FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An	Authorized Committee	Office Use Only
1. NAME OF COMMITTEE (in full) USE FEC MA OR TYPE OR	ILING LABEL Example:If typing, type over the lines	
Friends of Bennie Thompson		
ADDRESS (number and street)	100	
Check if different		
than previously reported. (ACC)		MS 39041
2. FEC IDENTIFICATION NUMBER \(\psi\)	CITY 🙇	STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
C00279851	3. IS THIS NEW (N) OR	X AMENDED MS 2
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1)	(b) 12-Day PRE -Election Report for the:	General (12G) Runoff (12R)
July 15 Quarterly Report (Q2)	Convention (12C)	Special (12S)
October 15 Quarterly Report (Q3)	Election on 0 6 0 6	2 0 0 6 in the State of
January 31 Year-End Report (YE)	(c) 30-Day POST -Election Report for the	e:
	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election on	in the State of
5. Covering Period 0 4 0 1	2 0 0 6 through 0	5 17 2006
I certify that I have examined this Report and to the Type or Print Name of Treasurer Reuk	ne best of my knowledge and belief it is true, com pen V. Anderson	rect and complete.
Signature of Treasurer Electronically Filed by	Reuben V. Anderson	Date 0 8 1 4 2 0 0 6
NOTE : Submission of false, erroneous, or incom	nplete information may subject the person signin	g this Report to the penalties of 2 U.S.C 437g.
Office Use Only		FEC FORM 3 (Revised 02/2003)

Image# 26930314315

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) Page 2 Write or Type Committee Name Friends of Bennie Thompson D 1 7 0.5 2006 From: 0 4 0.1 2006 Report Covering the Period: To: **COLUMN B COLUMN A This Period Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 201980.67 753540.05 (other than loans) (from Line 11(e))...... (b) Total Contribution Refunds 0.00 5000.00 (from Line 20(d))..... (c) Net Contributions (other than loans) 201980.67 748540.05 (subtract Line 6(b) from Line 6(a))....... 7. Net Operating Expenditures (a) Total Operating Expenditures 196036.03 430028.79 (from Line 17)..... (b) Total Offsets to Operating 16535.00 19717.84 Expenditures (from Line 14)..... (c) Net Operating Expenditures 179501.03 410310.95 (subtract Line 7(b) from Line 7(a))....... Cash on Hand at Close of 589633.03 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)..... For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003) Page 3 Write or Type Committee Name Friends of Bennie Thompson 1 7 0 4 2006 05 2006 Report Covering the Period: 0 1 From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 71425.00 205402.14 (i) Itemized (use Schedule A)..... 7865.00 17011.28 (ii) Unitemized..... (iii) TOTAL of contributions 79290.00 222413.42 from individuals..... 26.67 3635.10 (b) Political Party Committees..... (c) Other Political Committees 122664.00 527491.53 (such as PACS)..... 0.00 0.00 (d) The Candidate..... (e) TOTAL CONTRIBUTIONS (other than loans) 201980.67 753540.05 (add Lines 11(a)(iii), (b), (c), and (d)) 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES..... 13. LOANS (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 0.00 (b) All Other Loans..... (c) TOTAL LOANS 0.00 0.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 16535.00 19717.84 (Refunds, Rebates, etc.).... 15. OTHER RECEIPTS 1143.22 7937.32 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...... 219658.89 781195.21

FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	196036.03	430028.79
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of all Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:	•	
(a) Individuals/Persons Other Than Political Committees	0.00	5000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	5000.00
21. OTHER DISBURSEMENTS	1675.00	39561.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	197711.03	474589.79
III. CASH S	SUMMARY	
23. CASH ON HAND AT BEGINNING OF REPO	ORTING PERIOD	567685.17
24. TOTAL RECEIPTS THIS PERIOD (from Lin	ne 16, page3)	219658.89
25. SUBTOTAL (add Line 23 and Line 24)		787344.06
26. TOTAL DISBURSEMENTS THIS PERIOD ((from Line 22)	197711.03
27. CASH ON HAND AT CLOSE OF REPORTI (subtract Line 26 from Line 25)		589633.03

SCHEDULE A (FE	CForm 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 5 / 146
ITEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 11d
		Detailed Summary Page	X 11a 11b 11c 11d 12 12 13a 13b 14 15
Any information copied from sor for commercial purposes, commercial purp	such Reports and Statements may other than using the name and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE	(In Full)		
Friends of Bennie Tho	mpson		_
Full Name (Last, First, Mic	ldle Initial)		Date of Receipt
	21st Street, NW, Suite 900		05 11 7 2006
City Washington	State DC	Zip Code 20036	Transaction ID: 60519.C7702
FEC ID number of contribution federal political committee.	uting	20036	Amount of Each Receipt this Period 500.00
Name of Employer Bellsouth DC Inc.	Occupation Vice Pres		Receipt Limit Increased Due to Opponent's
Receipt For: 200	, , , , , , , , , , , , , , , , , , , ,	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	eneral	500.00	
Full Name (Last, First, Mic 3. Jerry Adams	Idle Initial)		Date of Receipt
Mailing Address 200 Ri	ppling Dr.	05 05 2006	
City	State	Zip Code	Transaction ID: 60519.C7695
<u>Marietta</u>	GA	30064	Amount of Each Receipt this Period
FEC ID number of contribution federal political committee.			2100.00
Name of Employer Solutions 4, Inc.	Occupation		Receipt Limit Increased Due to Opponent's
Receipt For: 200	President 6 Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	eneral	2100.00	
Full Name (Last, First, Mic Marshall Alexander	Idle Initial)		Date of Receipt
Mailing Address P.O. E	3ox 5101		05 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 60519.C7696
Brandon	MS	39047	Amount of Each Receipt this Period
FEC ID number of contribution federal political committee.		2000.00	
Name of Employer Realty Mortgage Corp.	Occupation Loan Offi		Receipt Limit Increased Due to Opponent's
Receipt For: 200	1	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	eneral	2000.00	
SUBTOTAL of Receipts Thi	s Page (optional)		4600.00
TOTAL This Period (last nad	ge this line number only)		

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 146
TEMIZED RECEIPTS	or each category of the	(check only one) X 11a 11b 11c 11d
- - - -	Detailed Summary Page	12 13a 13b 14 15
Any information copied from such Reports and Sta or for commercial purposes, other than using the na	tements may not be sold or used by any perso ame and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
Friends of Bennie Thompson		
Full Name (Last, First, Middle Initial) A. Reuben Anderson		Date of Receipt
Mailing Address P.O. Box 290		04 / 07 / 2006
City Jackson	State Zip Code MS 39205	Transaction ID: 60410.C7645 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Phelps Dunbar	Occupation Attorney	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 X Primary General Other (specify)	Election Cycle-to-Date ▼ 1000.00	Speriding (2 0.3.0. 441a(1)/441a-1)
Full Name (Last, First, Middle Initial) Kashif Ansari		Date of Receipt
Mailing Address 4021 Garth Road, Suite	05 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Baytown	State Zip Code TX 77521-3160	Transaction ID: 60519.C7848 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer Self	Occupation Physician	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 X Primary General Other (specify)	Election Cycle-to-Date 2000.00	Spending (2 0.3.0. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) C. Kashif Ansari		Date of Receipt
Mailing Address 4021 Garth Road, Suite	102	05 17 2006
City	State Zip Code	Transaction ID: 60519.C7843
<u>Baytown</u>	TX 77521-3160	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00 Receipt
Name of Employer Self	Occupation Physician	Limit Increased Due to Opponent's
Receipt For: 2006	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General Other (specify) ▼	2100.00	
SUBTOTAL of Receipts This Page (optional)		3100.00
TOTAL This Period (last page this line number or	nly)	

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE // 146
	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 11d 12 12 13a 13b 14 15
Ar	ny information copied from such Reports and State for commercial purposes, other than using the nar	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	NAME OF COMMITTEE (In Full)	me and add	iress or any political committee to	SOUGH CONTINUATIONS ITOM SUCH COMMITTEE.
\	Friends of Bennie Thompson			
_	Thomas of Bennie Thompson			_
۹.	Full Name (Last, First, Middle Initial) Ura Bailey			Date of Receipt
	Mailing Address 517 Ellsworth Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60519.C7786
	Silver Spring	MD	20910	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	<u> </u>	Occupation		Receipt
	Howard University	Professor		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	-	250.00	
	Other (specify) ▼	0 0	230.00	
3.	Full Name (Last, First, Middle Initial) Dwight Boykins			Date of Receipt
	Mailing Address P.O. Box 300961	05 17 2006		
	City	State	Zip Code	Transaction ID: 60519.C7846
	Houston	TX	77230	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation	1	Receipt
		Consulta		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General	Election C	ycle-to-Date ▼	Spending (2 c.s.s. 111a(i), 111a i)
	Other (specify)		500.00	
				'
Э.	Full Name (Last, First, Middle Initial) Reuben Brown			Date of Receipt
	Mailing Address 12275 Scyrus Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	05 17 2006
	Houston	State TX	77066	Transaction ID: 60519.C7822 Amount of Each Receipt this Period
	FEC ID number of contributing		1100	
	federal political committee.	C		500.00
	Name of Employer Self	Occupation	1	Receipt
		Architect		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	ycle-to-Date ▼	Opending (2 0.0.0. 44 ra(1)/44 ra 1)
	X Primary General Other (specify) ▼	' '	500.00	
		0 0	0 0 0 0 0 0 0	
S	UBTOTAL of Receipts This Page (optional)			1250.00
_	OTAL This Period (last nage this line number only			
- 1	LILAL TRIC PARIOR USET DONA TRIC LINA NUMBAR AND	V I		

S	CHEDULE A (FEC Form 3)		Llas congreta cohodula(a)	FOR LINE NUMBER: PAGE 8 / 146
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and Strong for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\angle	Friends of Bennie Thompson			
A.				Date of Receipt
	Mailing Address 28 Timber Ridge Dr.			05 17 2006
	City	State	Zip Code	Transaction ID: 60519.C7794
	Brandon	MS	39042	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		400.00
	Name of Employer	Occupation	<u> </u>	Receipt
	Self	Housing	Developer	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	tycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General		400.00	1
	Other (specify)	0 0		
В.	Full Name (Last, First, Middle Initial)			Data of Daggint
Ь.	Marcus Byrd Mailing Address 28 Timber Ridge Dr.			Date of Receipt
	Mailing Address 26 Hillber Hage Dr.			05 17 2006
	City	State	Zip Code	Transaction ID: 60519.C7793
	Brandon	MS	39042	Amount of Each Receipt this Period
	FEC ID number of contributing			2100.00
	federal political committee.	C		2100.00
	Name of Employer	Occupation	 1	Receipt
	Self		Developer	Limit Increased Due to Opponent's
	Receipt For: 2006	Election Cycle-to-Date ▼		Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	1 1	2500.00	7
	Other (specify)	0 0	2500.00	
C.	Full Name (Last, First, Middle Initial) Paul Carpenter			Date of Receipt
	Mailing Address P.O. Box 1101			0 5 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60519.C7790
	Grenada	MS	38902	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00	
	Name of Employer	Name of Employer Occupation		Receipt
	Self	Business		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		1000.00	7
	Other (specify) ▼		1000.00	1
[s	UBTOTAL of Receipts This Page (optional) .			3500.00
\vdash				
Ιт	OTAL This Period (last page this line number	only)	1	

	CHEDULE A (FEC Form 3 EMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 146 (check only one) X
Ar	ny information copied from such Reports and for commercial purposes, other than using t	Statements may	/ not be sold or used by any pers	on for the purpose of soliciting contributions
Š	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson	ne name and add	iress of any political committee t	o Solicit Contributions from Such Committee.
Α.	Full Name (Last, First, Middle Initial) Darryl Carter Mailing Address 1301 Travis Street, S	Suite 300		Date of Receipt
	City Houston	State TX	Zip Code 77002-7430	Transaction ID: 60519.C7811 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1100.00 Receipt
	Name of Employer Self Receipt For: 2006 X Primary General Other (specify) ▼	Occupation Attorney Election C	cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
В.	Full Name (Last, First, Middle Initial) Darryl Carter Mailing Address 1301 Travis Street, Suite 300			Date of Receipt 0 5 1 7 2 0 0 6
	City Houston	State TX	Zip Code 77002-7430	Transaction ID: 60519.C7831 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Self Receipt For: 2006 X Primary General	Occupation Attorney Election C	n Sycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
_	Other (specify) ▼ Full Name (Last, First, Middle Initial)	0 0	2100.00	
C.	· · · · /			Date of Receipt M
	City	State MD	Zip Code	Transaction ID: 60410.C7598
	Bowie FEC ID number of contributing federal political committee.	C	20720	Amount of Each Receipt this Period
	Name of Employer Capitol Hill Consulting Group Receipt For: 2006 X Primary General Other (specify) ▼	Occupation Lobbyist Election C	Sycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			2250.00
Т	OTAL This Period (last page this line numb	er only)		

S	CHEDULE A (FEC Form 3)		Llas separata ashadula(s)	FOR LINE NUMBER: PAGE 10 / 146	
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)	
II EWIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 11d	
				12 13a 13b 14 15	
Ar or	ny information copied from such Reports and Stor commercial purposes, other than using the	Statements may e name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
Λ	NAME OF COMMITTEE (In Full)				
	Friends of Bennie Thompson				
Α.	Full Name (Last, First, Middle Initial) Godwin E. Dafe			Date of Receipt	
	Mailing Address P.O. Box 11655			05 17 2006	
	City	State	Zip Code	Transaction ID: 60519.C7807	
	Jackson	MS	39283-1655	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		1000.00	
	Name of Employer	Occupation	<u> </u>	Receipt	
	State Farm Insurance	Insurance	e Agent	Limit Increased Due to Opponent's	
	Receipt For: 2006	Election C	tycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
	X Primary General		1000.00	7	
	Other (specify)	0 0	1000.00		
Б	Full Name (Last, First, Middle Initial)			Data of Baselist	
В.		0		Date of Receipt	
	Mailing Address 9410 Annapolis Road, Suite 200			04 07 2006	
	City	State	Zip Code	Transaction ID: 60410.C7617	
	Lanham	MD	20706	Amount of Each Receipt this Period	
	FEC ID number of contributing			1000.00	
	federal political committee.	C		1000.00	
	Name of Employer	Occupation	า	- Receipt	
	HAZMED, Inc.	Executive Vice President Election Cycle-to-Date		Limit Increased Due to Opponent's	
	Receipt For: 2006			Spending (2 U.S.C. 441a(i)/441a-1)	
	X Primary General		· · · · · · · · · · · · · · · · · · ·	7	
	Other (specify) ▼		1000.00		
<u>с.</u>	Full Name (Last, First, Middle Initial) Julius Debro			Date of Receipt	
Mailing Address 11531 36th Ave., NE				05 17 2006	
	City	State	Zip Code	Transaction ID: 60519.C7789	
	Seattle	WA	98125	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Toda a political committee.		Receipt		
	Name of Employer University of Washington	Occupation		· ·	
		Associate		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
	Receipt For: 2006	Election C	ycle-to-Date ▼		
	X Primary General Other (specify) ▼		500.00		
	Sales (oposity) \	0 0	0 0 0 0 0 0 0	-	
SUBTOTAL of Receipts This Page (optional)					
Г					
Ιт	OTAL This Period (last page this line number	only)			

