  
 Nashville TN 37205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tennsco Corp.

Occupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 9 / 2 0 0 6

Transaction ID: SA11A1.54155

Amount of Each Receipt this Period

300.00

Contribution

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

Mrs. Gillian V. Steel

Mailing Address 71 Mayfair Ln

City State Zip Code  
 Greenwich CT 06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53842

Amount of Each Receipt this Period

5000.00

Contribution

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

Mr. Robert King Steel

Mailing Address 71 Mayfair Ln

City State Zip Code  
 Greenwich CT 06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53805

Amount of Each Receipt this Period

5000.00

Contribution

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

10300.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Mr. Barry S. Sternlicht

Mailing Address 1111 Westchester Ave

City State Zip Code  
 White Plains NY 10604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Starwood Hotels and Resor-  
ts

Occupation  
Chairman/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53802

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. John A. Swanson

Mailing Address 1551 Saint James Cir

City State Zip Code  
 Lady Lake FL 32162

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.54209

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Jason D. Sweet

Mailing Address 3417 Caruth Blvd

City State Zip Code  
 Dallas TX 75225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
XL Digital Imaging

Occupation  
Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.54090

Amount of Each Receipt this Period

500.00

Contribution

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

5750.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. A. Robert Taylor

Mailing Address 229 Lovely Ln

City State Zip Code  
 Asheville NC 28803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Management Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.54131

Amount of Each Receipt this Period

100.00

Contribution

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

Prof. James D. Tracy

Mailing Address 757 Osceola Ave  
 # 2

City State Zip Code  
 Saint Paul MN 55105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Minnesota

Occupation  
History Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.54150

Amount of Each Receipt this Period

300.00

Contribution

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

Mr. Robert J. Troller

Mailing Address 5810 Barton Rd

City State Zip Code  
 Madison WI 53711

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.54125

Amount of Each Receipt this Period

100.00

Contribution

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

500.00

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

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Ms. Evelyn C. Vaden

Mailing Address 4509 Long Ln

City State Zip Code  
 Franklin TN 37064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 9 / 2 0 0 6

Transaction ID: SA11A1.54227

Amount of Each Receipt this Period

50.00

Contribution

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

Miss Suzanne Vadman

Mailing Address 4540 8th Ave NE  
 Apt 1501

City State Zip Code  
 Seattle WA 98105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.54182

Amount of Each Receipt this Period

100.00

Contribution

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

Mrs. Jean A. Van Landingham

Mailing Address 4236 Westfield Dr

City State Zip Code  
 Rockford IL 61101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 9 / 2 0 0 6

Transaction ID: SA11A1.53934

Amount of Each Receipt this Period

200.00

Contribution

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

350.00

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

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Ms. T. Robin Visconi

Mailing Address 370 Tall Tree Ct

City State Zip Code  
 Jackson NJ 08527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Turnkey Productions, LLC

Occupation  
Fundraiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.54054

Amount of Each Receipt this Period

1000.00

Contribution

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

Mr. Damon D. Wack

Mailing Address 18503 Tranquility Base Ln

City State Zip Code  
 Port St Lucie FL 34987

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Baad Attitudes

Occupation  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.54211

Amount of Each Receipt this Period

250.00

Contribution

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

Ms. Cheryl H. Walden

Mailing Address 2366 Dogwood Cir

City State Zip Code  
 Erie CO 80516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. Government

Occupation  
International Trade Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53881

Amount of Each Receipt this Period

2000.00

Contribution

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

3250.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

|   |  |  |   |
|---|--|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. Bruce Walker<br>Mailing Address 2900 Lake St<br>City State Zip Code<br>San Francisco CA 94121<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Retired<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>250.00                      |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 2 5 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54184<br>Amount of Each Receipt this Period<br>250.00<br>Contribution  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Ira A. Walker<br>Mailing Address 89 Broad St<br>City State Zip Code<br>Red Bank NJ 07701<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Morgan Stanley Financial Advisor<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>1000.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.53998<br>Amount of Each Receipt this Period<br>1000.00<br>Contribution |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Frank A. Walkley<br>Mailing Address 5603 School Rd<br>City State Zip Code<br>Gainesville NY 14066<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Self Volunteer<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>300.00           |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 9 / 2 0 0 6<br><b>Transaction ID:</b> SA11A1.54151<br>Amount of Each Receipt this Period<br>100.00<br>Contribution  |

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

**1350.00**

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



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

Use separate schedule(s)  
or each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

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

Mr. Frank E. Walsh, III

Mailing Address 330 South St

City State Zip Code  
 Morristown NJ 07960

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jupiter Capital Mgmt.

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53897

Amount of Each Receipt this Period

2000.00

Contribution

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

Mr. Frank J. Walsh

Mailing Address 12 Chestnut Ridge Rd

City State Zip Code  
 Saddle River NJ 07458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Retail Systems

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53840

Amount of Each Receipt this Period

5000.00

Contribution

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

Mr. Jeffrey R. Walsh

Mailing Address 330 South St

City State Zip Code  
 Morristown NJ 07960

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jupiter Capital

Occupation  
Investment Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.53899

Amount of Each Receipt this Period

2000.00

Contribution

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

9000.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Mr. Charles B. Wang  
Mailing Address 1535 Old Country Rd

City State Zip Code  
Plainview NY 11803

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NY Islanders

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 31 2006

Transaction ID: SA11A1.53800

Amount of Each Receipt this Period

5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Peter Wegener  
Mailing Address 1 Airport Rd

City State Zip Code  
Lakewood NJ 08701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Bathgate, Wegener, and Wo-  
lf

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 31 2006

Transaction ID: SA11A1.54030

Amount of Each Receipt this Period

1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Howard M. Werner  
Mailing Address 924 Farmington Ave

City State Zip Code  
West Hartford CT 06107

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 24 2006

Transaction ID: SA11A1.54185

Amount of Each Receipt this Period

50.00

Contribution

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

6050.00

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

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

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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. Barry Weshnak

Mailing Address PO Box 496

City State Zip Code  
**Allenwood NJ 08720**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Barrymot Enterprises, Inc.

Occupation  
 Real Estate Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
**07 31 2006**

Transaction ID: SA11A1.53891

Amount of Each Receipt this Period

1000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
 Mr. Barry Weshnak

Mailing Address PO Box 496

City State Zip Code  
**Allenwood NJ 08720**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Barrymot Enterprises, Inc.

Occupation  
 Real Estate Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
**07 31 2006**

Transaction ID: SA11A1.53990

Amount of Each Receipt this Period

1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
 Mr. Michael Arnold Westphal

Mailing Address 12729 Camden Park Ct

City State Zip Code  
**Bristow VA 20136**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Oakley Networks

Occupation  
 Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
**07 31 2006**

Transaction ID: SA11A1.54020

Amount of Each Receipt this Period

1000.00

Contribution

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

**3000.00**

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

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

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Miss Elizabeth S. Williams

Mailing Address 1 Bishop Gadsden Way  
Apt 211

City State Zip Code  
 Charleston SC 29412

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.54161

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

B. Capt. Leland E. Wood, Jr.

Mailing Address 2333 S Rolfe St

City State Zip Code  
 Arlington VA 22202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.54140

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

C. Jan L. Wouters

Mailing Address 19 Sycamore Ln

City State Zip Code  
 Rumson NJ 07760

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Bathgate, Wegener, and Wo-  
 lf

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.54000

Amount of Each Receipt this Period

1000.00

Contribution

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

1200.00

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

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

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial)  
Mr. Howard R. Wuertz

Mailing Address 3261 W Bechtel Rd

City State Zip Code  
Coolidge AZ 85228

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2006

Transaction ID: SA11A1.54175

Amount of Each Receipt this Period

250.00

Contribution

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

Mailing Address 664 Donald Dr S

City State Zip Code  
Bridgewater NJ 08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Liberty Helicopters

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2006

Transaction ID: SA11A1.54052

Amount of Each Receipt this Period

1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Richard A. Zimmer

Mailing Address 136 Locktown Flemington Rd

City State Zip Code  
Flemington NJ 08822

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gibson, Dunn, and Crutcher

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2006

Transaction ID: SA11A1.54038

Amount of Each Receipt this Period

1000.00

Contribution

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

2250.00

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

331880.73

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

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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

Full Name (Last, First, Middle Initial)  
**A. APL LIMITED (FKA AMERICAN PRESIDENT COMPANIES LTD PAC)**

Mailing Address **1667 K St NW  
Ste 400**

City State Zip Code  
**Washington DC 94607**

FEC ID number of contributing  
federal political committee. **C C00137828**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
**07 14 2006**

Transaction ID: SA11C.53967

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)  
**B. INTELSAT CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address **3400 International Drive NW**

City State Zip Code  
**Washington DC 20008**

FEC ID number of contributing  
federal political committee. **C C00412403**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
**07 07 2006**

Transaction ID: SA11C.53885

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)  
**C. INTELSAT CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address **3400 International Drive NW**

City State Zip Code  
**Washington DC 20008**

FEC ID number of contributing  
federal political committee. **C C00412403**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
**07 10 2006**

Transaction ID: SA11C.58131

Amount of Each Receipt this Period

-1000.00

Bank Error and Correction

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

1000.00

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

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

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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

**A.** Full Name (Last, First, Middle Initial)  
**KOLBE FOR CONGRESS**  
Mailing Address **PO Box 315568**

City State Zip Code  
**Tucson AZ 85751**

FEC ID number of contributing  
federal political committee. **C C00144857**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt

**07 / 31 / 2006**

**Transaction ID: SA11C.54012**

Amount of Each Receipt this Period

**1000.00**

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MAERSK INC. GOOD GOVERNMENT FUND**  
Mailing Address **1530 Wilson Blvd**  
**Ste 650**

City State Zip Code  
**Arlington VA 22209**

FEC ID number of contributing  
federal political committee. **C C00217471**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt

**07 / 31 / 2006**

**Transaction ID: SA11C.53964**

Amount of Each Receipt this Period

**1000.00**

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**SCIENCE APPLICATIONS INTERNATIONAL CORPORATION VOLUNTARY POLITICAL ACTION COMMITTEE**  
Mailing Address **10260 Campus Point Dr**  
**# F2**

City State Zip Code  
**San Diego CA 92121**

FEC ID number of contributing  
federal political committee. **C C00300418**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**2000.00**

Date of Receipt

**07 / 14 / 2006**

**Transaction ID: SA11C.53883**

Amount of Each Receipt this Period

**2000.00**

Contribution

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

**4000.00**

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

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

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)  
**A. THE BOND MARKET ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1399 New York Ave NW

City State Zip Code  
 Washington DC 20005

FEC ID number of contributing  
federal political committee. **C** C00158980

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11C.54042

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)  
**B. WALT DISNEY PRODUCTIONS EMPLOYEES PAC (DISNEY EMPLOYEES POLITICAL ACTION COMMITTEE)**

Mailing Address 1150 17th St NW  
 Ste 400

City State Zip Code  
 Washington DC 20036

FEC ID number of contributing  
federal political committee. **C** C00197749

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: SA11C.53852

Amount of Each Receipt this Period

5000.00

Contribution

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

6000.00

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

11000.00



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

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)  
St. Paul Travelers

Mailing Address PO Box 96359

City State Zip Code  
Chicago IL 60693-6359

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 0 6

Transaction ID: SA15.58142

Amount of Each Receipt this Period

737.00

Refund of Workmen's Comp  
Overpayment

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

737.00

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

737.00

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A.** Al's Upstairs Italian Restaurant

Mailing Address 300 Meeting Street

City West Columbia State SC Zip Code 29169

Purpose of Disbursement  
Meeting Expense - Catering

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58361

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

732.38

Full Name (Last, First, Middle Initial)

## **B.** American Express

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
See Attached Memos

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

86248.78

Full Name (Last, First, Middle Initial)

## **C.** CitiView Audio and Visual Ltd

Mailing Address 30 Rockefeller Plaza  
64th Floor

City New York State NY Zip Code 10112

Purpose of Disbursement  
Event Expense-Equipment Rental

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.0

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

3522.18

[MEMO ITEM]

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

86981.16

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 99 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |   |   |
|--|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Clarion Hotel   |   | <b>Transaction ID:</b> SB21B.58362.1<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div> |
| Mailing Address 1615 Gervais Street  |   | <b>Amount of Each Disbursement this Period</b><br><div>477.00</div>   |
| City Columbia State SC Zip Code 29201  |   |   |
| Purpose of Disbursement<br>Travel-Lodging  | <div>002</div> Category/<br>Type  |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                 | <b>[MEMO ITEM]</b>  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Coastal Helicopters   |   |   |
| Mailing Address 12653 Osborne Street   |   |   |
| City Pacoima State CA Zip Code 91331   | <b>Transaction ID:</b> SB21B.58362.2<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div> |   |
| Purpose of Disbursement<br>Travel-Airfare  |   | <b>Amount of Each Disbursement this Period</b><br><div>1550.00</div>  |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   |   |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼    |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Continental Airlines  |   | <b>Transaction ID:</b> SB21B.58362.3<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div> |
| Mailing Address 1500 Smith St<br>21st Floor  |   | <b>Amount of Each Disbursement this Period</b><br><div>623.60</div>   |
| City Houston State TX Zip Code 77002   |   |   |
| Purpose of Disbursement<br>Travel-Airfare  | <div>002</div> Category/<br>Type  |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                 | <b>[MEMO ITEM]</b>  |
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....  |   |   |
| <b>TOTAL</b> This Period (last page this line number only) .....   |   |   |
| <div>0.00</div>  |   |   |

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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Delta Airlines**

Mailing Address PO Box 20980

City Atlanta State GA Zip Code 30320

Purpose of Disbursement

Travel-Airfare

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.4

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

848.90

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Flowers by Philip**

Mailing Address 1141 Madison Avenue

City New York State NY Zip Code 10028

Purpose of Disbursement

Event Expense-Flowers

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.5

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

125.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Great Performances Catering**

Mailing Address 287 Spring Street

City New York State NY Zip Code 10013

Purpose of Disbursement

Event Expense-Catering

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.6

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

26992.81

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 101 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** J&R Computer World

Mailing Address 15 Park Row

City New York State NY Zip Code 10038

Purpose of Disbursement  
Office Equipment Purchase

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.7

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

299.97

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** Lowell Hotel

Mailing Address 28 E. 63rd Street

City New York State NY Zip Code 10021

Purpose of Disbursement  
Travel-Lodging

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.8

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

1702.98

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** MacNair Travel Agency

Mailing Address 1703 Duke Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Travel-Agency Fees

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.9

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

770.00

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Marriott Hotel Columbia**

Mailing Address 1200 Hampton Street

City Columbia State SC Zip Code 29201

Purpose of Disbursement

Travel-Lodging

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.10

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

544.32

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. National Governors Association**

Mailing Address 444 North Capitol Street  
#267

City Washington State DC Zip Code 20001

Purpose of Disbursement

Conference Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.11

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Northwest Airlines**

Mailing Address 5101 Northwest Drive

City St Paul State MN Zip Code 51111

Purpose of Disbursement

Travel-Airfare

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.12

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

1465.90

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 103 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Party Rental Ltd**

Mailing Address 200 North Street

City Teterboro State NJ Zip Code 07068

Purpose of Disbursement  
Event Expense-Equipment Rental

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.13

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

7651.05

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Postal Store**

Mailing Address 1735 N. Lynn Street

City Arlington State VA Zip Code 22209

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.14

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

1366.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Rasika**

Mailing Address 633 D St NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Event Expense-Catering

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.15

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

12566.00

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 104 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** Staples Corporate Chambersburg

Mailing Address 1025 Wayne Avenue

City Chambersburg State PA Zip Code 17201

Purpose of Disbursement  
Office Supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.16

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

1650.98

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** United Airlines

Mailing Address 9864 Main Street

City Fairfax State VA Zip Code 22031

Purpose of Disbursement  
Travel-Airfare

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.17

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

2035.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** US Airways

Mailing Address PO Box 2501

City Washington State DC Zip Code 27102

Purpose of Disbursement  
Travel-Airfare

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.18

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

717.11

[MEMO ITEM]

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

0.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 105 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. US Postal Service**

Mailing Address 1100 Wythe Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Postage

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.19

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

6073.67

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Washington National Airport Parking**

Mailing Address 1 Aviation Circle

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Parking

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.20

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Westin Hotel - Detroit**

Mailing Address 2501 Worldgateway Place

City Detroit State MI Zip Code 48242

Purpose of Disbursement  
Travel-Lodging

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.21

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

1113.31

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** Amazon.com

Mailing Address PO Box 81226

City State Zip Code  
Seattle WA 98108

Purpose of Disbursement  
Book Purchase

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.22

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

7333.55

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** America West Airlines

Mailing Address PO Box 20050

City State Zip Code  
Phoenix AZ 86036

Purpose of Disbursement  
Travel-Airfare Ticket Refund

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.23

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

-401.30

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** American Airlines

Mailing Address PO Box 619133

City State Zip Code  
Dallas TX 75261

Purpose of Disbursement  
Travel-Airfare

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.24

Date of Disbursement

07 / 16 / 2006

Amount of Each Disbursement this Period

919.60

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Amway Grand Plaza**

Mailing Address 187 Monroe Avenue NW

City Grand Rapids State MI Zip Code 49503

Purpose of Disbursement

Travel-Lodging

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.25

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

1041.25

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Barnes and Noble.com**

Mailing Address 122 Fifth Avenue

City New York State NY Zip Code 10011

Purpose of Disbursement

Book Purchase

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.26

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

136.24

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. BRODART SUPPLIES**

Mailing Address PO Box 300

City McElhatten State PA Zip Code 17748

Purpose of Disbursement

Office Supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.27

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

39.90

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Budget Conferencing Cambridge**

Mailing Address 60 State Street  
Suite 700

City Cambridge State MA Zip Code 02109

Purpose of Disbursement  
Teleconferencing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.28

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

119.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Bureau of Census**

Mailing Address 4700 Silver Hill Road

City Washington State DC Zip Code 20233

Purpose of Disbursement  
Office supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.29

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

145.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Carey International**

Mailing Address 520 North Capitol Street

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Travel-Car Service

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58362.30

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

1701.65

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 109 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** American Express

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
In Kind Contribution - Train Fare

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58612

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

45.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** American Express

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
In Kind Contribution - Travel-Lodging

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58613

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

42.88

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** AT&T

Mailing Address PO Box 9001309

City Louisville State KY Zip Code 40290-1309

Purpose of Disbursement  
Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58363

Date of Disbursement

07 / 06 / 2006

Amount of Each Disbursement this Period

501.26

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

501.26

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 110 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Auto Calls Now, LLC**

Mailing Address 4201 Wilson Blvd., Ste. 110-137

City Arlington State VA Zip Code 22203

Purpose of Disbursement  
Telephone Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58365

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

680.00

Full Name (Last, First, Middle Initial)

## **B. Avaya**

Mailing Address PO Box 93000

City Chicago State IL Zip Code 60673-3000

Purpose of Disbursement  
Equipment Lease

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58366

Date of Disbursement

07 / 27 / 2006

Amount of Each Disbursement this Period

192.27

Full Name (Last, First, Middle Initial)

## **C. BLM Strategies, LLC**

Mailing Address 54 B Ridgedale Avenue

City Morristown State NJ Zip Code 07960

Purpose of Disbursement  
Financial Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58367

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

10000.00

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

10872.27

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

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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Campaign Solutions**

Mailing Address 118 North Saint Asaph St.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Website Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58368

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

144.98

Full Name (Last, First, Middle Initial)

## **B. Capital Self Storage**

Mailing Address 301 N Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Storage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58369

Date of Disbursement

07 / 27 / 2006

Amount of Each Disbursement this Period

90.00

Full Name (Last, First, Middle Initial)

## **C. Capitol Flourish**

Mailing Address 12186 Hickory Knoll Place

City Fairfax State VA Zip Code 22033

Purpose of Disbursement  
Event Expense - Invitations

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58370

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

10109.00

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

10343.98

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

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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** Capitol Grille at Eagle Square

Mailing Address 1 Eagle Square

City Concord State NH Zip Code 03301

Purpose of Disbursement  
Meeting Expense - Catering

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.58372

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

4371.39

Full Name (Last, First, Middle Initial)

**B.** Caplin & Drysdale

Mailing Address One Thomas Circle, NW Ste. 1100

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Legal Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.58373

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

15332.95

Full Name (Last, First, Middle Initial)

**C.** Care First Blue Cross Blue Shield

Mailing Address PO Box 79749

City Baltimore State MD Zip Code 21279

Purpose of Disbursement  
Health Insurance

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.58374

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

2708.00

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

22412.34

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



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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** Caren Milman Calligraphy

Mailing Address 14317 Bauer Drive

City Rockville State MD Zip Code 20853

Purpose of Disbursement  
Printing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.58376

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

107.50

Full Name (Last, First, Middle Initial)

**B.** Central Parking System

Mailing Address PO Box 17505

City Baltimore State MD Zip Code 21297-1505

Purpose of Disbursement  
Parking

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.58377

Date of Disbursement

07 / 06 / 2006

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**C.** Central Parking System

Mailing Address PO Box 17505

City Baltimore State MD Zip Code 21297-1505

Purpose of Disbursement  
Parking

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.58378

Date of Disbursement

07 / 27 / 2006

Amount of Each Disbursement this Period

150.00

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

407.50

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

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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)  
Chantilly Printing & Graphics, Inc.