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 146		
TEMIZED RECEIPTS	or each category of the	(check only one) X 11a 11b 11c 11d		
: <u> </u>	Detailed Summary Page	12 13a 13b 14 15		
Any information copied from such Reports and State	ements may not be sold or used by any perso	n for the purpose of soliciting contributions		
or for commercial purposes, other than using the na	me and address of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)				
Friends of Bennie Thompson				
Full Name (Last, First, Middle Initial) A. Gaines Dyer		Date of Receipt		
Mailing Address P.O. Drawer 560		M M / D D / Y Y Y Y		
0.11	Olds 7's Olds	05 17 2006		
City Greenville	State Zip Code MS 38701	Transaction ID: 60519.C7749		
•	WS 38701	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	500.00		
Name of Employer Self	Occupation	Receipt		
	Attorney	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Receipt For: 2006	Election Cycle-to-Date ▼	Opending (2 0.0.0. 441a(i)/441a 1)		
X Primary General Other (specify) ▼	500.00			
Full Name (Last, First, Middle Initial) 3. Gayle Fallon		Date of Receipt		
Mailing Address 2901 Bammel Lane, Unit	9	05 17 2006		
City	City State Zip Code			
Houston	TX 77098	Transaction ID: 60519.C7815 Amount of Each Receipt this Period		
FEC ID number of contributing				
federal political committee.	C	250.00		
Name of Employer	Occupation	Receipt		
Houston Federation of Tea- chers	Administrator	Limit Increased Due to Opponent's		
Receipt For: 2006	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)		
X Primary General	250.00			
Other (specify) ▼	250.00			
Full Name (Last, First, Middle Initial) 2. James Fallon		Date of Receipt		
Mailing Address 909 Texas Street, Unit 40	7	M M / D D / Y Y Y Y		
City	State Zip Code	05 17 2006		
Houston	TX 77002	Transaction ID: 60519.C7847 Amount of Each Receipt this Period		
FEC ID number of contributing				
federal political committee.	C	500.00		
Name of Employer Self	Occupation	Receipt		
Self	Attorney	Limit Increased Due to Opponent's		
Receipt For: 2006	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)		
X Primary General Other (specify) ▼	500.00			
Other (specify)				
CURTOTAL of Descripto This Dags (antismal)	_	1250.00		
SUBTOTAL of Receipts This Page (optional)	·······			
TOTAL This Period (last page this line number only	y)			

S	CHEDULE A (FEC Form 3	1		FOR LINE NUMBER: PAGE 12 / 146			
•		′	Use separate schedule(s) or each category of the	(check only one)			
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d			
				12 13a 13b 14 15			
Ar	ny information copied from such Reports an	d Statements may	not be sold or used by any pers	on for the purpose of soliciting contributions o solicit contributions from such committee.			
OI		the name and add	aress or any political committee to	o solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson						
	Therias of Berline Thompson						
_	Full Name (Last, First, Middle Initial)						
Α.	James Franks			Date of Receipt			
	Mailing Address P.O. Box 681			05 17 2006			
	City	State	Zip Code	Transaction ID: 60519.C7799			
	Tupelo	MS	38802	Amount of Each Receipt this Period			
	•		00002				
	FEC ID number of contributing federal political committee.	C		1000.00			
	·			Receipt			
	Name of Employer Self	Occupation	n	<u> </u>			
	Receipt For: 2006	Attorney	Sycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General	Election C	ycle-to-Date ▼				
	Other (specify)		1000.00				
			0 0 0 0 0 0 0	_			
	Full Name (Last, First, Middle Initial)	•					
В.	Jason Freeman			Date of Receipt			
	Mailing Address 7320 Ashcroft Dr., Suite 201			05 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: 60519.C7820			
	Houston	TX	77081	Amount of Each Receipt this Period			
			77001				
	FEC ID number of contributing federal political committee.	C		500.00			
				Receipt			
	Name of Employer Information Requested	Occupation		· ·			
	Receipt For: 2006		ided/Second Request	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
	Receipt For: 2006 X Primary General	Election C	cycle-to-Date ▼				
	Other (specify)		500.00				
				_			
_	Full Name (Last, First, Middle Initial)						
C.	Tylvester Goss			Date of Receipt			
	Mailing Address 934 Rutherford Dr.			05 17 2006			
	City	State	Zip Code	Transaction ID: 60519.C7777			
	Jackson	MS	39206-2008	Amount of Each Receipt this Period			
	FEC ID number of contributing						
	federal political committee.	C		250.00			
	Name of Employer	Occupation	n	Receipt			
	Self	Attorney	1	Limit Increased Due to Opponent's			
	Receipt For: 2006		Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General		· · · · · · · · · · · · · · · · · · ·				
	Other (specify)		250.00				
_							
SUBTOTAL of Descints This Page (antique)							
S	SUBTOTAL of Receipts This Page (optional)						
_	OTAL This Poyled (last ways this line world	oor only'					
1 1	OTAL This Period (last page this line number	J e i (IIII)					

SCHEDULE A (FEC Form 3		Use separate schedule(s)	FOR LINE NUMBER: PAGE 13 / 146 (check only one)			
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 11d			
		Detailed Summary Page	12 13a 13b 14 15			
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)		, , ,				
Friends of Bennie Thompson						
Full Name (Last, First, Middle Initial) Margaret Greene			Date of Receipt			
Mailing Address 3790 Paces Ferry Ro	ad		05 11 2006			
City	State	Zip Code	Transaction ID: 60519.C7703			
Atlanta	GA	30327	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		1000.00			
Name of Employer Bellsouth Corporation	Occupation		Receipt			
Receipt For: 2006	Executive Election C	e Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
X Primary General	Election		1			
Other (specify)		1000.00				
Full Name (Last, First, Middle Initial) 3. Benjamin Hall			Date of Receipt			
Mailing Address 11607 Arrowwood Ci	05 17 YYYY 2006					
City	State	Zip Code	Transaction ID: 60519.C7833			
Houston	TX	77063	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		2100.00			
Name of Employer Self	Occupation	n	Receipt			
Receipt For: 2006	Attorney	Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
X Primary General	Liection		1			
Other (specify) ▼		2100.00				
Full Name (Last, First, Middle Initial) D. Benjamin Hall			Date of Receipt			
Mailing Address 11607 Arrowwood Ci	r.		M M / D D / Y Y Y Y			
City	State	Zip Code	0 5 1 7 2 0 0 6 Transaction ID: 60519.C7834			
Houston	TX	77063	Amount of Each Receipt this Period			
FEC ID number of contributing	С		2100.00			
federal political committee.	C .					
Name of Employer Self	Occupation	n	Receipt			
	Attorney	Visile to Date.	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
Receipt For: 2006 Primary X General	Election	Cycle-to-Date ▼	1			
Other (specify) ▼		4200.00				
SUBTOTAL of Receipts This Page (optional)						
, ,						
TOTAL This Period (last page this line number	er only))				

S	CHEDULE A (FEC Form 3)		Llas separata ashadula(s)	FOR LINE NUMBER: PAGE 14 / 146
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
• • • • • • • • • • • • • • • • • • • •	EIVIIZED RECEIP I 3		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Friends of Bennie Thompson			
A.				Date of Receipt
	Mailing Address 24922 Laguna Edge [05 17 2006
	City	State	Zip Code	Transaction ID: 60519.C7830
	Katy	TX	77494-3924	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	<u> </u>	Receipt
	Self	Entreprer	neur	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	tycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		1000.00	7
	Other (specify) ▼	0 0	1000.00	
В.	Full Name (Last, First, Middle Initial) Sonya Harrell			Date of Receipt
	Mailing Address 1539 Lake Pauline Ct	05 17 2006		
	City	State	Zip Code	Transaction ID: 60519.C7829
	Richmond	TX	77469-7959	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	า	Receipt
	Self	Entrepreneur Election Cycle-to-Date ▼		Limit Increased Due to Opponent's
	Receipt For: 2006			Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		1000.00	
<u> </u>	Full Name (Last, First, Middle Initial) Michael Harris			Date of Receipt
	Mailing Address 4103 R. V. Mayfield D	r.	05 17 2006	
	City	State	Zip Code	Transaction ID: 60519.C7828
	Houston	TX	77088	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer KCOH	Occupation	1	Receipt
	KCOH ' '	Radio Pe		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	1000.00	
s	UBTOTAL of Receipts This Page (optional) .			3000.00
	OTAL This Period (last page this line numbe			

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 15 / 146 (check only one)
. 1			Detailed Summary Page	X 11a 11b 11c 11d 12 13a 13b 14 15
An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
۹.	Full Name (Last, First, Middle Initial) Barrett Hatches Mailing Address 10023 N Revere Court			Date of Receipt
	City	State	Zip Code	0 5 1 7 2 0 0 6 Transaction ID: 60519.C7766
	Kansas City	МО	64154	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer BHMM LLC	Occupatio Presiden		Receipt Limit Increased Due to Opponent's
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Sycle-to-Date ▼ 300.00	Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) David Havins			Date of Receipt
	Mailing Address 1423 Meadow Lakes D	05 / 17 / 2006		
	City Sugar Land	State TX	Zip Code 77479	Transaction ID: 60519.C7827 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	11413	1000.00
	Name of Employer Self	Occupatio Attorney		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 1000.00	
- C.	Full Name (Last, First, Middle Initial) Valeria Hunter			Date of Receipt
	Mailing Address 3350 Hwy. 467			05 17 2006
	City Edwards	State MS	Zip Code 39066	Transaction ID: 60519.C7812 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Jackson Public Schools	Occupatio Teacher		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 1000.00	Opending (2 0.0.0. 441a(i)/441a 1)
S	UBTOTAL of Receipts This Page (optional)			2300.00
T	OTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 146 (check only one)
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Α.	Full Name (Last, First, Middle Initial) Louis James			Date of Receipt
	Mailing Address 17154 Fairway Dr.			04 28 2006
	City <u>Detroit</u>	State MI	Zip Code 48221	Transaction ID: 60519.C7671 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Self Receipt For: 2006 X Primary General Other (specify)	Occupation Business Election C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Full Name (Last, First, Middle Initial)	0 0	0 0 0 0 0 0 0 0	Date of Passint
Б.	Louis James Mailing Address 17154 Fairway Dr.			Date of Receipt M
	City Detroit	State MI	Zip Code 48221	Transaction ID: 60519.C7670 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	TOLL	1000.00
	Name of Employer Self	Occupation Business	man	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	cycle-to-Date ▼ 2000.00	Sportuning (2 0.0.0. 441a(i)/441a 1)
<u>с</u> .	Full Name (Last, First, Middle Initial) Howard Jefferson			Date of Receipt
	Mailing Address 4402 Nenana Drive			05 17 2006
	City Houston	State TX	Zip Code 77035-3626	Transaction ID: 60519.C7835 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	77033-3020	500.00
	Name of Employer Protectors Insurance	Occupation	e Agent	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	cycle-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)			2500.00
	OTAL This Period (last page this line number	only)		

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 / 146 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 11d
			Detailed Summary Page	12 13a 13b 14 15
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
\rangle	Friends of Bennie Thompson			
۹.	Full Name (Last, First, Middle Initial) Terry Jenkins			Date of Receipt
	Mailing Address 777 Harris Street			05 17 2006
	City	State	Zip Code	Transaction ID: 60519.C7795
	Jackson	MS	39209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2100.00
	Name of Employer Self	Occupation		Receipt
	Receipt For: 2006		Developer Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	Liection		1
	Other (specify)	0 0	2100.00	
3.	Full Name (Last, First, Middle Initial) Terry Jenkins	•		Date of Receipt
	Mailing Address 777 Harris Street			05 17 2006
	City	State	Zip Code	Transaction ID: 60519.C7796
	Jackson	MS	39209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		400.00
	Name of Employer Self	Occupation		Receipt
	Receipt For: 2006	<u>, </u>	Developer Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General	Libblion		1
	Other (specify)		2500.00	
Э.	Full Name (Last, First, Middle Initial) Cliff Johnson			Date of Receipt
	Mailing Address 701 Lakeridge Cove			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60523.C7885
	Clinton	MS	39056	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		275.00
	Name of Employer Self	Occupation	n	In-Kind
	Receipt For: 2006	Attorney Flection C	Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	Licction		Fundraising Expense
	Other (specify)	0 0	275.00	J Tanasas y Espain
s	UBTOTAL of Receipts This Page (optional)			2775.00
т	OTAL This Period (last page this line number	only)		
		~· ·· y / · · · · · · · · · · · · · · · ·	······································	

SCHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 / 146 (check only one)
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may r	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Full Name (Last, First, Middle Initial) Carolyn Jordan Mailing Address 1702 Leighton Wood Leighton City Silver Spring FEC ID number of contributing federal political committee. Name of Employer	State MD C Occupation	Zip Code 20910	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cyc	cle-to-Date ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Lenin Juarez Mailing Address 14007 Perthsire			Date of Receipt 05 17 2006
City Houston	State TX	Zip Code 77079	Transaction ID: 60519.C7787
FEC ID number of contributing federal political committee.	C	77079	Amount of Each Receipt this Period 1000.00
Name of Employer Self Receipt For: 2006 X Primary General Other (specify) ▼	Occupation Attorney Election Cyc	cle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) James Kitchens Mailing Address 610 North Street			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 60519.C7691
Jackson FEC ID number of contributing federal political committee.	MS C	39202-3116	Amount of Each Receipt this Period 500.00
Name of Employer Self Receipt For: 2006 X Primary General Other (specify) ▼	Occupation Attorney Election Cyc	cle-to-Date ▼ 600.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)			2000.00
TOTAL This Period (last nage this line number of	only)		