Mailing Address 13808 Redskin Drive

City Herndon State VA Zip Code 20171

Purpose of Disbursement  
Printing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58379

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

462.23

B. Full Name (Last, First, Middle Initial)  
Cingular

Mailing Address PO Box 17356

City Baltimore State MD Zip Code 21297-1356

Purpose of Disbursement  
Telephone - Cellular

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58380

Date of Disbursement

07 / 06 / 2006

Amount of Each Disbursement this Period

96.34

C. Full Name (Last, First, Middle Initial)  
Cingular

Mailing Address PO Box 17356

City Baltimore State MD Zip Code 21297-1356

Purpose of Disbursement  
Telephone - Cellular

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58381

Date of Disbursement

07 / 06 / 2006

Amount of Each Disbursement this Period

172.08

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

730.65

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 115 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|   |  |   |
|---|--|---|
| <b>A. Cingular</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address PO Box 17356<br>City Baltimore State MD Zip Code 21297-1356<br>Purpose of Disbursement Telephone - Cellular<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                               |  | <b>Transaction ID: SB21B.58382</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 7 / 2 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>162.97<br>001<br>Category/<br>Type   |
| <b>B. Colonial Parking</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address Dept. 241<br>City Baltimore State MD Zip Code 21279-0241<br>Purpose of Disbursement Parking<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                                       |  | <b>Transaction ID: SB21B.58384</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 7 / 2 7 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>155.00<br>001<br>Category/<br>Type   |
| <b>C. Communications Corporation Of America</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 13195 Freedom Way<br>City Boston State VA Zip Code 22713<br>Purpose of Disbursement Direct Mail - Production<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: SB21B.58385</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 7 / 1 2 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>15883.40<br>003<br>Category/<br>Type |

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

16201.37

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

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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |   |   |
|--|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Connell Donatelli, Inc.   |   | <b>Transaction ID:</b> SB21B.58386<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 0 6</div> </div> |
| Mailing Address PO Box 1877  |   | <b>Amount of Each Disbursement this Period</b><br><div>86141.23</div>   |
| City Alexandria State VA Zip Code 22313  |   |   |
| Purpose of Disbursement Website Expense  | <div>001</div> Category/<br>Type  |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Dawson McCarthy Nelson Media, LLC   |   | <b>Transaction ID:</b> SB21B.58387<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 5 / 2 0 0 6</div> </div> |
| Mailing Address 1023 31st Street, NW<br>Fourth Floor   |   | <b>Amount of Each Disbursement this Period</b><br><div>20000.00</div>   |
| City Washington State DC Zip Code 20007  |   |   |
| Purpose of Disbursement Political Consultant   | <div>001</div> Category/<br>Type  |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Deluxe Business Forms & Supplies  |   | <b>Transaction ID:</b> SB21B.58388<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 6</div> </div> |
| Mailing Address PO Box 742572  |   | <b>Amount of Each Disbursement this Period</b><br><div>122.85</div>   |
| City Cincinnati State OH Zip Code 45274-2570   |   |   |
| Purpose of Disbursement Office Supplies  | <div>001</div> Category/<br>Type  |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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

**106264.08**

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

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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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)  
STRAIGHT TALK AMERICA

|   |  |  |
|---|--|--|
| <b>A. David Denton</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address PO Box 203636<br>City New Haven State CT Zip Code 06520<br>Purpose of Disbursement Staff-Administrative<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼               |  | <b>Transaction ID: SB21B.58329</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 7 / 1 4 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>630.00<br>001<br>Category/<br>Type  |
| <b>B. David Denton</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address PO Box 203636<br>City New Haven State CT Zip Code 06520<br>Purpose of Disbursement Staff-Administrative<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼               |  | <b>Transaction ID: SB21B.58330</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 7 / 3 1 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>693.00<br>001<br>Category/<br>Type  |
| <b>C. Derby H. Watkins</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 3232 Wellington Road<br>City Alexandria State VA Zip Code 22302<br>Purpose of Disbursement Direct Mail Consultant<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: SB21B.58440</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 7 / 1 2 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>9500.00<br>003<br>Category/<br>Type |

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

**10823.00**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 118 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. DGM & Associates**

Mailing Address PO Box 509

City State Zip Code  
Novi MI 48376

Purpose of Disbursement  
Financial Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: SB21B.58390**

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. Earthlink, Inc.**

Mailing Address PO Box 6452

City State Zip Code  
Carol Stream IL 60197-6452

Purpose of Disbursement  
Email subscription

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: SB21B.58391**

Date of Disbursement

07 / 27 / 2006

Amount of Each Disbursement this Period

52.85

Full Name (Last, First, Middle Initial)

## **C. EDonation**

Mailing Address 118 N. St. Asaph Street

City State Zip Code  
Alexandria VA 22314

Purpose of Disbursement  
Merchant Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: SB21B.58392**

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

2188.48

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

3241.33

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 119 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** Carla Eudy

Mailing Address 4200 Massachusetts Ave. NW, Apt. 3

City Washington State DC Zip Code 20016

Purpose of Disbursement  
Travel Reimbursement

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.58320

Date of Disbursement

07 / 06 / 2006

Amount of Each Disbursement this Period

98.00

Full Name (Last, First, Middle Initial)

**B.** Carla Eudy

Mailing Address 4200 Massachusetts Ave. NW, Apt. 3

City Washington State DC Zip Code 20016

Purpose of Disbursement  
Parking

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.58319

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

28.00

Full Name (Last, First, Middle Initial)

**C.** Carla Eudy

Mailing Address 4200 Massachusetts Ave. NW, Apt. 3

City Washington State DC Zip Code 20016

Purpose of Disbursement  
Travel Reimbursement

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.58321

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

40.00

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

166.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 120 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Federal Express**

Mailing Address PO Box 371461

City Pittsburgh State PA Zip Code 15250-7461

Purpose of Disbursement  
Shipping

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58394

Date of Disbursement

07 / 06 / 2006

Amount of Each Disbursement this Period

1229.72

Full Name (Last, First, Middle Initial)

## **B. Federal Express**

Mailing Address PO Box 371461

City Pittsburgh State PA Zip Code 15250-7461

Purpose of Disbursement  
Shipping

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58395

Date of Disbursement

07 / 27 / 2006

Amount of Each Disbursement this Period

572.47

Full Name (Last, First, Middle Initial)

## **C. Nicole C. Fenwick**

Mailing Address 631 D Street, NW #435

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Salaries

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58350

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

2493.17

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

4295.36

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 121 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |   |   |
|--|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Nicole C. Fenwick   |   | <b>Transaction ID:</b> SB21B.58351<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div> |
| Mailing Address 631 D Street, NW #435  |   | <b>Amount of Each Disbursement this Period</b><br><div>2493.17</div>  |
| City Washington State DC Zip Code 20004  |   |   |
| Purpose of Disbursement Salaries<br>Candidate Name   | <div>001</div><br>Category/<br>Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Flight Options  |   | <b>Transaction ID:</b> SB21B.58396<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 2 / 2 0 0 6</div> </div> |
| Mailing Address 26180 Curtiss-Wright Parkway<br>Cuyahoga County Airport  |   | <b>Amount of Each Disbursement this Period</b><br><div>7667.75</div>  |
| City Cleveland State OH Zip Code 44143   |   |   |
| Purpose of Disbursement Travel-Charter Air<br>Candidate Name   | <div>002</div><br>Category/<br>Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Flight Options  |   | <b>Transaction ID:</b> SB21B.58507<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 2 / 2 0 0 6</div> </div> |
| Mailing Address 26180 Curtiss-Wright Parkway<br>Cuyahoga County Airport  |   | <b>Amount of Each Disbursement this Period</b><br><div>953.00</div>   |
| City Cleveland State OH Zip Code 44143   |   |   |
| Purpose of Disbursement In Kind Contribution Travel-Charter Air<br>Candidate Name  | <div>002</div><br>Category/<br>Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

[MEMO ITEM]

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

10160.92

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 122 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Flight Options**

Mailing Address 26180 Curtiss-Wright Parkway  
Cuyahoga County Airport

City Cleveland State OH Zip Code 44143

Purpose of Disbursement  
In Kind Contribution Travel-Charter Air

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.58508

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

924.67

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Flight Options**

Mailing Address 26180 Curtiss-Wright Parkway  
Cuyahoga County Airport

City Cleveland State OH Zip Code 44143

Purpose of Disbursement  
In Kind Contribution Travel-Charter Air

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.58509

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

953.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Flight Options**

Mailing Address 26180 Curtiss-Wright Parkway  
Cuyahoga County Airport

City Cleveland State OH Zip Code 44143

Purpose of Disbursement  
In Kind Contribution Travel-Charter Air

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.58510

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

1047.97

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 123 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Flight Options**

Mailing Address 26180 Curtiss-Wright Parkway  
Cuyahoga County Airport

City Cleveland State OH Zip Code 44143

Purpose of Disbursement  
In Kind Contribution Travel-Charter Air

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.58511

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

1444.72

[MEMO ITEM]

## **B. Kathryn Fox**

Full Name (Last, First, Middle Initial)

Mailing Address 100 Luna Park Drive, #339

City Alexandria State VA Zip Code 22305

Purpose of Disbursement  
Salaries

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.58340

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

1279.54

## **C. Kathryn Fox**

Full Name (Last, First, Middle Initial)

Mailing Address 100 Luna Park Drive, #339

City Alexandria State VA Zip Code 22305

Purpose of Disbursement  
Salaries

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.58341

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

1279.54

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

2559.08

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 124 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |  |   |  |
|--|--|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Glen R. Gardner   |  | <b>Transaction ID:</b> SB21B.58333<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 6</div> </div> |  |
| Mailing Address PO Box 295   |  | <b>Amount of Each Disbursement this Period</b><br><div>800.00</div>   |  |
| City Charleston<br>State SC<br>Zip Code 29402  | Purpose of Disbursement<br>Rent  | 001<br>Category/<br>Type  |  |
| Candidate Name   |  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State:           District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Ronald L. Glassman  |  | <b>Transaction ID:</b> SB21B.58354<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 6 / 2 0 0 6</div> </div> |  |
| Mailing Address 103 Arden Lane   |  | <b>Amount of Each Disbursement this Period</b><br><div>388.00</div>   |  |
| City Stamford<br>State CT<br>Zip Code 06905  | Purpose of Disbursement<br>Event Expense-Photography   | 003<br>Category/<br>Type  |  |
| Candidate Name   |  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State:           District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Craig A. Goldman  |  | <b>Transaction ID:</b> SB21B.58326<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div> |  |
| Mailing Address 5747 Sherier Place NW  |  | <b>Amount of Each Disbursement this Period</b><br><div>3856.64</div>  |  |
| City Washington<br>State DC<br>Zip Code 20016  | Purpose of Disbursement<br>Salaries  | 001<br>Category/<br>Type  |  |
| Candidate Name   |  |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State:           District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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

**5044.64**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 125 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |  |   |  |
|--|--|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>Craig A. Goldman</b>     |  | <b>Transaction ID:</b> SB21B.58328<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 7 / 2 0 0 6</div> </div> |  |
| Mailing Address 5747 Sherier Place NW  |  | <b>Amount of Each Disbursement this Period</b><br><div>721.20</div>   |  |
| City Washington State DC Zip Code 20016  | Purpose of Disbursement<br>Travel Reimbursement  | <div>002</div> Category/<br>Type  |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼               |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>Craig A. Goldman</b>     |  | <b>Transaction ID:</b> SB21B.58327<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div> |  |
| Mailing Address 5747 Sherier Place NW  |  | <b>Amount of Each Disbursement this Period</b><br><div>3856.64</div>  |  |
| City Washington State DC Zip Code 20016  | Purpose of Disbursement<br>Salaries  | <div>001</div> Category/<br>Type  |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼               |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>Matthew J. Gronewald</b> |  | <b>Transaction ID:</b> SB21B.58345<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div> |  |
| Mailing Address 5129 Hawthorne Drive, Apt. C                                     |  | <b>Amount of Each Disbursement this Period</b><br><div>1636.03</div>  |  |
| City West Des Moines State IA Zip Code 50265                                     | Purpose of Disbursement<br>Salaries  | <div>001</div> Category/<br>Type  |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼               |  |

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

**6213.87**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 126 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |   |   |
|--|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Matthew J. Gronewald  |   | <b>Transaction ID:</b> SB21B.58346<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div> |
| Mailing Address 5129 Hawthorne Drive, Apt. C   |   | <b>Amount of Each Disbursement this Period</b><br><div>1636.03</div>  |
| City West Des Moines State IA Zip Code 50265   |   |   |
| Purpose of Disbursement Salaries<br>Candidate Name   | <div>001</div><br>Category/<br>Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Holloway Consulting   |   | <b>Transaction ID:</b> SB21B.58397<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 5 / 2 0 0 6</div> </div> |
| Mailing Address PO Box 550004  |   | <b>Amount of Each Disbursement this Period</b><br><div>8000.00</div>  |
| City Atlanta State GA Zip Code 30355   |   |   |
| Purpose of Disbursement Financial Consultant<br>Candidate Name   | <div>001</div><br>Category/<br>Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Hoon Designs  |   | <b>Transaction ID:</b> SB21B.58442<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 2 / 2 0 0 6</div> </div> |
| Mailing Address 2800 Shirlington Road, Ste. 920  |   | <b>Amount of Each Disbursement this Period</b><br><div>1075.00</div>  |
| City Arlington State VA Zip Code 22206   |   |   |
| Purpose of Disbursement Direct Mail - Production<br>Candidate Name   | <div>003</div><br>Category/<br>Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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

10711.03

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 127 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|   |  |   |
|---|--|---|
| <b>A. IDMI</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 490 White Pond Drive<br>City Akron State OH Zip Code 44320<br>Purpose of Disbursement DataBase File Maintenance<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼         |  | <b>Transaction ID: SB21B.58399</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 7 / 1 2 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>12739.91<br>001<br>Category/<br>Type |
| <b>B. Michael E. Jaconi</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1615 33rd Street, NW<br>City Washington State DC Zip Code 20007<br>Purpose of Disbursement Parking<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼         |  | <b>Transaction ID: SB21B.58347</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 7 / 1 2 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>138.00<br>001<br>Category/<br>Type   |
| <b>C. Michael E. Jaconi</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1615 33rd Street, NW<br>City Washington State DC Zip Code 20007<br>Purpose of Disbursement Office Supplies<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: SB21B.58402</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 7 / 1 2 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>42.22<br>001<br>Category/<br>Type    |

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

12920.13

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 128 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |   |   |
|--|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Michael E. Jaconi   |   | <b>Transaction ID:</b> SB21B.58348<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div> |
| Mailing Address 1615 33rd Street, NW   |   | <b>Amount of Each Disbursement this Period</b><br><div>1143.37</div>  |
| City Washington State DC Zip Code 20007  |   |   |
| Purpose of Disbursement Salaries<br>Candidate Name   | <div>001</div><br>Category/<br>Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Michael E. Jaconi   |   | <b>Transaction ID:</b> SB21B.58349<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div> |
| Mailing Address 1615 33rd Street, NW   |   | <b>Amount of Each Disbursement this Period</b><br><div>1143.37</div>  |
| City Washington State DC Zip Code 20007  |   |   |
| Purpose of Disbursement Salaries<br>Candidate Name   | <div>001</div><br>Category/<br>Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Amber L. Johnson  |   | <b>Transaction ID:</b> SB21B.58315<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div> |
| Mailing Address 1040 Hyde Park Drive   |   | <b>Amount of Each Disbursement this Period</b><br><div>2358.60</div>  |
| City Annapolis State MD Zip Code 21403   |   |   |
| Purpose of Disbursement Salaries<br>Candidate Name   | <div>001</div><br>Category/<br>Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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

**4645.34**

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 129 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |   |   |
|--|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Amber L. Johnson  |   | <b>Transaction ID:</b> SB21B.58316<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div> |
| Mailing Address 1040 Hyde Park Drive   |   | <b>Amount of Each Disbursement this Period</b><br><div>2358.60</div>  |
| City Annapolis State MD Zip Code 21403   |   |   |
| Purpose of Disbursement Salaries<br>Candidate Name   | <div>001</div><br>Category/<br>Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Shelby Kelleher   |   | <b>Transaction ID:</b> SB21B.58357<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div> |
| Mailing Address 12 Shaker Bay Road   |   | <b>Amount of Each Disbursement this Period</b><br><div>630.00</div>   |
| City Latham State NY Zip Code 12110  |   |   |
| Purpose of Disbursement Staff-Administrative<br>Candidate Name   | <div>001</div><br>Category/<br>Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Shelby Kelleher   |   | <b>Transaction ID:</b> SB21B.58358<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div> |
| Mailing Address 12 Shaker Bay Road   |   | <b>Amount of Each Disbursement this Period</b><br><div>693.00</div>   |
| City Latham State NY Zip Code 12110  |   |   |
| Purpose of Disbursement Staff-Administrative<br>Candidate Name   | <div>001</div><br>Category/<br>Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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

**3681.60**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 130 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |   |   |
|--|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Karen L. Kessenich  |   | <b>Transaction ID:</b> SB21B.58339<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 5 / 2 0 0 6</div> </div> |
| Mailing Address 12186 Hickory Knoll Place  |   | <b>Amount of Each Disbursement this Period</b><br><div>3000.00</div>  |
| City Fairfax State VA Zip Code 22033   |   |   |
| Purpose of Disbursement<br>Financial Consultant  | <div>001</div> Category/<br>Type  |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Chuck Larson  |   | <b>Transaction ID:</b> SB21B.58322<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 2 / 2 0 0 6</div> </div> |
| Mailing Address 2214 Evergreen Street, NE  |   | <b>Amount of Each Disbursement this Period</b><br><div>7500.00</div>  |
| City Cedar Rapids State IA Zip Code 52402  |   |   |
| Purpose of Disbursement<br>Political Consultant  | <div>001</div> Category/<br>Type  |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Chuck Larson  |   | <b>Transaction ID:</b> SB21B.58323<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 2 / 2 0 0 6</div> </div> |
| Mailing Address 2214 Evergreen Street, NE  |   | <b>Amount of Each Disbursement this Period</b><br><div>285.45</div>   |
| City Cedar Rapids State IA Zip Code 52402  |   |   |
| Purpose of Disbursement<br>Travel Reimbursement  | <div>002</div> Category/<br>Type  |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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

**10785.45**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 131 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |   |   |
|--|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. Howard Lester   |   | <b>Transaction ID:</b> SB21B.58147<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 6</div> </div> |
| Mailing Address 3250 Van Ness Ave  |   | <b>Amount of Each Disbursement this Period</b><br><div>3850.73</div>  |
| City San Francisco State CA Zip Code 94109   |   |   |
| Purpose of Disbursement<br>In-kind - Contribution  | <div>001</div> Category/<br>Type  |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>LexisNexis  |   | <b>Transaction ID:</b> SB21B.58400<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 2 / 2 0 0 6</div> </div> |
| Mailing Address PO Box 7247-7090   |   | <b>Amount of Each Disbursement this Period</b><br><div>600.00</div>   |
| City Philadelphia State PA Zip Code 19170-7090   |   |   |
| Purpose of Disbursement<br>Subscription  | <div>001</div> Category/<br>Type  |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Shawn McCoy   |   | <b>Transaction ID:</b> SB21B.58355<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div> |
| Mailing Address 12370 Columbiana-Canfield Road   |   | <b>Amount of Each Disbursement this Period</b><br><div>630.00</div>   |
| City Columbiana State OH Zip Code 44408  |   |   |
| Purpose of Disbursement<br>Staff-Administrative  | <div>001</div> Category/<br>Type  |   |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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

5080.73

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

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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)  
Shawn McCoy

Mailing Address 12370 Columbiana-Canfield Road

City State Zip Code  
Columbiana OH 44408

Purpose of Disbursement  
Staff-Administrative

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58356

Date of Disbursement

07 / 21 / 2006

Amount of Each Disbursement this Period

315.00

B. Full Name (Last, First, Middle Initial)  
Becca McMullen

Mailing Address 815 A Brazos, #254

City State Zip Code  
Austin TX 78701

Purpose of Disbursement  
Financial Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58317

Date of Disbursement

07 / 06 / 2006

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)  
Courtney Nahigian

Mailing Address 331 Cameron Station Blvd.

City State Zip Code  
Alexandria VA 22304

Purpose of Disbursement  
Salaries

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58324

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

3188.84

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

5503.84

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 133 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |   |   |
|--|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Courtney Nahigian   |   | <b>Transaction ID:</b> SB21B.58325<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div> |
| Mailing Address 331 Cameron Station Blvd.  |   | <b>Amount of Each Disbursement this Period</b><br><div>3188.84</div>  |
| City Alexandria State VA Zip Code 22304  |   |   |
| Purpose of Disbursement Salaries<br>Candidate Name   | <div>001</div><br>Category/<br>Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>National City Bank  |   | <b>Transaction ID:</b> SB21B.58403<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 0 6</div> </div> |
| Mailing Address PO Box 5756  |   | <b>Amount of Each Disbursement this Period</b><br><div>841.17</div>   |
| City Akron State OH Zip Code 44101   |   |   |
| Purpose of Disbursement Bank Charges<br>Candidate Name   | <div>001</div><br>Category/<br>Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Paychex   |   | <b>Transaction ID:</b> SB21B.58404<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 0 / 2 0 0 6</div> </div> |
| Mailing Address 7450 Tilghman St., Ste. 107  |   | <b>Amount of Each Disbursement this Period</b><br><div>184.05</div>   |
| City Allentown State PA Zip Code 18106-9037  |   |   |
| Purpose of Disbursement Payroll Service Charge<br>Candidate Name   | <div>001</div><br>Category/<br>Type   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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

**4214.06**

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

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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** Paychex

Mailing Address 7450 Tilghman St., Ste. 107

City Allentown State PA Zip Code 18106-9037

Purpose of Disbursement

Payroll Taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58405

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

8924.74

Full Name (Last, First, Middle Initial)

**B.** Paychex

Mailing Address 7450 Tilghman St., Ste. 107

City Allentown State PA Zip Code 18106-9037

Purpose of Disbursement

Payroll Taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58406

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

8909.77

Full Name (Last, First, Middle Initial)

**C.** Pinnacle List Company

Mailing Address 2800 Shirlington Road, Ste. 970

City Arlington State VA Zip Code 22206

Purpose of Disbursement

Direct Mail - List Expense

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58444

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

43367.38

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

61201.89

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 135 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |   |   |                                     |
|--|---|---|-------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Ms. Wendy Poole   |   | <b>Transaction ID:</b> SB21B.58359<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 5 / 2 0 0 6</div> </div> |                                     |
| Mailing Address 40428 Spectacular Bid Pl   |   | <b>Amount of Each Disbursement this Period</b><br><div>7500.00</div>  |                                     |
| City Leesburg State VA Zip Code 20176  | Purpose of Disbursement<br>Administrative Consultant  | Candidate Name  | <div>001</div><br>Category/<br>Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                                     |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Margaret S. Scholz  |   | <b>Transaction ID:</b> SB21B.58344<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 5 / 2 0 0 6</div> </div> |                                     |
| Mailing Address 1523 Bering Drive  |   | <b>Amount of Each Disbursement this Period</b><br><div>40.00</div>  |                                     |
| City Houston State TX Zip Code 77057   | Purpose of Disbursement<br>Travel Reimbursement   | Candidate Name  | <div>002</div><br>Category/<br>Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                                     |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Margaret S. Scholz  |   | <b>Transaction ID:</b> SB21B.58342<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div> |                                     |
| Mailing Address 1523 Bering Drive  |   | <b>Amount of Each Disbursement this Period</b><br><div>878.86</div>   |                                     |
| City Houston State TX Zip Code 77057   | Purpose of Disbursement<br>Salaries   | Candidate Name  | <div>001</div><br>Category/<br>Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                                     |

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

**8418.86**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 136 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** Margaret S. Scholz

Mailing Address 1523 Bering Drive

City Houston State TX Zip Code 77057

Purpose of Disbursement  
Salaries

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.58343

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

878.86

Full Name (Last, First, Middle Initial)

**B.** Southern Insights, LLC

Mailing Address 3072 Sunview Drive

City Birmingham State AL Zip Code 35243

Purpose of Disbursement  
Political Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.58408

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

**C.** Southwest Publishing

Mailing Address 2600 NW Topeka Blvd.