S	CHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 19 / 146
	EMIZED RECEIPTS	,	or each category of the	(check only one)
• • • • • • • • • • • • • • • • • • • •	EIVIIZED RECEIP I 3		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and for commercial purposes, other than using	d Statements may the name and add	r not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\geq	Friends of Bennie Thompson			
A.	Full Name (Last, First, Middle Initial) Ronald Klink			Date of Receipt
	Mailing Address 3410 Lashan Dr.			04 07 2006
	City	State	Zip Code	Transaction ID: 60410.C7597
	Murrysville	PA	15668	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	1	Receipt
	Self	Consulta	nt	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	' '	500.00	7
	Other (specify) ▼	0 0	300.00	
В.	Full Name (Last, First, Middle Initial) Al Levy			Date of Receipt
	Mailing Address 1528 Lakeside Drive	05 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	y State Zip Code		
	Jackson	MS	39216	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	1	In-Kind
		Retired		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 0.3.0. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		500.00	Fundraising Expense
<u> </u>	Full Name (Last, First, Middle Initial) Brenda Liston			Date of Receipt
	Mailing Address P.O. Box 645	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 60519.C7664
	Winona	MS	38967	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2100.00
	Name of Employer	Occupation	1	Receipt
	. .	Homema		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	2100.00	
s	UBTOTAL of Receipts This Page (optional)		3100.00
	OTAL This Period (last page this line numb			

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 20 / 146			
ITEMIZED RECEIPTS		or each category of the	(check only one)				
•			Detailed Summary Page	X 11a 11b 11c 11d 15 15 15 16 17 18 17 18 18 18 18 18			
Ar	y information copied from such Reports and Statements	its may	not be sold or used by any perso				
or	for commercial purposes, other than using the name an	nd add	ress of any political committee to	solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
	Friends of Bennie Thompson						
_	Full Name (Last, First, Middle Initial)			Patrick Provide			
Α.	William Liston Mailing Address P.O. Box 645			Date of Receipt			
				04 28 2006			
	City Stat		Zip Code	Transaction ID: 60519.C7663			
	Winona MS	<u> </u>	38967	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			2100.00			
	Name of Employer Occu	upatior	1	Receipt			
	Self Attor	rney		Limit Increased Due to Opponent's			
		ction C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General		2100.00				
	Other (specify) ▼	0					
— В.	Full Name (Last, First, Middle Initial) Emil L. Lovely			Date of Receipt			
	Mailing Address 405 McKinley Street			0 4 2 8 2 0 0 6			
	City Stat	ate	Zip Code	Transaction ID: 60519.C7675			
	<u>Starkville</u> MS	<u>S</u>	39759	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			300.00			
	Name of Employer Occu	upatior	1	Receipt			
	Salt	iness		Limit Increased Due to Opponent's			
		ction C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General		300.00				
	Other (specify) ▼	0	000.00				
C.	Full Name (Last, First, Middle Initial) Lawrence Marshall			Date of Receipt			
٠.	Mailing Address 3618 Elmcrest Dr.			M " M / D " D / Y " Y " Y " Y			
	0''	-1-	7'- 0-1-	05 17 2006			
	City Stat Houston TX		Zip Code 77088	Transaction ID: 60519.C7825 Amount of Each Receipt this Period			
	FFC ID number of contribution		77000				
	federal political committee.	L.		500.00			
	Name of Employer Occu	upatior	1	Receipt			
	Houston Independent School	•	ndent	Limit Increased Due to Opponent's			
			ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General		F00.00	1			
	Other (specify) ▼	0	500.00				
	LIDTOTAL of Descripto This Descriptionally			2900.00			
	UBTOTAL of Receipts This Page (optional)		······				
Т	TOTAL This Period (last page this line number only)						

S	CHEDULE A (FEC Form 3)	Llas congreta cohodulo(s)	FOR LINE NUMBER: PAGE 21 / 146
	EMIZED RECEIPTS	'	Use separate schedule(s) or each category of the	(check only one)
•••	EIVIIZED RECEIP I 3		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and for commercial purposes, other than using t	d Statements may the name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Friends of Bennie Thompson			
A.	Full Name (Last, First, Middle Initial) Deborah McDonald			Date of Receipt
	Mailing Address P.O. Box 2038		71.0	05 17 2006
	City	State	Zip Code	Transaction ID: 60519.C7798
	Natchez	MS	39120	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	<u> </u>	
	Self	Attorney		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	tycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	' '	500.00	7
	Other (specify) ▼	0 0	300.00	1
	Full Name (Last, First, Middle Initial)			5. 75 1.
В.				Date of Receipt
	Mailing Address P.O. Box 24	04 28 2006		
	City	State	Zip Code	Transaction ID: 60519.C7681
	Anguilla	MS	38721	Amount of Each Receipt this Period
	FEC ID number of contributing			500.00
	federal political committee.	C		300.00
	Name of Employer	Occupation	า	- Receipt
	Bank of Anguilla	Banker	ı	Limit Increased Due to Opponent's
	Receipt For: 2006		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	1	· · · · · · · · · · · · · · · · · · ·	7
	Other (specify) ▼		1000.00	
C.	Full Name (Last, First, Middle Initial) Doug Minor			Date of Receipt
	Mailing Address P.O. Box 22725	05 12 2006		
	City	State	Zip Code	Transaction ID: 60523.C7886
	Jackson	MS	39225	Amount of Each Receipt this Period
	FEC ID number of contributing			075.00
	federal political committee.	C		275.00
	Name of Employer	Ossupation	•	In-Kind
	Name of Employer Self	Occupation Attorney	I	Limit Increased Due to Opponent's
	Receipt For: 2006		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		yolo to Buto	Fundraising Expanse
	Other (specify) ▼		275.00	Fundraising Expense
_	·			
		-		
s	UBTOTAL of Receipts This Page (optional))		1275.00
Т				
Ιт	OTAL This Period (last page this line numb	er only)		

SCHEDULE A (FEC Form	3)	Llas asparata asbadula(s)	FOR LINE NUMBER: PAGE 22 / 146
ITEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 11d
-		Detailed Summary Page	12 13a 13b 14 15
Any information copied from such Repor or for commercial purposes, other than u	s and Statements may sing the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Friends of Bennie Thompson			
Full Name (Last, First, Middle Initial) Betty Mitchell			Date of Receipt
Mailing Address 1774 East Azale	ea Dr.		05 17 2006
City	State	Zip Code	Transaction ID: 60519.C7748
Greenville	MS	38701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Self	Occupation	n	Receipt
	Business		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 X Primary General	Election C	Cycle-to-Date ▼	
Other (specify) ▼	0 0	500.00	
Full Name (Last, First, Middle Initial) 3. James Mitchell	L		Date of Receipt
Mailing Address 9 Lake Barnett I	Or.		05 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 60519.C7689
Brandon	MS	39047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Realty Mortgage Corporati-	Occupation		Receipt
<u>on</u>	Loan Original	ginator Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 X Primary General	Liection		1
Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Charles Myers			Date of Receipt
Mailing Address 110 Windrush E			05 / 05 / 2006
City	State	Zip Code	Transaction ID: 60519.C7690
FIOWOOD FEC ID number of contributing	MS	39232	Amount of Each Receipt this Period
federal political committee.	C		1500.00
Name of Employer Realty Mortgage Corporati-	Occupation		Receipt Limit Increased Due to Opponent's
on Receipt For: 2006	Loan Offi Election C	cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General			7
Other (specify) ▼		1500.00	
SUBTOTAL of Receipts This Page (opt	ional)		2500.00
TOTAL This Period (last page this line	number entry		
I O I AL I I III S FEITOU (Tast page tris line	number omy)		

SC	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 / 146
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 11d
			Detailed Summary Page	12 13a 13b 14 15
Ang or f	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	Friends of Bennie Thompson			
	Full Name (Last, First, Middle Initial) Willie Nelson			Date of Receipt
	Mailing Address 3889 Robertson Road			04 28 2006
	City	State	Zip Code	Transaction ID: 60519.C7672
	Nesbit	MS	38651	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	1	Receipt
	Self	Business	man	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		1000.00	
	Full Name (Last, First, Middle Initial) Dora Olivo			Date of Receipt
	Mailing Address P.O. Box 517	05 17 2006		
	City	State	Zip Code	Transaction ID: 60519.C7826
	Richmond	TX	77406	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00 Receipt
	Name of Employer Texas House of Representa-	Occupation		'
	tives	·	oresentative	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General	Election C	tycle-to-Date ▼	Spanding (2 states 1114(1) 1114 1)
	Other (specify)		500.00	
	Full Name (Last, First, Middle Initial) S. Levon Owens			Date of Receipt
	Mailing Address P.O. Box 21			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60519.C7697
	Terry	MS	39170	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	1	Receipt
	Self	Farmer		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		500.00	
SI	JBTOTAL of Receipts This Page (optional)			2000.00
т/	OTAL This Period (last page this line number of	nlv)		

S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 24 / 146
	EMIZED RECEIPTS		or each category of the	(check only one)
•••	EIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 11d
				12 13a 13b 14 15
Ar or	ny information copied from such Reports and for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Friends of Bennie Thompson			
A.				Date of Receipt
	Mailing Address 2525 Richton			05 17 2006
	City	State	Zip Code	Transaction ID: 60519.C7841
	Houston	TX	77098	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2100.00
	Name of Employer	Occupation	<u> </u>	Receipt
	Home Furnishing	Owner		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	tycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		2100.00	7
	Other (specify)	0 0	2100.00	
_	Full Name (Last, First, Middle Initial)			Data of Baselist
В.				Date of Receipt
	Mailing Address 3617 Blakeford Ct.	04 07 2006		
	City	State	Zip Code	Transaction ID: 60410.C7601
	Marietta	GA	30062	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer	Occupation	า	Receipt
	GOS Engineers		Engineer	Limit Increased Due to Opponent's
	Receipt For: 2006		tycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	-		7
	Other (specify) ▼	0 0	250.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) Marc Pearl	-		Date of Receipt
	Mailing Address 4507 Verplanck Place	NW		0 4 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60410.C7599
	Washington	DC	20016	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer	Occupation	 1	Receipt
	IT Policy Solutions, LLC	Attorney		Limit Increased Due to Opponent's
	Receipt For: 2006		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	-	050.00	7
	Other (specify) ▼		250.00	
5	UBTOTAL of Receipts This Page (optional) .			2600.00
\vdash				
Ιт	OTAL This Period (last page this line numbe	r onlv)		

	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 25 / 146 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 11d 11d 12 13a 13b 14 15
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Α.	Full Name (Last, First, Middle Initial) Acie Phillips Mailing Address 3610 Elms Ct.			Date of Receipt
	City	State	Zip Code	0 5 1 7 2 0 0 6 Transaction ID: 60519.C7837
	Missouri City	TX	77459	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Self	Occupatio Entrepre		Receipt Limit Increased Due to Opponent's
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) Charles Pickett, Jr.	1		Date of Receipt
	Mailing Address 4039 Dry Grove Road	04 / 28 / Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 60519.C7666
	Terry	MS	39170	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2025.00 Receipt
	Name of Employer Self	Occupatio Business	man	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 2025.00	
) .	Full Name (Last, First, Middle Initial) Charles Pickett, Sr.			Date of Receipt
	Mailing Address 4039 Dry Grove Road			04 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Terry	State MS	Zip Code 39170	Transaction ID: 60519.C7665 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2100.00
	Name of Employer	Occupatio Retired		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 2100.00	
S	UBTOTAL of Receipts This Page (optional)			5125.00
T	OTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 146 (check only one) X
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
3.	Full Name (Last, First, Middle Initial) Brad Pigott Mailing Address 1217 Pinehurst Street City Jackson FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2006 X Primary General Other (specify) Full Name (Last, First, Middle Initial) Matthew Plummer Mailing Address 2101 Crawford, Suite 2 City Houston FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2006 X Primary General Other (specify) General Other (specify) Full Name (Last, First, Middle Initial) Steven Pruitt Mailing Address 420 7th Street, NW, Ap	State TX C Occupation Dentist Election C	Zip Code 77002	Date of Receipt M
	City	State	Zip Code	Transaction ID: 60519.C7701
	Washington FEC ID number of contributing federal political committee.	C	20004	Amount of Each Receipt this Period 250.00 Receipt
	Name of Employer The Pruitt Group Receipt For: 2006 X Primary General Other (specify)		n s Manager Cycle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SI	UBTOTAL of Receipts This Page (optional)			2825.00
T	OTAL This Period (last page this line number o	nlv)		

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 27 / 146
TEMIZED RECEIPTS		or each category of the	(check only one)
· · · · · · · · · · · · · · · · · · ·		Detailed Summary Page	X 11a 11b 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	not be sold or used by any person of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	the hame and add	arood or arry pointion to the	y constructions from each committee.
Friends of Bennie Thompson			
Full Name (Last, First, Middle Initial) Asaf Qadeer			Date of Receipt
Mailing Address 8660 Memorial Dr.			05 17 2006
City	State	Zip Code	Transaction ID: 60519.C7842
Houston	TX	77024	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Self	Occupation		Receipt
	Physician		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 X Primary General	Election C	Cycle-to-Date ▼	
Other (specify) ▼	0 0	1000.00	
Full Name (Last, First, Middle Initial) 3. Carlton W. Reeves			Date of Receipt
Mailing Address P.O. Box 22725			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 60523.C7884
Jackson	MS	39202	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		275.00
Name of Employer Self	Occupation	n	In-Kind
	Attorney		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 X Primary General	Election C	Cycle-to-Date ▼	
Other (specify) ▼		275.00	Fundraising Expense
Full Name (Last, First, Middle Initial) James Robertson			Date of Receipt
Mailing Address 1721 Piedmont Stre	eet		05 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 60519.C7771
<u>Jackson</u>	MS	39202	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Wise, Carter, Child & Car-	Occupation	n	Receipt
away, Receipt For: 2006	Attorney	Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General	Election	Cycle-to-Date ▼	1
Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page (optional	l)		1525.00
		•	
TOTAL This Period (last page this line num	ber only)		

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 28 / 146		
TEMIZED RECEIPTS	or each category of the	(check only one)		
	Detailed Summary Page	X 11a 11b 11c 11d 12 13a 13b 14 15		
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam	nents may not be sold or used by any person	n for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full)	o and address of any pointed committee to	constitution of the contraction		
Friends of Bennie Thompson				
Full Name (Last, First, Middle Initial) A. Armando Rodriquez		Date of Receipt		
Mailing Address 1001 Macario Garcia		05 17 2006		
City	State Zip Code	Transaction ID: 60519.C7824		
Houston	TX 77011	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	500.00		
Harris County	Occupation udge	Receipt Limit Increased Due to Opponent's		
	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)		
X Primary General Other (specify) ▼	500.00			
Full Name (Last, First, Middle Initial) Lisa Ross		Date of Receipt		
Mailing Address P.O. Box 11264	05 17 YYYY 2006			
City	State Zip Code	Transaction ID: 60519.C7765		
<u>Jackson</u>	MS 39283	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	750.00		
Self	Occupation	Receipt		
	attorney	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Receipt For: 2006 X Primary General	Election Cycle-to-Date ▼	, , , ,		
Other (specify) ▼	750.00			
Full Name (Last, First, Middle Initial) C. Solon Scott		Date of Receipt		
Mailing Address 102 Main Street		0 4		
City	State Zip Code	Transaction ID: 60412.C7648		
Itta Bena	MS 38941	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	500.00 Receipt		
Name of Employer C	of Employer Occupation			
	Petroleum Distributor	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Receipt For: 2006 E	Election Cycle-to-Date ▼	oponomig (2 o.o.o. Tria(i) Tria T)		
Other (specify) ▼	500.00			
SUBTOTAL of Receipts This Page (optional)		1750.00		
TOTAL This Period (last page this line number only)				

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 146 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 15
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Α.	Full Name (Last, First, Middle Initial) Muhammad Shaikh Mailing Address 11327 Bissonnet St. City Houston FEC ID number of contributing federal political committee. Name of Employer Self	State TX C	Zip Code 77099	Date of Receipt M M D D 2 0 0 6
	Receipt For: 2006 X Primary General Other (specify)	Entrepred Election C	neur Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) Ali Soujani Mailing Address 13118 Barry Knoll Lar	ie		Date of Receipt M
	City	State	Zip Code	Transaction ID: 60519.C7821
	Houston FEC ID number of contributing federal political committee.	C	77079	Amount of Each Receipt this Period 500.00
	Name of Employer Apple Finance Company Receipt For: 2006 X Primary General Other (specify) Other (specify)		n nd Operator Cycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
D .	Full Name (Last, First, Middle Initial) Derek Starling Mailing Address 179 Williams Road			Date of Receipt
	City	State	Zip Code	0 5 1 1 2 0 0 6 Transaction ID: 60519.C7706
	Canton	MS	39046	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self Receipt For: 2006 X Primary General Other (specify) ▼	Occupation Business Election C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
S	UBTOTAL of Receipts This Page (optional))	2000.00
т	OTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 30 / 146 (check only one) X 11a 11b 11c 11d
			Detailed Summary Page	X 11a 11b 11c 11d 12 13a 13b 14 15
Ar or	ny information copied from such Reports and Stor commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Friends of Bennie Thompson			
A.	Full Name (Last, First, Middle Initial) Sylvester Turner			Date of Receipt
	Mailing Address 440 Louisiana St., Su	te 1880		05 17 2006
	City	State	Zip Code	Transaction ID: 60519.C7838
	Houston	TX	77002	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	n	Receipt
	Self	Attorney		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General	Election C	Cycle-to-Date ▼	Sportaling (2 0.0.0. 4414(1)/4414 1)
	Other (specify)		1000.00	
— В.	Full Name (Last, First, Middle Initial) Cleve Walker			Date of Receipt
	Mailing Address P.O. Box 19163			0 4 2 8 2 0 0 6
	City	State	Zip Code	Transaction ID: 60519.C7686
	Chicago	<u> </u>	60619	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	n	Receipt
		Retired		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General	Election C	Cycle-to-Date ▼	openang (2 energy rena()) rena ()
	Other (specify) ▼		1000.00	
<u> </u>	Full Name (Last, First, Middle Initial) Edward Williamson	1		Date of Receipt
	Mailing Address P.O. Box 588			05 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60519.C7791
	Philadelphia	MS	39350	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	n	Receipt
	Self	Attorney		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Speriding (2 0.3.0. 441a(1)/441a-1)
	X Primary General Other (specify) ▼		500.00	
s	UBTOTAL of Receipts This Page (optional) .	1		2500.00
Н	OTAL This Period (last page this line number			

IT	CHEDULE A (FEC Form 3 EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 146 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 15
An or	y information copied from such Reports and for commercial purposes, other than using t	I Statements may he name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Α.	Full Name (Last, First, Middle Initial) Chris Wilmot Mailing Address 3610 Cherry Forest City Houston FEC ID number of contributing federal political committee. Name of Employer WCW International, Inc.	State TX C Occupatio	Zip Code 77088	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	WCW Internatiónal, Inc. Receipt For: 2006 X Primary General Other (specify) ▼	Executive		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) Jimmie Wilson Mailing Address 521-523 Plaza Stree	t		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60519.C7669
	West Helena FEC ID number of contributing federal political committee.	AR C	72390	Amount of Each Receipt this Period 350.00
	Name of Employer Self Receipt For: 2006 X Primary General Other (specify) ▼	Occupation Attorney Election C	Cycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Э.	Full Name (Last, First, Middle Initial) Ocie Windham			Date of Receipt
	Mailing Address 20845 Brookside Blv	′d.		04 28 2006
	City Olympia Fields	State II	Zip Code 60461	Transaction ID: 60519.C7673 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00401	1000.00
	Name of Employer Self Receipt For: 2006 X Primary General Other (specify) ▼	Occupation Business Election C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)	·)	2350.00
T	OTAL This Period (last page this line numb	er only)		

FOR LINE NUMBER: PAGE 32 / 146 SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c Detailed Summary Page 12 13a 13b 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Friends of Bennie Thompson Full Name (Last, First, Middle Initial) A. Edward Wood Date of Receipt Mailing Address 1917 Pleasure Street 05 17 2006 City State Zip Code Transaction ID: 60519.C7855 New Orleans LA 70122 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Receipt Name of Employer Information Requested Occupation Not Provided Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2006 Election Cycle-to-Date X Primary General 1000.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	•	71425.00

_				FOR LINE NUMBER. BACE 00 /440
S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 33 / 146 (check only one)
IT	EMIZED RECEIPTS		or each category of the	
• •	LIVIIZED ITEOLII 10		Detailed Summary Page	11a 11b X 11c 11d
				12 13a 13b 14 15
An	y information copied from such Reports and S	tatements ma	y not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and ad	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\rangle	Friends of Bennie Thompson			
_				
_	Full Name (Last, First, Middle Initial)			
٩.	ACCENTURE PAC			Date of Receipt
	Mailing Address 800 Connecticut Avenu	ie, NW, Ste	. 6	M M / D D / Y Y Y Y
				04 07 2006
	City	State	Zip Code	Transaction ID: 60410.C7602
	Washington	DC	20006	Amount of Each Receipt this Period
	FEC ID number of contributing			1000.00
	federal political committee.	C		1000.00
				Receipt
	Name of Employer	Occupatio	n	'
		<u> </u>		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Sponding (2 0.0.0. 441a(1)/441a 1)
	X Primary General		2000.00	1
	Other (specify)		2000.00	
	Full Name (Last, First, Middle Initial)			
3.	Action Comm. for Rural Electrification			Date of Receipt
	Mailing Address National Rural Electric Coop. Asso			M M / D D / Y Y Y Y
	4301 Wilson Blvd.			05 11 2006
	City	State	Zip Code	Transaction ID: 60519.C7717
	Arlington	VA	22203-1860	Amount of Each Receipt this Period
	FEC ID number of contributing			0000.00
	federal political committee.	C		2000.00
		_		Receipt
	Name of Employer	Occupatio	n	
		,		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Sportaling (2 S.S.S. Tria(t)/ Tria Ty
	X Primary General		5000.00	1
	Other (specify) ▼	0 0	3000.00	
	Full Name (Last, First, Middle Initial)			1 5. (5
j.	AFT-COPE			Date of Receipt
	Mailing Address 555 New Jersey Ave.,	N.W.		04 07 2006
	011	01-1-	7's Os da	
	City	State	Zip Code	Transaction ID: 60410.C7632
	Washington	DC	20001	Amount of Each Receipt this Period
	FEC ID number of contributing	С		5000.00
	federal political committee.			0000.00
	Name of Employer	Occupatio	n	Receipt
	Name of Employer	Occupatio	!!	Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Cycle to Date -	Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 Primary X General	LIECTION	Cycle-to-Date ▼	
	Other (specify)		10000.00	
	Other (apochiy) \		1 1 1 1 1 1 1	1
_	UDTOTAL of Descripto Till Descriptor			8000.00
S	UBTOTAL of Receipts This Page (optional)		······	
_				
T	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC For	m 3)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 146 (check only one) 11a 11b X 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Rep or for commercial purposes, other than	orts and Statements ma using the name and ad	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Full Name (Last, First, Middle Initial Altria Group, Inc. PAC Mailing Address 101 Constitut City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify)	on Avenue, NW State DC C Occupation	Zip Code 20001 Driver and the state of the	Date of Receipt M M M O 7 2 0 0 6 Transaction ID: 60410.C7620 Amount of Each Receipt this Period 1000.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial American College of Surgeons Mailing Address Professional A 1640 Wiscons City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify)	Assoc. PAC sin Avenue, NW State DC C Occupation	Zip Code 20007 Dycle-to-Date ▼ 1500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initia American Crystal Sugar Company PA Mailing Address 101 North Thi City Moorhead FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify)	C rd St. State MN C Occupation	Zip Code 56560 on Cycle-to-Date ▼	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)		3500.00
TOTAL This Period (last page this lir	e number only)	I	

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 146 (check only one) 11a 11b X 11c 11d 11d 13b 14 15
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Α.	Full Name (Last, First, Middle Initial) American Gaming Associations PAC Mailing Address 555 13th St. NW, Ste. 1 City Washington FEC ID number of contributing federal political committee. Name of Employer	O10 East State DC C Occupatio	Zip Code 20004	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: 2006 X Primary General Other (specify)	,	Cycle-to-Date ▼ 2000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) American Society of Travels Agents PAC Mailing Address 1101 King Street, Suite City	200 State	Zip Code	Date of Receipt M M
	<u>Alexandria</u>	VA	22314	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00 Receipt
	Name of Employer Receipt For: 2006 X Primary General Other (specify) ▼	Occupation C	Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
D .	Full Name (Last, First, Middle Initial) American Sugarbeet Growers Assn. PAC Mailing Address 1156 15th St., NW, Suite 1101		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: 60519.C7714
	Washington	DC	20005-1704	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006 Primary X General Other (specify)	Election C	Cycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)
S	UBTOTAL of Receipts This Page (optional)			2500.00
т	OTAL This Period (last page this line number o	nlv)		

			BAOE
SCHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 36 / 146
ITEMIZED RECEIPTS		or each category of the	(check only one)
I EWIZED RECEIP 13		Detailed Summary Page	11a 11b X 11c 11d
		, ,	12 13a 13b 14 15
Any information copied from such Reports and Sta	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Friends of Bennie Thompson			
/			
Full Name (Last, First, Middle Initial)			
A. APFA PAC			Date of Receipt
Mailing Address 1004 W. Euless Blvd.			M M / D D / Y Y Y
			05 11 2006
City	State	Zip Code	Transaction ID: 60519.C7704
Euless	TX	76040	Amount of Each Receipt this Period
FEC ID number of contributing			050.00
federal political committee.	C		350.00
·			Receipt
Name of Employer	Occupation	n	'
			Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006	Election C	cycle-to-Date ▼	Spending (2 0.5.0. 441a(I)/441a-1)
X Primary General		600.00	1
Other (specify)		600.00	
Full Name (Last, First, Middle Initial)			
AT&T, Inc. Federal PAC			Date of Receipt
Mailing Address 175 E. Houston, Room	7-A-50		M M / D D / Y Y Y Y
			04 07 2006
City	State	Zip Code	Transaction ID: 60410.C7606
San Antonio	TX	78205	Amount of Each Receipt this Period
FEC ID number of contributing	С		1000.00
federal political committee.			1000.00
Name of Employer	Occupation	2	Receipt
Name of Employer	Occupation	11	Limit Increased Due to Opponent's
Receipt For: 2006	Floation C	Sycle-to-Date V	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General	Election	Sycle-to-Date ▼	
Other (specify)	' '	1000.00	
Other (specify)	0 0		
Full Name (Last, First, Middle Initial)			
C. ATLA PAC			Date of Receipt
Mailing Address 1050 31st Street, N.W.			M M / D D / Y Y Y Y
1030 3131 311 661, 14.44.			04 07 2006
City	State	Zip Code	Transaction ID: 60410.C7629
Washington	DC	20007	Amount of Each Receipt this Period
•			
FEC ID number of contributing federal political committee.	C		1000.00
			Desaint
Name of Employer	Occupation	n	Receipt
			Limit Increased Due to Opponent's
Receipt For: 2006	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
Primary X General		7000 00	1
Other (specify)		7000.00	
SUBTOTAL of Receipts This Page (optional)			2350.00
,		_	
TOTAL This Period (last page this line number of	nly)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37/146 (check only one)
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	/ not be sold or used by any perso	on for the purpose of soliciting contributions
or	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson	патте апо аос	ness or any pontical committee to	o Solicit contributions from Such committee.
Α.	Full Name (Last, First, Middle Initial) ATLA PAC Mailing Address 1050 31st Street, N.W.			Date of Receipt
	City Washington	State DC	Zip Code 20007	Transaction ID: 60519.C7784 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		3000.00
	Name of Employer Receipt For: 2006 X Primary General Other (specify) ▼	Occupation C	ycle-to-Date ▼ 10000.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
В.	Full Name (Last, First, Middle Initial) BANKPAC Mailing Address 1120 Connecticut Ave,	NW		Date of Receipt 0 4 2 8 2 0 0 6
	City Washington	State DC	Zip Code 20036	Transaction ID: 60519.C7685 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00 Receipt
	Name of Employer Receipt For: 2006 X Primary General Other (specify) ▼	Occupation Election C	cycle-to-Date ▼ 3000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C.	Full Name (Last, First, Middle Initial) Baxter Healthcare PAC Mailing Address 800 Connecticut Avenu	e NW		Date of Receipt
	City	State	Zip Code	0 4 0 7 2 0 0 6 Transaction ID: 60410.C7613
	Washington FEC ID number of contributing federal political committee.	C	20006	Amount of Each Receipt this Period 1000.00
	Name of Employer Receipt For: 2006	Occupation C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General Other (specify) ▼	Liection	tycle-to-Date ▼	
s	UBTOTAL of Receipts This Page (optional))	5000.00
Т	OTAL This Period (last page this line number of	only)		