City Topeka State KS Zip Code 66617

Purpose of Disbursement  
Direct Mail-Production

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.58446

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

67319.29

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

74198.15

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 137 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** Southwest Publishing and Mailing Corp.

Mailing Address 2600 NW Topeka Blvd.

City Topeka State KS Zip Code 66617

Purpose of Disbursement  
Direct Mail - Postage

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58410

Date of Disbursement

07 / 01 / 2006

Amount of Each Disbursement this Period

12031.46

Full Name (Last, First, Middle Initial)

**B.** Southwest Publishing and Mailing Corp.

Mailing Address 2600 NW Topeka Blvd.

City Topeka State KS Zip Code 66617

Purpose of Disbursement  
Direct Mail - Postage

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58411

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

60114.55

Full Name (Last, First, Middle Initial)

**C.** Southwest Publishing and Mailing Corp.

Mailing Address 2600 NW Topeka Blvd.

City Topeka State KS Zip Code 66617

Purpose of Disbursement  
Direct Mail - Postage

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58412

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

17615.63

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

89761.64

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 138 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** Southwest Publishing and Mailing Corp.

Mailing Address 2600 NW Topeka Blvd.

City Topeka State KS Zip Code 66617

Purpose of Disbursement

Direct Mail - Postage

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58413

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

29004.03

Full Name (Last, First, Middle Initial)

**B.** Sprint PCS

Mailing Address PO Box 1769

City Newark State NJ Zip Code 07101-1769

Purpose of Disbursement

Telephone - Cellular

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58415

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

71.86

Full Name (Last, First, Middle Initial)

**C.** Strategic National Consulting, LLC

Mailing Address 531 North Capitol Ave.

City Lansing State MI Zip Code 48933

Purpose of Disbursement

Political Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58416

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

5000.00

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

34075.89

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 139 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. T-Mobile**

Mailing Address PO Box 742596

City Cincinnati State OH Zip Code 45274-2596

Purpose of Disbursement  
Telephone - Cellular

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58427

Date of Disbursement

07 / 06 / 2006

Amount of Each Disbursement this Period

211.98

Full Name (Last, First, Middle Initial)

## **B. The Computer Workshop**

Mailing Address 3223 Brookings Court

City Fairfax State VA Zip Code 22031

Purpose of Disbursement  
Computer Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58417

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

997.50

Full Name (Last, First, Middle Initial)

## **C. The Dennehy Group**

Mailing Address 11 Depot Street, Ste. 2

City Concord State NH Zip Code 03301

Purpose of Disbursement  
Political Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58418

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

10000.00

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

11209.48

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 140 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. The Eudy Company**

Mailing Address 211 N. Union St., Ste. 200

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Computer Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58419

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

438.02

Full Name (Last, First, Middle Initial)

## **B. The Eudy Company**

Mailing Address 211 N. Union St., Ste. 200

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Financial Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58420

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

45000.00

Full Name (Last, First, Middle Initial)

## **C. The Eudy Company**

Mailing Address 211 N. Union St., Ste. 200

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Office Supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58421

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

210.50

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

45648.52

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

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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. The Eudy Company**

Mailing Address 211 N. Union St., Ste. 200

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Telephone-Long Distance

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58422

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

107.43

Full Name (Last, First, Middle Initial)

## **B. The Hallisey Group**

Mailing Address 38 East 85th Street, #5

City New York State NY Zip Code 10028

Purpose of Disbursement  
Financial Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58423

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. The Hallisey Group**

Mailing Address 38 East 85th Street, #5

City New York State NY Zip Code 10028

Purpose of Disbursement  
Financial Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58424

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

5000.00

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

10107.43

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

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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. The M.K. Group**

Mailing Address 5272 River Road, Ste. 350

City Bethesda State MD Zip Code 20816

Purpose of Disbursement  
Financial Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58426

Date of Disbursement

07 / 06 / 2006

Amount of Each Disbursement this Period

9810.00

Full Name (Last, First, Middle Initial)

## **B. Union Street, LP**

Mailing Address c/o PNGS Management Co., Inc.  
1350 Connecticut Ave., NW Ste. 120

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Parking

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58428

Date of Disbursement

07 / 01 / 2006

Amount of Each Disbursement this Period

520.00

Full Name (Last, First, Middle Initial)

## **C. Union Street, LP**

Mailing Address c/o PNGS Management Co., Inc.  
1350 Connecticut Ave., NW Ste. 120

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Rent

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58429

Date of Disbursement

07 / 01 / 2006

Amount of Each Disbursement this Period

10452.01

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

20782.01

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 143 / 190

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. US Postmaster**

Mailing Address 1100 Wythe Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Business Reply Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58430

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. Vandenberg and Associates**

Mailing Address 3927 Elm Avenue

City Long Beach State CA Zip Code 90807

Purpose of Disbursement  
Financial Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58431

Date of Disbursement

07 / 13 / 2006

Amount of Each Disbursement this Period

25144.90

Full Name (Last, First, Middle Initial)

## **C. Verizon**

Mailing Address PO Box 17577

City Baltimore State MD Zip Code 21297-0513

Purpose of Disbursement  
Telephone-Long Distance

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.58432

Date of Disbursement

07 / 27 / 2006

Amount of Each Disbursement this Period

146.47

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

30291.37

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

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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Verizon Wireless**

Mailing Address PO Box 9622

City Mission Hills State CA Zip Code 91346-9622

Purpose of Disbursement  
Telephone - Cellular

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.58434

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

144.98

Full Name (Last, First, Middle Initial)

## **B. John Weaver**

Mailing Address 337 West 12th Street

City New York State NY Zip Code 10014

Purpose of Disbursement  
Political Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.58335

Date of Disbursement

07 / 01 / 2006

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

## **C. John Weaver**

Mailing Address 337 West 12th Street

City New York State NY Zip Code 10014

Purpose of Disbursement  
Travel Reimbursement

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.58336

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

3608.20

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

18753.18

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



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

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

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|   |  |   |  |
|---|--|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>John Weaver  |  | <b>Transaction ID:</b> SB21B.58338<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 7 / 2 0 0 6</div> </div> |  |
| Mailing Address 337 West 12th Street  |  | <b>Amount of Each Disbursement this Period</b><br><div>2432.20</div>  |  |
| City New York      State NY      Zip Code 10014   | Purpose of Disbursement<br>Travel Reimbursement  |   |  |
| Candidate Name  |  | <div>002</div><br>Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State:              District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>John Weaver  |  | <b>Transaction ID:</b> SB21B.58337<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 5 / 2 0 0 6</div> </div> |  |
| Mailing Address 337 West 12th Street  |  | <b>Amount of Each Disbursement this Period</b><br><div>1270.65</div>  |  |
| City New York      State NY      Zip Code 10014   | Purpose of Disbursement<br>Travel Reimbursement  |   |  |
| Candidate Name  |  | <div>002</div><br>Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State:              District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

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

**3702.85**

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

**762912.26**

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 146 / 190

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
In Kind Contribution-Travel (See Memo)

Candidate Name  
STEELE FOR MARYLAND INC

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 03

Transaction ID: SB23.58624

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

45.00

Full Name (Last, First, Middle Initial)

## **B. Amtrak**

Mailing Address 50 Massachusetts Ave NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
In Kind Contribution Train Fare

Candidate Name  
STEELE FOR MARYLAND INC

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 03

Transaction ID: SB23.58624.0

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

45.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. California Republican Party**

Mailing Address 1903 West Magnolia

City Burbank State CA Zip Code 91506

Purpose of Disbursement  
Cand/Cmte Contributions-Fed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.58196

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

4300.00

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

4345.00

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

# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Castle Campaign Fund**

Mailing Address PO Box 133

City Wilmington State DE Zip Code 19899

Purpose of Disbursement  
Cand/Cmte Contributions-Fed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.58162

Date of Disbursement

07 / 13 / 2006

Amount of Each Disbursement this Period

3900.00

Full Name (Last, First, Middle Initial)

## **B. Flight Options**

Mailing Address 26180 Curtiss-Wright Parkway  
Cuyahoga County Airport

City Cleveland State OH Zip Code 44143

Purpose of Disbursement  
In Kind Contribution-Travel-Airfare

Candidate Name  
LAMBERTI FOR CONGRESS

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 3

Transaction ID: SB23.58614

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

924.67

Full Name (Last, First, Middle Initial)

## **C. Flight Options**

Mailing Address 26180 Curtiss-Wright Parkway  
Cuyahoga County Airport

City Cleveland State OH Zip Code 44143

Purpose of Disbursement  
In Kind Contribution Travel-Airfare

Candidate Name  
SWEENEY FOR CONGRESS INC

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2006 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 20

Transaction ID: SB23.58615

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

953.00

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

5777.67

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 148 / 190

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Flight Options**

Mailing Address 26180 Curtiss-Wright Parkway  
Cuyahoga County Airport

City Cleveland State OH Zip Code 44143

Purpose of Disbursement  
In Kind Contribution Travel Airfare

Candidate Name  
Castle Campaign Fund

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.58621

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1047.97

## **B. Jeb Bradley for Congress**

Mailing Address 27 Lowell Street, Ste. 205

City Manchester State NH Zip Code 03101

Purpose of Disbursement  
Cand/Cmte Contributions-Fed

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.58172

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

## **C. Kansas Republican State Committee**

Mailing Address 2025 Southwest Gage

City Topeka State KS Zip Code 66604

Purpose of Disbursement  
Cand/Cmte Contributions-Fed

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.58224

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

8547.97

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 149 / 190

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A. Massachusetts Republican State Committee**

Mailing Address 85 Merrimac Street

City Boston State MA Zip Code 02114

Purpose of Disbursement  
Cand/Cmte Contributions-Fed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.58236

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Montana Republican State Central Cmte.**