	HEDULE A (FEC Form 3) MIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 146 (check only one) 11a 11b X 11c 11d 11d 12 13a 13b 14 15
Any ir or for	nformation copied from such Reports and commercial purposes, other than using the	Statements may ne name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
1	AME OF COMMITTEE (In Full) riends of Bennie Thompson			
A. Be Ma	Ill Name (Last, First, Middle Initial) IllSouth Corporation Employees FED-PAC ailing Address 1155 Peachtree St., Noty Ity Ity Itanta In Ity	State GA C	Zip Code 30309	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
At PE FE FE RE	Il Name (Last, First, Middle Initial) ellSouth Corporation Employees FED-PAC ailing Address 1155 Peachtree St., Note ty clanta EC ID number of contributing deral political committee. ame of Employer ecceipt For: 2006 X Primary General Other (specify)	State GA C	Zip Code 30309	Date of Receipt M
Cit At FE fec	Il Name (Last, First, Middle Initial) Il South Corporation Employees FED-PAC ailing Address 1155 Peachtree St., Note It is a second of the sec	State GA C Occupation	Zip Code 30309 n Cycle-to-Date ▼	Date of Receipt M M
SUB	TOTAL of Receipts This Page (optional)			5000.00
тот	AL This Period (last page this line numbe	er only)		

S	CHEDULE A (FEC Form 3)		lles secondo estadole/e)	FOR LINE NUMBER: PAGE 39 / 146
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 11d
				12 13a 13b 14 15
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)				
	Friends of Bennie Thompson			
A.				Date of Receipt
	Mailing Address 1200 Wilson Blvd.			04 07 2006
	City	State	Zip Code	Transaction ID: 60410.C7621
	Arlington	VA	22209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2500.00
	Name of Employer	Occupation	1	Receipt
	Receipt For: 2006	Flection C	ycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General			7
	Other (specify) ▼	0 0	3500.00	
В.	Full Name (Last, First, Middle Initial) Brotherhood of Railroad Signalmen PAC			Date of Receipt
	Mailing Address 917 Shenandoah Shor	04		
	City	State	Zip Code	Transaction ID: 60410.C7607
	Front Royal	VA	22630	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		2000.00	1
			0 0 0 0 0 0 0	
C.	Full Name (Last, First, Middle Initial) Cisco Systems, Inc. Federal PAC			Date of Receipt
	Mailing Address 20 Park Road Suite E			04
	City	State	Zip Code	Transaction ID: 60410.C7619
	Burlingame	CA	94010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	١	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		2000.00	
ء	UBTOTAL of Receipts This Page (optional)			4500.00
۲	ODITAL OF HOSSIPIO THIS F AGO (OPTIONAL)			
T	OTAL This Period (last page this line number	only)		

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	CHEDULE A (FEC Form 3)	Osc scharate scriedale(s)		FOR LINE NUMBER: PAGE 40 / 146 (check only one)
ITI	EMIZED RECEIPTS		or each category of the Detailed Summary Page	11a 11b X 11c 11d 11d 12 13a 13b 14 15
Any or f	y information copied from such Reports and S for commercial purposes, other than using the	Statements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , , ,	
١.	Friends of Bennie Thompson			
	Full Name (Last, First, Middle Initial) Committee on Letter Carriers			Date of Receipt
	Mailing Address Political Education 100 Indiana Avenue, N	I.W.		05 11 2006
	City	State	Zip Code	Transaction ID: 60519.C7718
	Washington	DC	20001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		3000.00
	Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		5000.00	1
	Other (specify) ▼	0 0		
_	Full Name (Last, First, Middle Initial) Committee on Political Action of the			Date of Receipt
	Mailing Address American Postal Work 1300 L St., NW, Suite		AFL	05 11 2006
	City	State	Zip Code	Transaction ID: 60519.C7722
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1500.00
	Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		7500.00	
_	Full Name (Last, First, Middle Initial) Committee on Political Action of the	<u> </u>		Date of Receipt
	Mailing Address American Postal Work 1300 L St., NW, Suite		AFL	M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
	City	State	Zip Code	Transaction ID: 60519.C7723
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2500.00
	Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General		10000.00	1
	Other (specify) ▼	0 0	0 0 0 0 0 0 0	
SI	JBTOTAL of Receipts This Page (optional)			7000.00
тс	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3)

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 146 (check only one) 11a 11b X 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Full Name (Last, First, Middle Initial) Congressman G. K. Butterfield Mailing Address P.O. Box 2571 City Wilson FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify)	State NC C Occupation Election C	Zip Code 27894 n Cycle-to-Date ▼	Date of Receipt M M M
Full Name (Last, First, Middle Initial) COPE PCC Mailing Address 815 16th Street, N. City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)	State DC C	Zip Code 20006 n Cycle-to-Date ▼ 8500.00	Date of Receipt M M M O 7 2006 Transaction ID: 60410.C7604 Amount of Each Receipt this Period 5000.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) CWA-COPE PCC Mailing Address 501 3rd St., NW City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)	State DC C Occupation Election C	Zip Code 20001 n Sycle-to-Date ▼	Date of Receipt O 4 O 7 2 0 0 6 Transaction ID: 60410.C7608 Amount of Each Receipt this Period 1000.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional	al)		7000.00
TOTAL This Period (last page this line num	nber only)		

SCHEDULE A (FEC Form 3)	Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 42 / 146 (check only one)
ITEMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Full Name (Last, First, Middle Initial) A. Deloitte & Touche Federal PAC			Date of Receipt
Mailing Address P.O. Box 365			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 60410.C7610
Washington	DC	20044	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's
Receipt For: 2006	Election C	Sycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) Democracy For America	I		Date of Receipt
Mailing Address P.O. Box 8313			04 11 2006
City	State	Zip Code	Transaction ID: 60412.C7650
Burlington	VT	05402-8313	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00 Receipt
Name of Employer	Occupation		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 X Primary General	Election C	cycle-to-Date ▼	Spending (2 0.3.0. 441a(1)/441a-1)
Other (specify)		1000.00	
Full Name (Last, First, Middle Initial) DEPAC			Date of Receipt
City	State	Zip Code	Transaction ID: 60410.C7626
Kansas City	MO	64153	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		Receipt
Name of Employer	Occupation		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 X Primary General	Election C	cycle-to-Date ▼	Sponding (2 0.0.0. 4414(1)/4414 1)
Other (specify)		3000.00	
SUBTOTAL of Receipts This Page (optional	l)		3000.00
TOTAL This Period (last page this line num		<u> </u>	

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 146 (check only one) 11a 11b X 11c 11d 11d 12 13a 13b 14 15
An or	y information copied from such Reports and Si for commercial purposes, other than using the	atements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Α.	Full Name (Last, First, Middle Initial) Diamler Chrysler Corp Pol Support Cmte Mailing Address 1000 Chrysler Drive, C City Auburn Hills FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify) •	State MI C Occupation	Zip Code 48326	Date of Receipt M M
3.	Full Name (Last, First, Middle Initial) ENPAC Mailing Address 425 West Capitol Ave., City Little Rock	Suite 40B State AR	Zip Code 72203	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify)	Occupation Election C	on Sycle-to-Date ▼ 6000.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
D.	Full Name (Last, First, Middle Initial) Farm Credit Council PAC Mailing Address 50 F Street, NW Suite City Washington FEC ID number of contributing federal political committee. Name of Employer FEC ID# C00193631 Receipt For: 2006 X Primary General Other (specify)	State DC C	Zip Code 20001	Date of Receipt M M
S	UBTOTAL of Receipts This Page (optional)		······•	3500.00
T	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Use separate schedule(s) or each category of the Detailed Summary Page Italia	15
Detailed Summary Page 11a] 15
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Friends of Bennie Thompson Full Name (Last, First, Middle Initial) A. Farm Credit Council PAC Mailing Address 50 F Street, NW Suite 900 City State Zip Code Washington DC 20001 FEC ID number of contributing federal political committee. Name of Employer FEC ID# C00193631 Receipt For: 2006 X Primary General Other (specify) ▼ Any information roused by any person for the purpose of soliciting contributions or for the purpose of soliciting contributions from such committee. Date of Receipt Transaction ID: 60519.C7709 Amount of Each Receipt this Period Fec ID# C00193631 Receipt For: 2006 X Primary General Other (specify) ▼ Afon.00]
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Friends of Bennie Thompson Full Name (Last, First, Middle Initial) A. Farm Credit Council PAC Mailing Address 50 F Street, NW Suite 900 City Washington FEC ID number of contributing federal political committee. Name of Employer FEC ID# C00193631 Receipt For: 2006 X Primary General Other (specify) ▼ Amount of Each Receipt this Period Receipt Fec in the name and address of any political committee to solicit contributions from such committee. Date of Receipt Transaction ID: 60519.C7709 Amount of Each Receipt this Period Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Friends of Bennie Thompson Full Name (Last, First, Middle Initial) A. Farm Credit Council PAC Mailing Address 50 F Street, NW Suite 900 City State Zip Code Washington DC 20001 FEC ID number of contributing federal political committee. Name of Employer FEC ID# C00193631 Receipt For: 2006 X Primary General Other (specify) Other (specify) Other (specify) Amount of Each Receipt First, Middle Initial) Date of Receipt Transaction ID: 60519.C7709 Amount of Each Receipt this Period Receipt Fec iD# C00193631 Feceipt For: 2006 X Primary General Other (specify) Amount of Each Receipt this Period Feceipt For: 2006 Amount of Each Receipt this Period Feceipt Spending (2 U.S.C. 441a(i)/441a-1)	
Full Name (Last, First, Middle Initial) Farm Credit Council PAC Mailing Address 50 F Street, NW Suite 900 City State Zip Code Washington DC 20001 FEC ID number of contributing federal political committee. Name of Employer FEC ID# C00193631 Receipt For: 2006 X Primary General Other (specify) Other (specify) Other (specify) Amount of Each Receipt Election Cycle-to-Date Amount of Each Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
A. Farm Credit Council PAC Mailing Address 50 F Street, NW Suite 900 City State Zip Code Washington DC 20001 FEC ID number of contributing federal political committee. Name of Employer FEC ID# C00193631 Receipt For: 2006 X Primary General Other (specify) ▼ Date of Receipt Transaction ID: 60519.C7709 Amount of Each Receipt this Period Election Cycle-to-Date ▼ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)]
City Washington PEC ID number of contributing federal political committee. Name of Employer FEC ID# C00193631 Receipt For: Z 006 X Primary Other (specify) ▼ State Zip Code Transaction ID: 60519.C7709 Amount of Each Receipt this Period Footbase Primary Spending (2 U.S.C. 441a(i)/441a-1)	
Washington DC 20001 FEC ID number of contributing federal political committee. 500.00 Name of Employer FEC ID# C00193631 Occupation Receipt For: 2006 X Primary General Other (specify) Other (specify) 4500.00 Amount of Each Receipt this Period Face Receipt this Period Face Receipt this Period Amount of Each Receipt this Period Face Receipt this Period Amount of Each Receipt this Period Face Receipt this Period Amount of Each Receipt this Period Face Receipt this Period Amount of Each Receipt this Period Face Receipt this Period Amount of Each Receipt this Period Face Receipt this Period Amount of Each Receipt this Period Face Receipt	
FEC ID number of contributing federal political committee. Name of Employer FEC ID# C00193631 Receipt For: 2006 X Primary General Other (specify) Other (specify) About 1500.00 C	
Name of Employer FEC ID# C00193631 Receipt For: 2006 X Primary General Other (specify) ▼ Cocupation Election Cycle-to-Date ▼ 4500.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID# C00193631 Receipt For: 2006 X Primary General Other (specify) ▼ Cccupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006	
X Primary General Other (specify) ▼ 4500.00	
Other (specify)	
· · · · · · · · · · · · · · · · · · ·	
Full Name (Last, First, Middle Initial) B. General Electric Company PAC Date of Receipt	
Mailing Address 1299 Pennsylvania Ave., NW, Ste. 1]
City State Zip Code Transaction ID: 60410.C7625	
Washington DC 20004 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	
Name of Employer Occupation Receipt	
FEC ID# C00024869 Limit Increased Due to Opponent's	
Receipt For: 2006 Election Cycle-to-Date ▼ Spending (2 U.S.C. 441a(i)/441a-1)	
X Primary General Other (specify) ▼ 3000.00	
Full Name (Last, First, Middle Initial) C. Ice Cream, Milk and Cheese PAC Date of Receipt	
Mailing Address 1250 H Street, NW, Suite 900 0 4 0 7 2 0 0 6]
City State Zip Code Transaction ID: 60410.C7609	-
Washington DC 20005 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	
Name of Employer Occupation Receipt Limit Increased Due to Opponent's	
Receipt For: 2006 Election Cycle-to-Date ▼ Spending (2 U.S.C. 441a(i)/441a-1)	
X Primary General	
Other (specify) ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	

SCHEDULE A	(FEC Form 3) CEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER (check only one) 11a 11b 12 13a	R: PAGE 45 / 146 X 11c 11d 13b 14 15
Any information copied or for commercial purp	from such Reports and States oses, other than using the r	atements may	y not be sold or used by any persodress of any political committee to	n for the purpose of so solicit contributions fro	oliciting contributions om such committee.
NAME OF COMMIT Friends of Benni	, ,				
	oilermakers BlackSmiths LEAP 753 State Ave., Suite 56	State KS	Zip Code 66101-2511 0006338	Transaction ID: Amount of Each	D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: X Primary Other (specify	2006 General y) ▼	Occupation Election C	cycle-to-Date ▼ 3500.00		ed Due to Opponent's J.S.C. 441a(i)/441a-1)
City Kansas City FEC ID number of o	oilermakers BlackSmiths LEAP 753 State Ave., Suite 56	State KS	Zip Code 66101-2511 0006338	0 5 1 Transaction ID:	1 2 0 0 6 60519.C7724 Receipt this Period
Receipt For: X Primary Other (specify	2006 General	Occupation			ed Due to Opponent's J.S.C. 441a(i)/441a-1)
Full Name (Last, Fire International Associated Mailing Address City Washington FEC ID number of dederal political community Name of Employer Receipt For: X Primary Other (specify	of Fire Fighters 1750 New York Ave., N. contributing smittee. 2006 General	State DC C Occupation	Zip Code 20006 n Sycle-to-Date ▼ 5000.00	Transaction ID: Amount of Each Receipt Limit Increase	2 0 0 6 60410.C7641 Receipt this Period 1500.00 ed Due to Opponent's J.S.C. 441a(i)/441a-1)
SUBTOTAL of Receip	ots This Page (optional)				4000.00
TOTAL This Period (last page this line number o	nlv)			

SCHEDULE A (FEC Form 3)

	HEDULE A (FEC Form 3) MIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 146 (check only one) 11a
Any or fo	information copied from such Reports and St or commercial purposes, other than using the	atements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
`	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
A. <u>I</u> I	Full Name (Last, First, Middle Initial) International Longshore & Warehouse Mailing Address Union PAF 1188 Franklin Street City San Francisco FEC ID number of contributing ederal political committee.	State CA	Zip Code 94109	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Receipt For: 2006 Primary X General Other (specify) ▼	Occupation C	ycle-to-Date ▼ 7000.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. <u>H</u>	Full Name (Last, First, Middle Initial) Kansas City Southern Employees PAC Mailing Address P.O. Box 219335 City Kansas City FEC ID number of contributing ederal political committee. Jame of Employer	State MO C Occupation		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: 2006 X Primary General Other (specify)	Election C	sycle-to-Date ▼ 500.00	Spending (2 0.3.0. 441a(I)/441a-1)
C. L	Full Name (Last, First, Middle Initial) -3 Communications Corporation PAC Mailing Address 600 Third Avenue City New York FEC ID number of contributing ederal political committee. Jame of Employer Receipt For: 2006 X Primary General Other (specify)	State NY C Occupation Election C	Zip Code 10016 n Sycle-to-Date ▼	Date of Receipt M
SU	BTOTAL of Receipts This Page (optional)			3000.00
TO	TAL This Period (last page this line number of	only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 146 (check only one) 11a 11b X 11c 11d 11d 12 13a 13b 14 15
Ang or f	y information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Α.	Full Name (Last, First, Middle Initial) Laborers Political League Mailing Address 905 Sixteenth St., N.V City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General	State DC C	Zip Code 20006	Date of Receipt M M
	Other (specify) ▼ Full Name (Last, First, Middle Initial)	0 0	7000.00	
3.	Mailing Address 905 Sixteenth St., N.V City Washington FEC ID number of contributing federal political committee.	V., Second F State DC	Zip Code 20006	Date of Receipt M M M
	Name of Employer Receipt For: 2006 X Primary General Other (specify) ▼	Occupation C	on Cycle-to-Date ▼ 10000.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C .	Full Name (Last, First, Middle Initial) Lockheed Martin Employees PAC Mailing Address 1550 Crystal Drive, C Suite 300 City Arlington	rystal Square State VA	Zip Code 22202	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee. Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 44150) (4415.1)
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Sycle-to-Date ▼ 5000.00	Spending (2 U.S.C. 441a(i)/441a-1)
SI	JBTOTAL of Receipts This Page (optional) .			8776.00
TC	OTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 146 (check only one) 11a 11b X 11c 11d 11d 12 13a 13b 14 15
Any or f	y information copied from such Reports and or commercial purposes, other than using t	Statements may he name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
١.	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
3.	Full Name (Last, First, Middle Initial) Lockheed Martin Employees PAC Mailing Address 1550 Crystal Drive, (Suite 300 City Arlington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify) Full Name (Last, First, Middle Initial) National Association of Realtors PAC Mailing Address 430 N. Michigan Ave City Chicago FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify) General Other (specify)	State VA C Occupation Election C State IL C Occupation	Zip Code 22202 Cycle-to-Date ▼ 6538.00 Zip Code 60611	Date of Receipt M
) .	National Rural Letter Carriers Mailing Address Association PAC 1630 Duke Street, 4t City Alexandria FEC ID number of contributing	h Floor State VA	Zip Code 22314-3465	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Variable Variab	Occupation	on Sycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SL	JBTOTAL of Receipts This Page (optional)			5538.00
TC	OTAL This Period (last page this line numb	er only)		

IT	CHEDULE A (FEC Form 3 EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 146 (check only one) 11a 11b X 11c 11d 11d 12 13a 13b 14 15
An or	y information copied from such Reports an for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
۸.	Full Name (Last, First, Middle Initial) NMPF PAC Mailing Address 2101 Wilson Blvd.,	Ste. 400		Date of Receipt 0 4 0 7 2 0 0 6
	City	State	Zip Code	Transaction ID: 60410.C7614
	Arlington	VA	22201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00 Receipt
	Name of Employer Receipt For: 2006	Occupation C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General Other (specify) ▼	Election	Sycle-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) Nuclear Energy Institute Federal PAC Mailing Address 1776 Street, NW, 4	1th Street		Date of Receipt
			7:- O - d -	04 07 2006
	City Washington	State DC	Zip Code 20006	Transaction ID: 60410.C7631 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00 Receipt
	Name of Employer	Occupation	n	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	cycle-to-Date ▼ 1000.00	Speriding (2 0.5.0. 441a(1)/441a-1)
— Э.	Full Name (Last, First, Middle Initial) Office and Professional Employees			Date of Receipt
	Mailing Address Intl Union-Voice of t 1660 L Street, NW,	Suite 801		04 07 2006
	City Washington	State DC	Zip Code 20036	Transaction ID: 60410.C7624 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20000	1000.00
	Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Sycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)
S	UBTOTAL of Receipts This Page (optional)		2500.00
т	OTAL This Period (last page this line numb	per only)		

c/	CHEDITIE A (EEC Earm 2)			FOR LINE NUMBER: PAGE 50 / 146
	CHEDULE A (FEC Form 3)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the	11a 11b 11c 11d
	_		Detailed Summary Page	12 13a 13b 14 15
Δn	y information copied from such Reports and Sta	atements may	v not he sold or used by any porce	
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
>	Friends of Bennie Thompson			
/				
	Full Name (Last, First, Middle Initial)			
٩.	PEOPLE			Date of Receipt
	Mailing Address 1625 L Street, N.W.			04 07 2006
	City	Ctata	Zin Codo	
	City	State	Zip Code	Transaction ID: 60410.C7622
	Washington	DC	20036	Amount of Each Receipt this Period
	FEC ID number of contributing	С		1500.00
	federal political committee.			
	Name of Employer	Occupation	n	Receipt
		'		Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	1 1		1
	Other (specify)		5000.00	
	Full Name (Last, First, Middle Initial)			
ೆ .	Pepsico Concerned Citizens Fund			Date of Receipt
	Mailing Address 700 Anderson Hill Road			04 28 2006
	City	Ctata	Zin Codo	
	City	State	Zip Code	Transaction ID: 60519.C7683
	Purchase	NY	10577	Amount of Each Receipt this Period
	FEC ID number of contributing	С		5000.00
	federal political committee.			
	Name of Employer	Occupation	n	Receipt
				Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	1 1	E000.00	1
	Other (specify)		5000.00	
_	Full Name (Last, First, Middle Initial)			Date of Receipt
J.	Plum Creek Timber Company GGF Mailing Address 999 Third Avenue, Suite	1200		
	Maning Address 999 Hillia Avenue, Suite	, 4 000		04 07 2006
	City	State	Zip Code	Transaction ID: 60410.C7628
	Seattle	WA	98104	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		1000.00
	Name of Employer	Occupation	n	Receipt
	Name of Employer	Occupation	II	Limit Increased Due to Opponent's
	Receipt For: 2006	Flaction C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General	LIGGRIOIT C	yolo lu-Dale ▼	
	Other (specify)		1000.00	
	Calc. (GpssnJ) \	0 0	0 0 0 0 0 0 0	1
SI	JBTOTAL of Receipts This Page (optional)			7500.00
Т	OTAL This Period (last page this line number o	nly)		

S	CHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 51 / 146 (check only one)		
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	11a 11b X 11c 11d 11d 12 13a 13b 14 15		
An or	y information copied from such Reports and for commercial purposes, other than using t	d Statements may he name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.		
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson					
۸.	Full Name (Last, First, Middle Initial) Plum Creek Timber Company GGF Mailing Address 999 Third Avenue, S	uite 4300		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City Seattle	State WA	Zip Code 98104	Transaction ID: 60519.C7660 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		1000.00		
	Name of Employer	Occupation		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	cycle-to-Date ▼ 2000.00			
3.	Full Name (Last, First, Middle Initial) Preston Gates Ellis			Date of Receipt		
	Mailing Address 1735 New York Ave.			04 20 4 2006		
	City Washington	State DC	Zip Code 20006	Transaction ID: 60519.C7659 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer Receipt For: 2006	Occupation C	n Cycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	X Primary General Other (specify) ▼	0 0	1500.00]		
) .	Full Name (Last, First, Middle Initial) Raytheon PAC	_		Date of Receipt		
	Mailing Address 1100 Wilson Blvd., S	Ste. 1500		04 07 2006		
	City Arlington	State VA	Zip Code 22209-2297	Transaction ID: 60410.C7636 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		2000.00		
	Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's		
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Sycle-to-Date ▼ 5000.00	Spending (2 U.S.C. 441a(i)/441a-1)		
S	SUBTOTAL of Receipts This Page (optional)					
T	OTAL This Period (last page this line numb	er only)]			

SCHEDULE A (FEC Form 3)

S	CHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 52 / 146	
ITEMIZED RECEIPTS		or each category of the		(check only one)	
TI EIMIZED TIEOEII 13			Detailed Summary Page	11a 11b X 11c 11d	
				12 13a 13b 14 15	
An or	y information copied from such Reports and for commercial purposes, other than using t	d Statements may the name and add	ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
\setminus	NAME OF COMMITTEE (In Full)				
	Friends of Bennie Thompson				
A.	Full Name (Last, First, Middle Initial) Raytheon PAC			Date of Receipt	
	Mailing Address 1100 Wilson Blvd., S			04 07 2006	
	City	State	Zip Code	Transaction ID: 60410.C7637	
	Arlington	VA	22209-2297	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		3000.00	
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's	
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
	Primary X General			1	
	Other (specify)		8000.00		
В.	Full Name (Last, First, Middle Initial) Responsible Citizens Political League	•		Date of Receipt	
	Mailing Address 3 Research Place			04 07 2006	
	City	State	Zip Code	Transaction ID: 60410.C7639	
	Rockville	MD	20850	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer FEC ID# C00006338	Occupation	1	Receipt Limit Increased Due to Opponent's	
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
	X Primary General	1 1		1	
	Other (specify) ▼	0 0	2000.00		
C.	Full Name (Last, First, Middle Initial) Responsible Citizens Political League			Date of Receipt	
	Mailing Address 3 Research Place			04 07 2006	
	City	State	Zip Code	Transaction ID: 60410.C7638	
	Rockville	MD	20850	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		1000.00	
	Name of Employer FEC ID# C00006338	Occupation	1	Receipt Limit Increased Due to Opponent's	
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
	X Primary General Other (specify) ▼	0 0	3000.00		
S	JBTOTAL of Receipts This Page (optional)		4500.00	
	OTAL This Period (last page this line numb	<u> </u>			

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 146 (check only one) 11a 11b X 11c 11d 11d 12 13a 13b 14 15		
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.		
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson					
۹.	Full Name (Last, First, Middle Initial) RJR Political Action Committee Mailing Address P.O. Box 718 401 N. Main Street			Date of Receipt M		
	City Winston Salam	State NC	Zip Code	Transaction ID: 60410.C7635		
	Winston Salem FEC ID number of contributing federal political committee. Name of Employer	C	27102 n	Amount of Each Receipt this Period 1000.00 Receipt Limit Increased Due to Opponent's		
	Receipt For: 2006 X Primary General Other (specify)	Election C	Cycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)		
3.	Full Name (Last, First, Middle Initial) Rolls-Royce North America PAC Mailing Address 14850 Conference Cer	nter Dr., Ste.	-	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 60410.C7643		
	Chantilly FEC ID number of contributing federal political committee.	C	20151	Amount of Each Receipt this Period 1000.00 Receipt		
	Name of Employer Receipt For: 2006 X Primary General Other (specify) ▼	Occupation C	Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Э.	Full Name (Last, First, Middle Initial) Science Applications Intl Corp. VPAC Mailing Address 10260 Campus Point	Drive, MS: F	2	Date of Receipt		
	City	State	Zip Code	0 4 0 7 2 0 0 6 Transaction ID: 60410.C7623		
	San Diego	CA	92121	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		2500.00		
	Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's		
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 3500.00	Spending (2 U.S.C. 441a(i)/441a-1)		
S	SUBTOTAL of Receipts This Page (optional)					
T	OTAL This Period (last page this line number	only)				

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 146 (check only one) 11a 11b X 11c 11d 11d 15
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements ma g the name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Full Name (Last, First, Middle Initial) Shaw Group, Inc./Stone & Webster PAC Mailing Address 1725 Duke Street, City Alexandria FEC ID number of contributing federal political committee. Name of Employer	Suite 400 State VA C Occupatio	Zip Code 22314	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Sheet Metal Workers International Mailing Address Associal Political A 1750 New York Av City Washington FEC ID number of contributing federal political committee. Name of Employer	e., N.W. State DC C C0 Occupation		Date of Receipt M M D D 2 0 0 6
Receipt For: 2006 X Primary General Other (specify)	Election C	Cycle-to-Date ▼ 5000.00	Sponding (2 0.0.0. HTQ(I)/HTQ T)
Full Name (Last, First, Middle Initial) Siemens Corporation PAC Mailing Address 701 Pennsylvania City Washington	Ave., N.W., Sui State DC	te Zip Code 20004	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify)	Occupation C	n Cycle-to-Date ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (option	al)		4500.00
TOTAL This Period (last page this line nur	nber only)		