Mailing Address 921 Euclid Avenue

City Helena State MT Zip Code 59601

Purpose of Disbursement  
Cand/Cmte Contributions-Fed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.58250

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. New York Republican State Committee**

Mailing Address 315 State Street

City Albany State NY Zip Code 12210

Purpose of Disbursement  
Cand/Cmte Contributions-Fed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.58254

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** Republican Party of Texas

Mailing Address 900 Congress Avenue

City Austin State TX Zip Code 78701

Purpose of Disbursement  
Cand/Cmte Contributions-Fed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.58276

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B.** Republican Party of Virginia

Mailing Address 115 East Grace Street

City Richmond State VA Zip Code 23219

Purpose of Disbursement  
Cand/Cmte Contributions-Fed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.58278

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C.** Republican State Central Cmte. of CO

Mailing Address 1777 S. Harrison Street

City Denver State CO Zip Code 80210

Purpose of Disbursement  
Cand/Cmte Contributions-Fed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.58280

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|   |  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|---|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Sweeney for Congress   |  | <b>Transaction ID:</b> SB23.58180<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 |  | 1 | 3 |  | 2 | 0 | 0 | 6 |
| M   | M  | /   | D       | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0   | 7  |   | 1       | 3 |   | 2 | 0 | 0 | 6 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address PO Box 1465   |  | <b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>1400.00</td> </tr> </table>   | 1400.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 1400.00   |  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| City Clifton Park State NY Zip Code 12065   |  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Cand/Cmte Contributions-Fed  | <table border="1"> <tr> <td>011</td> </tr> </table> Category/<br>Type  |   | 011     |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 011   |  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name  |  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: NY District: 20 | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Wyoming Republican State Committee   |  | <b>Transaction ID:</b> SB23.58314<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 |  | 1 | 7 |  | 2 | 0 | 0 | 6 |
| M   | M  | /   | D       | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0   | 7  |   | 1       | 7 |   | 2 | 0 | 0 | 6 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 400 East First Street   |  | <b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>5000.00</td> </tr> </table>   | 5000.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 5000.00   |  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| City Casper State WY Zip Code 82601   |  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Cand/Cmte Contributions-Fed  | <table border="1"> <tr> <td>011</td> </tr> </table> Category/<br>Type  |   | 011     |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 011   |  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name  |  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District:                  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                 |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

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

6400.00

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

55070.64

# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22             | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input checked="" type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |  |   |  |
|--|--|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. George S. Kaufman |  | <b>Transaction ID:</b> SB28A.58331<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 9 / 2 0 0 6</div> </div> |  |
| Mailing Address 450 7th Ave<br>PH  |  | <b>Amount of Each Disbursement this Period</b><br><div>1000.00</div>  |  |
| City New York State NY Zip Code 10123                                      | Purpose of Disbursement<br>Contrib Refund - Indiv  | <div>010</div><br>Category/<br>Type   |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: |   |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. James F. McGovern |  | <b>Transaction ID:</b> SB28A.58334<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 9 / 2 0 0 6</div> </div> |  |
| Mailing Address 9890 Wilshire Blvd   |  | <b>Amount of Each Disbursement this Period</b><br><div>5000.00</div>  |  |
| City Beverly Hills State CA Zip Code 90210                                 | Purpose of Disbursement<br>Contrib Refund - Indiv  | <div></div><br>Category/<br>Type  |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: |   |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Robert A. Young   |  | <b>Transaction ID:</b> SB28A.58352<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 9 / 2 0 0 6</div> </div> |  |
| Mailing Address 555 4th St   |  | <b>Amount of Each Disbursement this Period</b><br><div>2000.00</div>  |  |
| City Hermosa Beach State CA Zip Code 90254                                 | Purpose of Disbursement<br>Contrib Refund - Indiv  | <div></div><br>Category/<br>Type  |  |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: |   |  |
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....                |  | <div>8000.00</div>  |  |
| <b>TOTAL</b> This Period (last page this line number only) .....           |  | <div>8000.00</div>  |  |



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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

Full Name (Last, First, Middle Initial)  
**A. Alabamians for Luther Strange**

Mailing Address **PO Box 3196**

City **Montgomery** State **AL** Zip Code **36109**

Purpose of Disbursement  
 Cand/Cmte Contributions-NonFed

Candidate Name

**011**  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID: SB29.58154**

Date of Disbursement

**07** / **19** / **2006**

Amount of Each Disbursement this Period

**5000.00**

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

Mailing Address **PO Box 1270**

City **Newark** State **NJ** Zip Code **07101-1270**

Purpose of Disbursement  
 In Kind Contribution Lodging (See Memo)

Candidate Name

**011**  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID: SB29.58626**

Date of Disbursement

**07** / **14** / **2006**

Amount of Each Disbursement this Period

**42.88**

Full Name (Last, First, Middle Initial)  
**C. Terri Lynn Land for Secretary of State**

Mailing Address **1701 Porter SW  
 Ste 4**

City **Grand Rapids** State **MI** Zip Code **49509**

Purpose of Disbursement  
 In Kind Contribution Non Federal Lodging

Candidate Name

**011**  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID: SB29.58626.0**

Date of Disbursement

**07** / **14** / **2006**

Amount of Each Disbursement this Period

**42.88**

**[MEMO ITEM]**

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

**5042.88**

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

# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Barbour County, WV Republican Party**

Mailing Address Rt. 2, Box 62

City State Zip Code  
Philippi WV 26416

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58182

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Berkeley County Republican Party**

Mailing Address 33 Lois Lane

City State Zip Code  
Martinsburg WV 25401

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58184

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. Blaine Galliher Campaign**

Mailing Address PO Box 4353

City State Zip Code  
Gadsden AL 35904

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB29.58156

Date of Disbursement

07 / 19 / 2006

Amount of Each Disbursement this Period

1000.00

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

2500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 155 / 190

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |   |  |
|--|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Boone County Republican Party   |   | <b>Transaction ID:</b> SB29.58186<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 6</div> </div> |
| Mailing Address 114 Center Street  |   | <b>Amount of Each Disbursement this Period</b><br><div>500.00</div>  |
| City Madison State WV Zip Code 25130   |   |  |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <div>011</div><br>Category/<br>Type   |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Braxton County Republican Party   |   | <b>Transaction ID:</b> SB29.58188<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 6</div> </div> |
| Mailing Address 502 Elk Street   |   | <b>Amount of Each Disbursement this Period</b><br><div>500.00</div>  |
| City Gassaway State WV Zip Code 26624  |   |  |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <div>011</div><br>Category/<br>Type   |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Brooke County Republican Party  |   | <b>Transaction ID:</b> SB29.58190<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 6</div> </div> |
| Mailing Address 32 2nd Street, PO Box 1  |   | <b>Amount of Each Disbursement this Period</b><br><div>500.00</div>  |
| City Beech Bottom State WV Zip Code 26030  |   |  |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <div>011</div><br>Category/<br>Type   |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

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

1500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 156 / 190

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |  |  |
|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Cabell County Republican Party  |  | <b>Transaction ID:</b> SB29.58192<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 6</div> </div> |
| Mailing Address 3004 Brier Wood Road   |  | <b>Amount of Each Disbursement this Period</b><br><div>1000.00</div>   |
| City Culloden State WV Zip Code 25510  |  |  |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <div>011</div><br>Category/<br>Type  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                    |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Calhoun County, WV Republican Party   |  | <b>Transaction ID:</b> SB29.58194<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 6</div> </div> |
| Mailing Address PO Box 6243  |  | <b>Amount of Each Disbursement this Period</b><br><div>500.00</div>  |
| City Grantsville State WV Zip Code 26147   |  |  |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <div>011</div><br>Category/<br>Type  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                    |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Campaign to Elect Greg Canfield   |  | <b>Transaction ID:</b> SB29.58158<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 9 / 2 0 0 6</div> </div> |
| Mailing Address 804 Park View Circle   |  | <b>Amount of Each Disbursement this Period</b><br><div>1000.00</div>   |
| City Vestavia Hills State AL Zip Code 35242  |  |  |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <div>011</div><br>Category/<br>Type  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

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

2500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 157 / 190

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** Casey Cagle for Lt. Governor

Mailing Address PO Box 489

City Oakwood State GA Zip Code 30566

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.58160

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B.** Clay County, WV Republican Party

Mailing Address 11883 Widen Ridge Road

City Clay State WV Zip Code 25043

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.58198

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Committee to Elect Bill Malinowski

Mailing Address PO Box 535

City Chapin State SC Zip Code 29036

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.58164

Date of Disbursement

07 / 11 / 2006

Amount of Each Disbursement this Period

500.00

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

6000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 158 / 190

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Doddridge County Republican Party**

Mailing Address Rt. 1, Box 417

City Greenwood State WV Zip Code 26415

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58200

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Fayette County, WV Republican Party**

Mailing Address Rt. 1, Box 153A

City Fayetteville State WV Zip Code 25840

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58202

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Flight Options**

Mailing Address 26180 Curtiss-Wright Parkway  
Cuyahoga County Airport

City Cleveland State OH Zip Code 44143

Purpose of Disbursement  
In Kind Contribution Airfare (See Memo)

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58619

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

953.00

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

1953.00

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

# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Committee to Re-Elect Joseph Bruno**

Mailing Address PO Box 984

City Troy State NY Zip Code 12181

Purpose of Disbursement  
In Kind Contribution Non Federal Airfare

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.58619.0

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

953.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Flight Options**

Mailing Address 26180 Curtiss-Wright Parkway  
Cuyahoga County Airport

City Cleveland State OH Zip Code 44143

Purpose of Disbursement  
In Kind Contribution Airfare(See Memo)

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.58622

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

1444.72

Full Name (Last, First, Middle Initial)

## **C. NH Federation of Republican Women**

Mailing Address 84 Stratham Heights Road

City Stratham State NH Zip Code 03885

Purpose of Disbursement  
In Kind Contribution Airfare Non Federal

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.58622.0

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

1444.72

[MEMO ITEM]

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

1444.72

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 160 / 190

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** Friends of Bradley R. Byrne

Mailing Address 22489 Seacliff Drive

City Fairhope State AL Zip Code 36532

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.58166

Date of Disbursement

07 / 19 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Gilmer County Republican Party

Mailing Address Rt. 1, Box 31B

City Glenville State WV Zip Code 26351

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.58204

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Glover Campaign

Mailing Address PO Box 2175

City Semmes State AL Zip Code 36575

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.58168

Date of Disbursement

07 / 19 / 2006

Amount of Each Disbursement this Period

1000.00

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

2500.00

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



# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Grant County Republican Party**

Mailing Address 122 South Main Street

City Petersburg State WV Zip Code 26847

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.58206

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Greenbrier County Republican Party**

Mailing Address PO Box 777

City White Sulphur Spri State WV Zip Code 24986

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.58208

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Hampshire County Republican Party**

Mailing Address RR 1, Box 89

City Augusta State WV Zip Code 26704

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.58210

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

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

1500.00

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

# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** Hancock County Republican Party

Mailing Address 1045 Hudson Hill Road

City Weirton State WV Zip Code 26062

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58212

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Hardy County Republican Party