S	CHEDULE A (FEC Form 3)		Llac concrete cohodula(a)	FOR LINE NUMBER: PAGE 55 / 146
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
"	EMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 11d
				12 13a 13b 14 15
An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements may name and add	r not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	Friends of Bennie Thompson			
A.	Full Name (Last, First, Middle Initial) SPAD			Date of Receipt
	Mailing Address 5201 Auth Way			04 07 2006
	City	State	Zip Code	Transaction ID: 60410.C7616
	Suitland	MD	20746	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼		6000.00	
— В.	Full Name (Last, First, Middle Initial) The Home Depot, INC PAC	l		Date of Receipt
	Mailing Address 101 Constitution Ave.,	NW, Suite 8		04 20 2006
	City	State	Zip Code	Transaction ID: 60519.C7661
	Washington	DC	20001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	1	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		2000.00	
<u> </u>	Full Name (Last, First, Middle Initial) Transport Workers Union			Date of Receipt
	Mailing Address Political Contributions 1700 Broadway	Committee		0 4 0 7 2 0 0 6
	City	State	Zip Code	Transaction ID: 60410.C7618
	New York	NY	10019-5905	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0008268	2500.00
	Name of Employer	Occupation	ו	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	5000.00	
s	UBTOTAL of Receipts This Page (optional)			4500.00
T-	OTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 56 / 146 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	11a 11b X 11c 11d 11d 12 13a 13b 14 15
An or	y information copied from such Reports and for commercial purposes, other than using	d Statements may	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Α.	Full Name (Last, First, Middle Initial) Treasury Employees PAC Mailing Address 901 E Street N.W., S City Washington FEC ID number of contributing federal political committee. Name of Employer	Suite 600 State DC C Occupatio	Zip Code 20004	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 4000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) Truck PAC Mailing Address 430 First St., S.E. City	State	Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Washington	DC	20003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00 Receipt
	Name of Employer Receipt For: 2006 X Primary General Other (specify) ▼	Occupation C	on Cycle-to-Date ▼ 2000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
•	Full Name (Last, First, Middle Initial) UAW-V-CAP	l		Date of Receipt
J .	Mailing Address 8000 E. Jefferson A	ve.		0 4 0 7 2 0 0 6
	City Detroit	State MI	Zip Code 48214	Transaction ID: 60410.C7644 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Sycle-to-Date ▼ 5000.00	Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional	·)		3000.00
T	OTAL This Period (last page this line numb	per only)]	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) Friends of Bennie Thompson Full Name (Last, First, Middle Initial) Linited Steel Workers of American PAF Mailing Address Five Gateway Center City FEC ID number of contributing federal political committee. FIN Name (Last, First, Middle Initial) LUSSPAC City State Zip Code Alianta GA 30328 FEC ID number of contributing federal political committee. City State Zip Code Alianta GA 30328 FEC ID number of contributing federal political committee. City Fin Name (Last, First, Middle Initial) LUTU PAC Mailing Address 14600 Detroit Avenue City State Zip Code Alianta GA 30328 FEC ID number of contributing federal political committee. City State Zip Code Alianta GA 30328 FEC ID number of contributing federal political committee. City State Zip Code Alianta GA 30328 FEC ID number of contributing federal political committee. City State Zip Code Alianta GA 30328 FEC ID number of contributing federal political committee. City State Zip Code Alianta GA 30328 FEC ID number of contributing federal political committee. City State Zip Code Alianta GA 30328 FEC ID number of contributing federal political committee. City State Zip Code Alianta GA 30328 FEC ID number of contributing federal political committee. City State Zip Code Alianta GA 30328 FEC ID number of contributing federal political committee. City State Zip Code Alianta GA 30328 FEC ID number of contributing federal political committee. City State City Sta		DULE A (FEC Form 3) ZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 146 (check only one) 11a 11b X 11c 11d 11d 13b 14 15
Friends of Bennie Thompson Full Name (Last, First, Middle Initial) United Steek Workers of America PAF Mailing Address Five Gateway Center City State Zip Code PA 15222 FEC 1D number of contributing federal political committee. City State Zip Code PA 15222 Fermany General Cotter (Specify) ▼ Date of Receipt Transaction ID: 60410.07615 Amount of Each Receipt this Period Fec City State Zip Code City Spending (2 U.S.C. 441a()/441a-1) Date of Receipt United Initial City Spending (2 U.S.C. 441a()/441a-1) Date of Receipt United Initial City Spending (2 U.S.C. 441a()/441a-1) Date of Receipt United Initial City Spending (2 U.S.C. 441a()/441a-1) Date of Receipt United Initial City Spending (2 U.S.C. 441a()/441a-1) Date of Receipt United Initial City State Zip Code City Spending (2 U.S.C. 441a()/441a-1) EEC 1D number of contributing federal political committee. City State Zip Code Primary General City State Zip Code City State Zip Code City Spending (2 U.S.C. 441a()/441a-1) Full Name (Last, First, Middle Initial) LUTLARA Mailing Address 14600 Detroit Avenue City State Zip Code City Spending (2 U.S.C. 441a()/441a-1) Fec 1D number of contributing federal political committee. City State Zip Code City Spending (2 U.S.C. 441a()/441a-1) Fec 1D number of contributing federal political committee. City State Zip Code City Spending (2 U.S.C. 441a()/441a-1) Date of Receipt Transaction ID: 60519.07721 Amount of Each Receipt this Period Fec City United Increased Due to Opponent's Spending (2 U.S.C. 441a()/441a-1) Election Cycle-to-Date ▼ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a()/441a-1) Election Cycle-to-Date ▼ Date of Receipt United Intervention City Spending (2 U.S.C. 441a()/441a-1) Limit Increased Due to Opponent's Spending (2 U.S.C. 441a()/441a-1) Election Cycle-to-Date ▼ Date of Receipt United Intervention City Spending (2 U.S.C. 441a()/441a-1) Date of Receipt United Intervention City Spending Ci	Any info	rmation copied from such Reports and Sta mmercial purposes, other than using the r	atements may name and ado	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Au Mailing Address Five Gateway Center City State Zip Code PHItsburgh PA 15222 Transaction ID: 60410.C7615 FICE D number of contributing federal political committee. C State Zip Code PHITSburgh PA 15222 Transaction ID: 60410.C7615 Name of Employer United Steekworkers of America Receipt For: 2006 Election Cycle-to-Date ▼ Full Name (Last, First, Middle Initial) UrsPAC Name of Employer Name of Employer Name of Employer C State Zip Code Steekworkers of America Receipt For: 2006 Election Cycle-to-Date ▼ Full Name (Last, First, Middle Initial) UrsPAC Name of Employer Name of Employer Fill Name (Last, First, Middle Initial) Fill Name (Last, First, Middle Initial) Transaction ID: 60410.C7630	\	,			
Mailing Address 55 Glenlake Parkway, N.E. City State Zip Code Atlanta GA 30328 FEC ID number of contributing federal political committee. Name of Employer Full Name (Last, First, Middle Initial) C UTU PAC Mailing Address 14600 Detroit Avenue City State Zip Code QH 44107 FEC ID number of contributing federal political committee. C Date of Receipt Time Period Receipt For: 2006 Election Cycle-to-Date Political Committee. Full Name (Last, First, Middle Initial) C UTU PAC Mailing Address 14600 Detroit Avenue City State Zip Code OH 44107 FEC ID number of contributing federal political committee. Name of Employer Name of Employer C State Zip Code OH 44107 FEC ID number of contributing federal political committee. Name of Employer C State Zip Code OH 44107 FEC ID number of contributing federal political committee. Name of Employer C State Zip Code OH 44107 FEC ID number of contributing federal political committee. Name of Employer C State Zip Code OH 44107 FEC ID number of contributing federal political committee. Name of Employer C State Zip Code OH 44107 FEC ID number of contributing federal political committee. Name of Employer Occupation FEC ID number of contributing federal political committee. Name of Employer Occupation FEC ID number of contributing federal political committee. Name of Employer Occupation FEC ID number of contributing federal political committee. Name of Employer Occupation FEC ID number of contributing federal political committee. Name of Employer Occupation FEC ID number of contributing federal political committee. Name of Employer Occupation FEC ID number of contributing federal political committee. Name of Employer Occupation FEC ID number of contributing federal political committee. Name of Employer Occupation FEC ID number of contributing federal political committee. Name of Employer Occupation FEC ID number of contributing federal political committee. Name of Employer Occupation FEC ID number of contributing federal political com	A. Unite Mailir City Pitts FEC feder Namunite erica Rece	d Steel Workers of America PAF ng Address Five Gateway Center burgh ID number of contributing al political committee. e of Employer of Steelworkers Of Amipt For: 2006 Primary General	PA C Occupation	15222 15222 1 1 1 1 1 1	Transaction ID: 60410.C7615 Amount of Each Receipt this Period Receipt Limit Increased Due to Opponent's
Receipt For: 2006 Primary	Mailir City Atlau FEC feder	ng Address 55 Glenlake Parkway, Nonta ID number of contributing all political committee.	State GA	30328	Transaction ID: 60410.C7630 Amount of Each Receipt this Period 2500.00
Date of Receipt Mailing Address 14600 Detroit Avenue City State Zip Code Cleveland OH 44107 FEC ID number of contributing federal political committee. Name of Employer Cupation Cupation Date of Receipt Transaction ID: 60519.C7721 Amount of Each Receipt this Period Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Spending (2 U.S.C. 441a(i)/441a-1)	Rece	Primary X General	Election C		
SUPTOTAL of Descripto This Page (actional)	City City FEC feder Name	PAC ng Address 14600 Detroit Avenue eland ID number of contributing al political committee. e of Employer ipt For: 2006	OH C Occupation	44107 1 ycle-to-Date ▼	Transaction ID: 60519.C7721 Amount of Each Receipt this Period 1500.00 Receipt Limit Increased Due to Opponent's
SSS STATE OF TOOLS FIRST THE T Age (optional)	SURTO	· · · / ·	0 0		9000.00
TOTAL This Period (last page this line number only)				•	

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 146 (check only one) 11a 11b X 11c 11d 11d 13b 14 15
Ang	v information copied from such Reports and Sor commercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Α.	Full Name (Last, First, Middle Initial) Verizon Communications Inc. Mailing Address Good Government Clu 1717 Arch Street, 47-S City Philadelphia FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006	State PA C	Zip Code 19103	Date of Receipt M M
	X Primary General Other (specify) ▼	0 0	4000.00	
3.	Full Name (Last, First, Middle Initial) Verizon Wireless/Verizon Communications Mailing Address Inc., PAC 180 Washington Valley City Bedminster FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify)	State NJ C Occupation	Zip Code 07921 n Cycle-to-Date ▼	Date of Receipt M M
C.	Full Name (Last, First, Middle Initial) Wal-Mart Stores, Inc. PAC Mailing Address for Responsible Govern 702 SW 8th Street City Bentonville FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)	State AR C	Zip Code 72716-0150 n Cycle-to-Date ▼	Date of Receipt M M
SI	JBTOTAL of Receipts This Page (optional))	2500.00
TC	OTAL This Period (last page this line number	only)		

FOR LINE NUMBER: PAGE 59 / 146 SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c Detailed Summary Page 12 13a 13b 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Friends of Bennie Thompson Full Name (Last, First, Middle Initial) Wal-Mart Stores, Inc. PAC Date of Receipt Mailing Address for Responsible Government 05 2006 11 702 SW 8th Street City State Zip Code Transaction ID: 60519.C7725 **Bentonville** AR 72716-0150 Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 federal political committee. Receipt Name of Employer Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2006 Election Cycle-to-Date X Primary General 5500.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	2000.00
TOTAL This Period (last page this line number only)	•	122664.00

FOR LINE NUMBER: PAGE 60 / 146 SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a Х 11b 11c **Detailed Summary Page** 12 13a 13b 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Friends of Bennie Thompson Full Name (Last, First, Middle Initial) A. DCCC Date of Receipt Mailing Address 430 South Capitol St 0 4 28 2006 City Zip Code State Transaction ID: 60519.C7700 Washington DC 20003 Amount of Each Receipt this Period FEC ID number of contributing C 26.67 federal political committee. In-Kind Name of Employer Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2006 Election Cycle-to-Date X Primary General Fundraising Expense 135.10 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	26.67
TOTAL This Period (last page this line number only)	•	26.67

FOR LINE NUMBER: PAGE 61 / 146 SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c Detailed Summary Page 12 13a 13b 14 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Friends of Bennie Thompson Full Name (Last, First, Middle Initial) ICBC Broadcast Holdings, Inc. Date of Receipt Mailing Address 731 S. Pear Orchard Road 05 09 2006 City Zip Code State Transaction ID: 60519.C7699 Ridgeland MS 39157-Amount of Each Receipt this Period FEC ID number of contributing C 16535.00 federal political committee. Offsets to Operating Expe-Name of Employer Occupation nditu Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2006 Election Cycle-to-Date X Primary General 16535.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	16535.00
TOTAL This Period (last page this line number only)	•	16535.00

FOR LINE NUMBER: PAGE 62/146 SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 12 13a 13b X 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Friends of Bennie Thompson Full Name (Last, First, Middle Initial) Trustmark National Bank Date of Receipt Mailing Address P.O. Box 291 0 4 30 2006 City State Zip Code Transaction ID: 60525.C7896 <u>Jackso</u>n MS 39205-0291 Amount of Each Receipt this Period FEC ID number of contributing C 1143.22 federal political committee. Other Receipt Name of Employer Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2006 Election Cycle-to-Date X Primary General 7937.32 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	1143.22
TOTAL This Period (last page this line number only)	•	1143.22

~		۰,				
	CHEDULE B (FEC Form	-	Use sepe	erate schedule(s)		NUMBER: PAGE 63 / 146
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page				
			Detailed S	Summary Page	-	X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports for commercial purposes, other than us					or the purpose of solicating contributions licit contributions from such committee
Λ	NAME OF COMMITTEE (In Full)					
\mathbb{Z}	Friends of Bennie Thompson					
_	Full Name (Last, First, Middle Initial)					Transaction ID: 60519.E5080
Α.	Geri Adams					Date of Disbursement
	Mailing Address 106 West Gree Suite 134	en Street				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & G \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & G \\ Y & Z & O & O & G \end{bmatrix}$
	City		State	Zip Code		Amount of Each Disbursement this Period
	Mound Bayou		MS	38762-		100.05
	Purpose of Disbursement TRAVEL EXPENSE					139.85 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburse	ment For:			TRAVEL EXPENSE
	Senate		Primary	General		
	State: President District:		Other (spe	ecity)		
_	Full Name (Last, First, Middle Initial)					
В.	Mr. Levi Adams					Transaction ID: 60519.E4934 Date of Disbursement
	Mailing Address 332 Josanna S	Street				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & S \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & S \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & S \end{smallmatrix} \end{bmatrix}$
	City		State	Zip Code		Amount of Each Disbursement this Period
	Jackson		MS	39202-		750.00
	Purpose of Disbursement SALARY					750.00 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburse	ment For:			SALARY
	Senate		Primary	General		5/12 titl
	State: President District:		Other (spe	ecity) 🔻		
	Full Name (Last, First, Middle Initial)					ID 00440 E4000
C.	Advanced Network Strategies, L	LC				Transaction ID: 60410.E4808 Date of Disbursement
						M M / D D / Y Y Y
	Mailing Address 236 Massachu	setts Ave.,	N.E. #50	8		0 4 0 6 2 0 0 6
	City Washington		State DC	Zip Code 20002-		Amount of Each Disbursement this Period
	Purpose of Disbursement FUNDRAISER					5319.85 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburse	ment For:		VII	FUNDRAISER
	Senate		Primary	General		I GIVERAIGER
	President State: District:		Other (spe	ecify)		
	State: District:					
s	UBTOTAL of Disbursements This Pag	e (optional) .				6209.70