Mailing Address HC 63, Box 342-B

City Wardensville State WV Zip Code 26851

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58214

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Harrison County Republican Party

Mailing Address 636 Rivendell Drive

City Bridgeport State WV Zip Code 26330

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58216

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

1000.00

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

2000.00

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

# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|--|--|---|----------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Hart for State House  |  | <b>Transaction ID:</b> SB29.58438<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> | M        | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 |  | 3 | 1 |  | 2 | 0 | 0 | 6 |
| M  | M  | /   | D        | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 7  |   | 3        | 1 |   | 2 | 0 | 0 | 6 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 360 Betsy Road   |  | <b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>-1000.00</td> </tr> </table>  | -1000.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| -1000.00   |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| City Charleston State SC Zip Code 29407  |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Voided Check-Candidate Contrib Non Fed  | <input type="text" value="011"/><br>Category/<br>Type  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                    |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Hembree for Solicitor   |  | <b>Transaction ID:</b> SB29.58439<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> | M        | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 |  | 3 | 1 |  | 2 | 0 | 0 | 6 |
| M  | M  | /   | D        | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 7  |   | 3        | 1 |   | 2 | 0 | 0 | 6 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address PO Box 944   |  | <b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>-500.00</td> </tr> </table>   | -500.00  |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| -500.00  |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| City North Myrtle Beach State SC Zip Code 29597  |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Voided Check-Cand Contrib-NonFed  | <input type="text" value="011"/><br>Category/<br>Type  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                    |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Hooper for PSC  |  | <b>Transaction ID:</b> SB29.58170<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> | M        | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 |  | 1 | 9 |  | 2 | 0 | 0 | 6 |
| M  | M  | /   | D        | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 7  |   | 1        | 9 |   | 2 | 0 | 0 | 6 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address PO Box 242626  |  | <b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>1000.00</td> </tr> </table>   | 1000.00  |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 1000.00  |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| City Montgomery State AL Zip Code 36124  |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <input type="text" value="011"/><br>Category/<br>Type  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

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

-500.00

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

# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|--|--|---|----------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Iowans for Nussle   |  | <b>Transaction ID:</b> SB29.58171<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> | M        | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 |  | 1 | 2 |  | 2 | 0 | 0 | 6 |
| M  | M  | /   | D        | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 7  |   | 1        | 2 |   | 2 | 0 | 0 | 6 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address PO Box 7701  |  | <b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>10000.00</td> </tr> </table>  | 10000.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 10000.00   |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| City Urbandale State IA Zip Code 50323   |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <table border="1"> <tr> <td>011</td> </tr> </table> Category/<br>Type  |   | 011      |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 011  |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Jackson County, WV Republican Party   |  | <b>Transaction ID:</b> SB29.58218<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> | M        | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 |  | 2 | 6 |  | 2 | 0 | 0 | 6 |
| M  | M  | /   | D        | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 7  |   | 2        | 6 |   | 2 | 0 | 0 | 6 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 117 Highlawn Heights   |  | <b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>500.00</td> </tr> </table>  | 500.00   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 500.00   |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| City Ripley State WV Zip Code 25271  |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <table border="1"> <tr> <td>011</td> </tr> </table> Category/<br>Type  |   | 011      |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 011  |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                 |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Jefferson County Republican Party   |  | <b>Transaction ID:</b> SB29.58220<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> | M        | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 |  | 2 | 6 |  | 2 | 0 | 0 | 6 |
| M  | M  | /   | D        | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 7  |   | 2        | 6 |   | 2 | 0 | 0 | 6 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 16 Brookeline Drive  |  | <b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>500.00</td> </tr> </table>  | 500.00   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 500.00   |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| City Charles Town State WV Zip Code 25414  |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <table border="1"> <tr> <td>011</td> </tr> </table> Category/<br>Type  |   | 011      |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 011  |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                 |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....  |  | <table border="1"> <tr> <td>11000.00</td> </tr> </table>  | 11000.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 11000.00   |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>TOTAL</b> This Period (last page this line number only) .....   |  | <table border="1"> <tr> <td></td> </tr> </table>  |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|  |  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |   |  |
|--|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Kanawha County Republican Party   |   | <b>Transaction ID:</b> SB29.58222<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 6</div> </div> |
| Mailing Address 105 Newcomer Road  |   | <b>Amount of Each Disbursement this Period</b><br><div>1000.00</div>   |
| City South Charleston State WV Zip Code 25309  |   |  |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <div>011</div><br>Category/<br>Type   |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Lewis County Republican Party   |   | <b>Transaction ID:</b> SB29.58226<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 6</div> </div> |
| Mailing Address 1153 Old Mill Road   |   | <b>Amount of Each Disbursement this Period</b><br><div>500.00</div>  |
| City Weston State WV Zip Code 26452  |   |  |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <div>011</div><br>Category/<br>Type   |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Lincoln County Republican Party   |   | <b>Transaction ID:</b> SB29.58228<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 6</div> </div> |
| Mailing Address PO Box 271   |   | <b>Amount of Each Disbursement this Period</b><br><div>500.00</div>  |
| City Hamlin State WV Zip Code 25523  |   |  |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <div>011</div><br>Category/<br>Type   |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

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

2000.00

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

# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |   |  |
|--|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Logan County Republican Party   |   | <b>Transaction ID:</b> SB29.58230<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 6</div> </div> |
| Mailing Address 507 Park Drive   |   | <b>Amount of Each Disbursement this Period</b><br><div>500.00</div>  |
| City Logan State WV Zip Code 25601   |   |  |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <div>011</div> Category/<br>Type  |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Marion County, WV Republican Party  |   | <b>Transaction ID:</b> SB29.58232<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 6</div> </div> |
| Mailing Address 1489 Locust Avenue   |   | <b>Amount of Each Disbursement this Period</b><br><div>1000.00</div>   |
| City Fairmont State WV Zip Code 26554  |   |  |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <div>011</div> Category/<br>Type  |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Marshall County, WV Republican Party  |   | <b>Transaction ID:</b> SB29.58234<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 6</div> </div> |
| Mailing Address 302 Twelfth Street   |   | <b>Amount of Each Disbursement this Period</b><br><div>500.00</div>  |
| City Glen Dale State WV Zip Code 26038   |   |  |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <div>011</div> Category/<br>Type  |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....  |   | <div>2000.00</div>   |
| <b>TOTAL</b> This Period (last page this line number only) .....   |   |  |

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 167 / 190

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** McDowell County Republican Party

Mailing Address 163 Summers Street

City Welch State WV Zip Code 24801

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB29.58238

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Mercer County Republican Party

Mailing Address 1806 Honaker Drive

City Princeton State WV Zip Code 24740

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB29.58240

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Mineral County Republican Party

Mailing Address 1090 Carolina Street

City Keyser State WV Zip Code 26726

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB29.58242

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

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

2000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 168 / 190

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |   |  |
|--|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mingo County Republican Party   |   | <b>Transaction ID:</b> SB29.58244<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 6</div> </div> |
| Mailing Address Rt. 2, Box 180   |   | <b>Amount of Each Disbursement this Period</b><br><div>500.00</div>  |
| City Williamson State WV Zip Code 25661  |   |  |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <div>011</div><br>Category/<br>Type   |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Monongalia County Republican Party  |   | <b>Transaction ID:</b> SB29.58246<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 6</div> </div> |
| Mailing Address 321 Watts Street   |   | <b>Amount of Each Disbursement this Period</b><br><div>1000.00</div>   |
| City Morgantown State WV Zip Code 26501  |   |  |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <div>011</div><br>Category/<br>Type   |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Monroe County, WV Republican Party  |   | <b>Transaction ID:</b> SB29.58248<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 6</div> </div> |
| Mailing Address PO Box 247   |   | <b>Amount of Each Disbursement this Period</b><br><div>500.00</div>  |
| City Lindside State WV Zip Code 24957  |   |  |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed  | <div>011</div><br>Category/<br>Type   |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

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

2000.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
**STRAIGHT TALK AMERICA**

Full Name (Last, First, Middle Initial)

## **A. Morgan County Republican Party**

Mailing Address **270 S. Washington Street, Ste. 2**

City **Berkeley Springs** State **WV** Zip Code **25411**

Purpose of Disbursement  
 Cand/Cmte Contributions-NonFed

Candidate Name

**011**  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: SB29.58252**

Date of Disbursement

**07** / **26** / **2006**

Amount of Each Disbursement this Period

**500.00**

Full Name (Last, First, Middle Initial)

## **B. Nicholas County Republican Party**

Mailing Address **PO Box 118**

City **Craigsville** State **WV** Zip Code **26205**

Purpose of Disbursement  
 Cand/Cmte Contributions-NonFed

Candidate Name

**011**  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: SB29.58256**

Date of Disbursement

**07** / **26** / **2006**

Amount of Each Disbursement this Period

**500.00**

Full Name (Last, First, Middle Initial)

## **C. Ohio County Republican Party**

Mailing Address **126 Oakmont Road**

City **Wheeling** State **WV** Zip Code **26003**

Purpose of Disbursement  
 Cand/Cmte Contributions-NonFed

Candidate Name

**011**  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: SB29.58258**

Date of Disbursement

**07** / **26** / **2006**

Amount of Each Disbursement this Period

**1000.00**

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

**2000.00**

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

# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Palmetto Family Committee**

Mailing Address PO Box 11953

City Columbia State SC Zip Code 29211

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58260

Date of Disbursement

07 / 11 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. Pendleton County Republican Party**

Mailing Address HC 72, Box 40

City Franklin State WV Zip Code 26807

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58262

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Perdue for a New Georgia**

Mailing Address PO Box 12369

City Atlanta State GA Zip Code 30355-2369

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB29.58174

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

5000.00

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

10500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 171 / 190

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Pleasants County Republican Party**

Mailing Address 2332 Greens Run Road

City State Zip Code  
St. Marys WV 26170

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB29.58264

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Pocahontas County Republican Party**

Mailing Address HC 64, Box 228

City State Zip Code  
Hillsboro WV 24946

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB29.58266

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Preston County Republican Party**

Mailing Address 102 Summer Lane

City State Zip Code  
Kingwood WV 26537

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB29.58268

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

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

1500.00

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

# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A. Putnam County Republican Party**

Mailing Address 149 Waterside Circle

City Winfield State WV Zip Code 25213

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58270

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Raleigh County Republican Party**

Mailing Address 85 Flat Top Road

City Ghent State WV Zip Code 25843

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58272

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Randolph County, WV Republican Party**

Mailing Address PO Box 2195

City Elkins State WV Zip Code 26241

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58274

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

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

2500.00

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

# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

|  |  |   |         |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|--|--|---|---------|-------------------|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Ritchie County Republican Party   |  | <b>Transaction ID:</b> SB29.58282<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> | M       | M                 | / | D | D | / | Y | Y | Y | Y | 0 | 7 |  | 2 | 6 |  | 2 | 0 | 0 | 6 |
| M  | M  | /   | D       | D                 | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 7  |   | 2       | 6                 |   | 2 | 0 | 0 | 6 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 210 E. Main Street   |  | <b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>500.00</td> </tr> </table>  | 500.00  |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 500.00   |  |   |         |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| City Harrisville State WV Zip Code 26362   | <table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/<br/>Type</td> </tr> </table>   |   | 011     | Category/<br>Type |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 011  |  |   |         |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Category/<br>Type  |  |   |         |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed<br>Candidate Name  |  |   |         |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                    |   |         |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Roane County Republican Party   |  | <b>Transaction ID:</b> SB29.58284<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> | M       | M                 | / | D | D | / | Y | Y | Y | Y | 0 | 7 |  | 2 | 6 |  | 2 | 0 | 0 | 6 |
| M  | M  | /   | D       | D                 | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 7  |   | 2       | 6                 |   | 2 | 0 | 0 | 6 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address Box 15   |  | <b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>500.00</td> </tr> </table>  | 500.00  |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 500.00   |  |   |         |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| City Gandeenville State WV Zip Code 25243  | <table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/<br/>Type</td> </tr> </table>   |   | 011     | Category/<br>Type |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 011  |  |   |         |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Category/<br>Type  |  |   |         |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed<br>Candidate Name  |  |   |         |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                    |   |         |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Sam Shaw for Auditor 2006   |  | <b>Transaction ID:</b> SB29.58176<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> | M       | M                 | / | D | D | / | Y | Y | Y | Y | 0 | 7 |  | 1 | 9 |  | 2 | 0 | 0 | 6 |
| M  | M  | /   | D       | D                 | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 7  |   | 1       | 9                 |   | 2 | 0 | 0 | 6 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address PO Box 3838  |  | <b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>1000.00</td> </tr> </table>   | 1000.00 |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 1000.00  |  |   |         |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| City Montgomery State AL Zip Code 36109  | <table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/<br/>Type</td> </tr> </table>   |   | 011     | Category/<br>Type |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 011  |  |   |         |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Category/<br>Type  |  |   |         |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Cand/Cmte Contributions-NonFed<br>Candidate Name  |  |   |         |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |         |                   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

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

2000.00

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

# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Sea Island Republican Women's Club**

Mailing Address 77 Folly Road

City Charleston State SC Zip Code 29407

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58286

Date of Disbursement

07 / 11 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Senator Jabo Waggoner Campaign**

Mailing Address 1829 Mission Road

City Vestavia Hills State AL Zip Code 35216

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB29.58178

Date of Disbursement

07 / 13 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. Stone for Solicitor**

Mailing Address 3 Row Boat Road

City Hilton Head Island State SC Zip Code 29928

Purpose of Disbursement  
Voided Check-Candidate Contrib-Non Fed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58437

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

-500.00

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

1000.00

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

# **SCHEDULE B (FEC Form 3X)** **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"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Summers County Republican Party**

Mailing Address HC 65, Box 112

City Wayside State WV Zip Code 24985

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58288

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Taylor County Republican Party**

Mailing Address 5 Blueville Drive

City Grafton State WV Zip Code 26354

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58290

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. The A-Team Committee**

Mailing Address PO Box 802

City Mt. Pleasant State SC Zip Code 29465

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58294

Date of Disbursement

07 / 11 / 2006

Amount of Each Disbursement this Period

3500.00

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

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 176 / 190

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. The Alabama Republican Party**

Mailing Address PO Box 55628

City Birmingham State AL Zip Code 35255

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58292

Date of Disbursement

07 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. Tucker County Republican Party**

Mailing Address 114 Sherman Street

City Parsons State WV Zip Code 26287

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58296

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Tyler County Republican Party**

Mailing Address 656 Little Church Road

City Friendly State WV Zip Code 26146

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58298

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

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

2000.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 177 / 190

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

## **A. Upshur County Republican Party**

Mailing Address 45 Hickory Flat Road

City Buckhannon State WV Zip Code 26201

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58300

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Wayne County, WV Republican Party**

Mailing Address Rt. 1, Box 314

City Genoa State WV Zip Code 25517

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58302

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Webster County Republican Party**

Mailing Address PO Box 644

City Cowen State WV Zip Code 26206

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58304

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

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

1500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 178 / 190

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** Wetzel County Republican Party

Mailing Address 421 N. 2nd Ave.

City Paden City State WV Zip Code 26159

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58306

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Wirt County Republican Party

Mailing Address HC 70, Box 295

City Creston State WV Zip Code 26141

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58308

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Wood County Republican Party

Mailing Address Rt. 2, Box 519

City Parkersburg State WV Zip Code 26101

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58310

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

1000.00

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

2000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 179 / 190

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

**A.** Wyoming County Republican Party

Mailing Address PO Box 456

City  
Pineville

State  
WV

Zip Code  
24874

Purpose of Disbursement  
Cand/Cmte Contributions-NonFed

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.58312

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

500.00

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

75440.60

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 180 / 190

FOR LINE NUMBER:  
(check only one)☒ 9  
☐ 10NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Committee to Re-Elect Joseph BrunoNature of Debt (Purpose):  
Travel Reimbursement - Lodging

Mailing Address PO Box 984

City State ZIP Code  
Troy NY 12181

Outstanding Balance Beginning This Period

71.19

Transaction ID: SD9.52972

Amount Incurred This Period

0.00

Payment This Period

71.19

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

0.00

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

0.00

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 181 / 190

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Caplin & DrysdaleNature of Debt (Purpose):  
Legal Consultant

Mailing Address One Thomas Circle, NW Ste. 1100

City State ZIP Code  
Washington DC 20005

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.58449

Amount Incurred This Period

15173.54

Payment This Period

0.00

Outstanding Balance at Close of This Period

15173.54

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Derby H. WatkinsNature of Debt (Purpose):  
Direct Mail Consultant

Mailing Address 3232 Wellington Road

City State ZIP Code  
Alexandria VA 22302

Outstanding Balance Beginning This Period

9500.00

Transaction ID: SD10.53709

Amount Incurred This Period

0.00

Payment This Period

9500.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Flight OptionsNature of Debt (Purpose):  
Travel-Air CharterMailing Address 26180 Curtiss-Wright Parkway  
Cuyahoga County AirportCity State ZIP Code  
Cleveland OH 44143

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.58450

Amount Incurred This Period

104238.67

Payment This Period

0.00

Outstanding Balance at Close of This Period

104238.67

**1) SUBTOTALS** This Period This Page (optional).....

119412.21

**2) TOTALS** This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 182 / 190

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Hoon Designs

Nature of Debt (Purpose):  
Direct Mail-Production

Mailing Address 2800 Shirlington Road, Ste. 920

City State ZIP Code  
Arlington VA 22206

Outstanding Balance Beginning This Period

1075.00

Transaction ID: SD10.53710

Amount Incurred This Period

0.00

Payment This Period

1075.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Hoon Designs

Nature of Debt (Purpose):  
Direct Mail-Production

Mailing Address 2800 Shirlington Road, Ste. 920

City State ZIP Code  
Arlington VA 22206

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.58451

Amount Incurred This Period

1200.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1200.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Pinnacle List Company

Nature of Debt (Purpose):  
Direct Mail-List Expense

Mailing Address 2800 Shirlington Road, Ste. 970

City State ZIP Code  
Arlington VA 22206

Outstanding Balance Beginning This Period

43367.38

Transaction ID: SD10.53711

Amount Incurred This Period

0.00

Payment This Period

43367.38

Outstanding Balance at Close of This Period

0.00

**1) SUBTOTALS** This Period This Page (optional).....

1200.00

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

**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....

**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 183 / 190

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Southwest PublishingNature of Debt (Purpose):  
Direct Mail-Production

Mailing Address 2600 NW Topeka Blvd.

City State ZIP Code  
Topeka KS 66617

Outstanding Balance Beginning This Period

67319.29

Transaction ID: SD10.53712

Amount Incurred This Period

0.00

Payment This Period

67319.29

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Strategic TelecommunicationsNature of Debt (Purpose):  
Telemarketing

Mailing Address 7591 9th Street North

City State ZIP Code  
Oakdale MN 55128

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.58452

Amount Incurred This Period

1828.25

Payment This Period

0.00

Outstanding Balance at Close of This Period

1828.25

1) **SUBTOTALS** This Period This Page (optional).....

1828.25

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

122440.46

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Form/Schedule: **F3XA**

Transaction ID:

The Committee wishes to disclose the following: 1) No expenditures disclosed on Schedule B, Line 21b were made on behalf of any specifically identified federal candidate. All expenditures made on behalf of a specifically identified federal candidate have been disclosed on Schedule B, Line 23. 11 CFR 104.3 (b) and 106.1 2) No expenditures disclosed on Schedule B, Line 21b were made for public communications (as defined by 11 CFR 100.26) or voter drive activity (under 11 CFR 106.6(b)(2)(i)) containing express advocacy as defined under 11 CFR 100.-22 and thus did not constitute in-kind contributions or independent expenditures.

Form/Schedule: **SA11A1** See Schedule B, Line 21b, Transaction ID SB21B.58147

Transaction ID: **SA11A1.58146**

\*\*\*\*\*



**Image# 26930426497**

Form/Schedule: **SA11A1**    See Attached Partners

Transaction ID: **SA11A1.53862**

Form/Schedule: **SB21B**    See Schedule B, Line 23, Transaction ID SB23.58624

Transaction ID: **SB21B.58612**

\*\*\*\*\*

**Image# 26930426498**

Form/Schedule: **SB21B** See Schedule B, Line 29, Transaction ID SB29.58626

Transaction ID: **SB21B.58613**

Form/Schedule: **SB21B** See Schedule B, Line 23, Transaction ID #SB23.58615

Transaction ID: **SB21B.58507**

\*\*\*\*\*

**Image# 26930426499**

Form/Schedule: **SB21B**      See Schedule B, Line 23, Transaction ID # SB23.58614

Transaction ID: **SB21B.58508**

Form/Schedule: **SB21B**      See Schedule B, Line 29, Transaction ID #SB29.58619

Transaction ID: **SB21B.58509**

\*\*\*\*\*

**Image# 26930426500**

Form/Schedule: **SB21B**      See Schedule B, Line 23, Transaction ID #SB23.58621

Transaction ID: **SB21B.58510**

Form/Schedule: **SB21B**      See Schedule B, Line 23, Transaction ID #SB23.58622

Transaction ID: **SB21B.58511**

\*\*\*\*\*

Image# 26930426501

Form/Schedule: **SB21B**      Event Expense - Catering (Working Lunch) at Campton Place Hotel 340 Stockton Street San Francisco CA 94108  
Transaction ID: **SB21B.58147**

Form/Schedule: **SB29**      For Travel-Lodging at the Amway Grand Plaza Hotel, 187 Monroe NW, Grand Rapids, MI 49503  
Transaction ID: **SB29.58626.0**

Image# 26930426502

Form/Schedule: **SB29** For Travel-Charter Air by Flight Options, 26180 Curtiss-Wright Parkway, Cuyahoga County Airport, Cleveland, OH  
Transaction ID: **SB29.58619.0** 44143. Flight from White Plains, NY to Schenectady, NY.

Form/Schedule: **SB29** For Travel-Charter Air by Flight Options, 26180 Curtiss-Wright Parkway, Cuyahoga County Airport, Cleveland, OH  
Transaction ID: **SB29.58622.0** 44143. Flight from Portland, ME to Manchester, NH.

\*\*\*\*\*