	CHEDULE B (FEC Form 3)	Use seperate schedule	e(s)		NUMBER: PAGE 64 / 146
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(check only	X 17
Δn	y Information copied from such Reports and Statem	ents may not be sold or u	sed by	, any person f	20a 20b 20c 21
	for commercial purposes, other than using the name				
Λ	NAME OF COMMITTEE (In Full)				
/	Friends of Bennie Thompson				
	Full Name (Last, First, Middle Initial)				Transaction ID: 60519.E4918
A.	Advanced Network Strategies, LLC				Date of Disbursement
	Mailing Address 236 Massachusetts Ave.,	N.E. #508			$\begin{bmatrix} M & 5 & M \\ O & 5 & M \end{bmatrix} / \begin{bmatrix} D & D \\ O & 5 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & O & O & O \\ Y & Z & O & O & O \end{bmatrix}$
		State Zip Code DC 20002-			Amount of Each Disbursement this Period
	Purpose of Disbursement		Тг	-	3282.47
	FUNDRAISING EXPENSE		<u>با</u> لـ		Refund or Disposal of Excess Contributions Required Under
	Candidate Name			Category/ Type	11 C.F.R. 400.53
		ment For:	•		FUNDRAISING EXPENSE
	Senate President	Primary General Gener	al		
	State: District:	Other (specify)			
	Full Name (Last, First, Middle Initial)				Transaction ID: 60519.E4933
B.	Brenda Alexander				Date of Disbursement
	Mailing Address 2706 St. Charles Street				$\begin{bmatrix} M & 5 & M \\ 0 & 5 & M \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ D & D \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & O & O \\ 2 & 0 & O & G \end{bmatrix}$
		State Zip Code			Amount of Each Disbursement this Period
	Jackson Purpose of Disbursement	MS 39209-	1		250.00
	SALARY				Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate	ment For: Primary Gene	·al		SALARY
	President	Other (specify)	aı		
	State: District:	, , , , , , , , , , , , , , , , , , ,			
C.	Full Name (Last, First, Middle Initial)				Transaction ID: 60519.E5069
Ο.	Brenda Alexander				Date of Disbursement
	Mailing Address 2706 St. Charles Street				$\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$
		State Zip Code MS 39209-			Amount of Each Disbursement this Period
	Purpose of Disbursement SALARY		Г		250.00 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	· H	ment For:			SALARY
	Senate	Primary General Genera	al		
	State: President State:	Other (specify)			
	<u> </u>			I	
s	UBTOTAL of Disbursements This Page (optional) .				3782.47

SCHEDULE E	3 (FEC Form 3)		- l d! - / - \	FOR LINE	NUMI	BER:		Р	AGE	65 / 146
ITEMIZED DISBURSEMENTS for ea				or each category of the			y one)				
		Deta	led Summ			X 17 20		18 20b	19a 20d		19b 21
	ed from such Reports a poses, other than using										
NAME OF COM	, ,										
Friends of Ben	nie Thompson										
Full Name (Last, American Expr	First, Middle Initial) ess							tion ID Disburs	: 60410 ement	E48	12
Mailing Address	P.O. Box 650448	3				0	4 ^M	/ D	06 /	Y 2	006
City Dallas		State TX		Code 265-0448		Am	ount	of Each	n Disburs	emer	nt this Period
Purpose of Disbu			, 02	100 0 1 10							1872.15
	REDIT CARD PAYME	NT							isposal o s Requir		
Candidate Name					Category/ Type			.F.R. 40		a Ui	idei
Office Sought:	House Senate President	Disbursement For Primar Other		General		SEI YM	E BE ENT	LOW;	CREDI	T CA	ARD PA-
State:	District: First, Middle Initial)										
3. Delta Airlines	First, Middle Iriiliai)							tion ID Disburs	: 60410 ement	.E48	14
Mailing Address	Mailing Address Hartsfield Atlanta International Airport						044 / 06 / 2006				
City Atlanta		State GA		Code 309-		Am	ount	of Each	n Disburs	emer	nt this Period
Purpose of Disbu					•	L	Dofu	nd or D	isposal c	f Evo	461.29
Candidate Name					Category/ Type		Cont 11 C	ribution .F.R. 40	s Require 00.53		
Office Sought:	House Senate President	Disbursement For Primar		General	71	_		ITEM: TRAV] 'EL EXF	PENS	SE
State:	District:										
Full Name (Last, Northwest Airli	First, Middle Initial) nes							tion ID Disburs	: 60410 ement	E48	13
Mailing Address	5101 Northwest					0	4 ^M	/ D	06 /	YZ	006
City Saint Paul		State MN		Code 111-		Am	ount	of Each	Disburs	emer	nt this Period
	Purpose of Disbursement										474.00
TRAVEL EXPEN	SE				Category/ Type		Cont		isposal o s Requir 00.53		
Office Sought:	House Senate President	Disbursement For Primar Other		General	1 700	-		ITEM; TRAV] 'EL EXF	PENS	SE
State:	District:					_					
SUBTOTAL of Disb	oursements This Page	(optional)	<u></u>		>	L				1	872.15

SCHEDULE B (FEC Form 3)				erate schedule(s)	FOR LINE	NUMBER: PAGE 66 / 146 vone)		
ITEMIZED DISBURSEMENTS		S	for each category of the Detailed Summary Page		_ i `	X 17	19a 19b 20c 21	
	y Information copied from such Reports ar for commercial purposes, other than using							
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson							
Α.	Full Name (Last, First, Middle Initial) US Airways					Transaction ID: 604 Date of Disbursemer	nt	
	Mailing Address P.O. Box 2502					04 06	2006	
	City Winston Salem		State VC	Zip Code 27102-		Amount of Each Disk	oursement this Period	
	Purpose of Disbursement TRAVEL EXPENSE					Refund or Dispos	264.30	
	Candidate Name				Category/ Type	Contributions Red	quired Under	
	Office Sought: House Senate President		nent For: Primary Other (spe	General cify) ▼		[MEMO ITEM] MEMO: TRAVEL E	EXPENSE	
	State: District:							
В.	Full Name (Last, First, Middle Initial) American Express					Transaction ID: 605 Date of Disbursemen		
	Mailing Address P.O. Box 650448					05 02	^Y 2006 ^Y	
	City Dallas		State TX	Zip Code 75265-0448		Amount of Each Disk	oursement this Period	
	Purpose of Disbursement SEE BELOW; CREDIT CARD PAYMEN	т				Defined as Disease	2062.18	
	Candidate Name	1			Category/ Type	Refund or Dispos Contributions Red 11 C.F.R. 400.53	quired Under	
	Office Sought: House Senate President		ment For: Primary Other (spe	General cify) ▼		SEE BELOW; CRI YMENT	EDIT CARD PA-	
	State: District:			·				
C.	Full Name (Last, First, Middle Initial) Levy Restaurant MCI Center					Transaction ID: 605 Date of Disbursemer	nt	
	Mailing Address 601 F Street					$\begin{bmatrix} 0 & 5 & M \\ 0 & 5 & M \end{bmatrix}$	^Y 2006 ^Y	
	City Washington		State DC	Zip Code 20004-		Amount of Each Disk	oursement this Period	
	Purpose of Disbursement FUNDRAISING EXPENSE					Refund or Dispos	850.00	
	Candidate Name				Category/ Type	Contributions Red	quired Under	
	Office Sought: House Senate President		nent For: Primary Other (spe	General cify) ▼		[MEMO ITEM] MEMO: FUNDRAI	SING EXPENSE	
	State: District:			•				
s	UBTOTAL of Disbursements This Page (optional)					2062.18	

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	CHEDULE B (FEC Form 3	Use seperate scriedule(s)			FOR LINE (check only			
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	y Information copied from such Reports a for commercial purposes, other than usin					or the purpose of solicating contributions licit contributions from such committee		
\setminus	NAME OF COMMITTEE (In Full)							
	Friends of Bennie Thompson							
A.	Full Name (Last, First, Middle Initial) Trattoria Alberto					Transaction ID: 60519.E4901 Date of Disbursement		
	Mailing Address 1660 Crain Hwy					$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & S \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & D \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O \\ Z & O & O & G \end{smallmatrix} \end{bmatrix}$		
	City Glen Burnie		State MD	Zip Code 21061-		Amount of Each Disbursement this Period		
	Purpose of Disbursement FUNDRAISING EXPENSE					300.00 Refund or Disposal of Excess		
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President		nent For: Primary Other (spe	General cify) ▼		[MEMO ITEM] MEMO: FUNDRAISING EXPENSE		
	State: District:			•				
В.	Full Name (Last, First, Middle Initial) David L. Andrukitis Inc.					Transaction ID: 60519.E4942 Date of Disbursement		
	Mailing Address 50 E Street, SE					$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & S \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & O \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & O & O & G \\ Y & O & O & G \end{bmatrix}$		
	City Washington		State DC	Zip Code 20003-		Amount of Each Disbursement this Period		
	Purpose of Disbursement PRINTING					1090.34 Refund or Disposal of Excess		
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President	Disburser	nent For: Primary Other (spe	General		PRINTING		
	State: District:		` .	•				
C.	Full Name (Last, First, Middle Initial) Atmos Energy					Transaction ID: 60410.E4802 Date of Disbursement		
	Mailing Address P.O. Box 90019	49				$\begin{bmatrix}\begin{smallmatrix}M&A&M\\0&4&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&0&D\\0&5\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\2&0&0&6\end{smallmatrix}\end{bmatrix}$		
	City Louisville		State < Y	Zip Code 40290-1949		Amount of Each Disbursement this Period		
	Purpose of Disbursement UTILITIES DEPOSIT					200.00 Refund or Disposal of Excess		
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President		nent For: Primary Other (spe	General cify) ▼		UTILITIES DEPOSIT		
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SCHEDULE B (FEC Form 3) Use seperate schedule(s				FOR LINE	-		PAGE	68 / 146
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	y Information copied from such Reports and Statem or commercial purposes, other than using the name							
\setminus	NAME OF COMMITTEE (In Full)							
	Friends of Bennie Thompson							
Α.	Full Name (Last, First, Middle Initial) Atmos Energy					tion ID: 6 Disbursem	0519.E49 nent	904
	Mailing Address P.O. Box 9001949				0 5	0 2) / Y	2 0 0 6 °
	,	State Zip Coo KY 40290			Amount	of Each D	isburseme	nt this Period
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	Candidate Name		C	Category/ Type		ributions F .F.R. 400.	Required U 53	nder
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	Full Name (Last, First, Middle Initial)				T	diam ID. C	0510 540	247
В.	Atmos Energy					Disbursem	_	
	Mailing Address P.O. Box 9001949		0 5	0.9		Ž 0 0 6 °		
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C.	Full Name (Last, First, Middle Initial) BellSouth				Date of	Disbursem		
	Mailing Address P.O. Box 105262				0 ^M 4	10) / Y	2 0 0 6 °
		State Zip Coo GA 30348			Amount	of Each D	isburseme	nt this Period
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	Office Sought: House Disburse Senate President		eneral		PHONE	SERVIC	CES	
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В.

C.

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	y Information copied from such Reports a for commercial purposes, other than using				
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson		· · ·		
Α.	Full Name (Last, First, Middle Initial) BellSouth Mailing Address P.O. Box 105262)			Transaction ID: 60519.E4871 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Atlanta Purpose of Disbursement PHONE SERVICES Candidate Name		Zip Code 30348-5262	Category/ Type	Amount of Each Disbursement this Period 329.13 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: Senate President State: District:	Disbursement For: Primary Other (spec	General ify) ▼	Турс	PHONE SERVICES
В.	Full Name (Last, First, Middle Initial) BellSouth Mailing Address P.O. Box 105262	2			Transaction ID: 60519.E4893 Date of Disbursement M M M / D D D / Y Y Y O O O
	City Atlanta Purpose of Disbursement PHONE SERVICES Candidate Name Office Sought: House Senate President State: District:	State GA Disbursement For: Primary Other (spec	General	Category/ Type	Amount of Each Disbursement this Period 263.98 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PHONE SERVICES
C.	Full Name (Last, First, Middle Initial) BellSouth Mailing Address P.O. Box 105262	2			Transaction ID: 60519.E4903 Date of Disbursement O 5 D O D O D O O O O O O O O O O O O O
	City Atlanta Purpose of Disbursement PHONE SERVICES Candidate Name	GA	Zip Code 30348-5262	Category/ Type	Amount of Each Disbursement this Period 276.38 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disbursement For:	Canaval		PHONE SERVICES

Senate

District:

President

SUBTOTAL of Disbursements This Page (optional)

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Primary

Other (specify)

General

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ITEMIZED DISBURSEMENTS				erate schedule(s)	FOR LINE (check only	NUMBER: PAGE 70 / 146		
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	y Information copied from such Reports a for commercial purposes, other than usin							
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson							
Α.	Full Name (Last, First, Middle Initial) BellSouth					Transaction ID: 605 Date of Disbursemen	t	
	Mailing Address P.O. Box 10526	2				05 05	Ý ŽOĎ6Ť	
	City Atlanta		State GA	Zip Code 30348-5262		Amount of Each Disb		
	Purpose of Disbursement PHONE SERVICES					Refund or Dispos	290.44	
	Candidate Name				Category/ Type	Contributions Rec 11 C.F.R. 400.53		
	Office Sought: House Senate President	Disburser	ment For: Primary Other (spe	General cify) ▼		PHONE SERVICES	3	
	State: District:							
В.	Full Name (Last, First, Middle Initial) BellSouth					Transaction ID: 605 Date of Disbursemen		
	Mailing Address P.O. Box 10526	2				05 05	2006	
	City Atlanta		State GA	Zip Code 30348-5262		Amount of Each Disb	ursement this Period	
	Purpose of Disbursement PHONE SERVICES					Refund or Dispos	299.27	
	Candidate Name				Category/ Type	Contributions Rec 11 C.F.R. 400.53		
	Office Sought: House Senate	Disburser	Primary	General		PHONE SERVICES	3	
	State: President District:		Other (spe	city) 🔻				
C.	Full Name (Last, First, Middle Initial) BellSouth					Transaction ID: 605 Date of Disbursemen		
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	Candidate Name				Category/ Type	Contributions Rec 11 C.F.R. 400.53	juired Under	
	Office Sought: House Senate President	Disburser	ment For: Primary Other (spe	General		PHONE SERVICES	3	
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	IIRTOTAL of Disbursements This Page	(ontional)					859.43	

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Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solication for commercial purposes, other than using the name and address of any political committee to solicit contributions from such NAME OF COMMITTEE (In Full) Friends of Bennie Thompson Full Name (Last, First, Middle Initial) A. BellSouth Mailing Address P.O. Box 105262 City State Zip Code Amount of Each Disbursement PHONE SERVICES Candidate Name Office Sought: House Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) B. Ms. Jannie Brown Transaction ID: 605 Date of Disbursement Phone Services Category/ Type Transaction ID: 605 Date of Disbursement Phone Services Category/ Type Transaction ID: 604 Amount of Each Disbursement Phone Services Contributions Required Phone Services Transaction ID: 604 Date of Disbursement Date of Disbursement Date of Disbursement Phone Services	ting contributions uch committee 519.E4939 nt Y Y Y O Y O Y Coursement this Period 601.82 sal of Excess quired Under
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Senate President Other (specify) State: Full Name (Last, First, Middle Initial) B. Ms. Jannie Brown Primary Other (specify) Transaction ID: 604 Date of Disbursement	SS .
B. Ms. Jannie Brown Date of Disbursement	
Mailing Address 830 Rose Hill Road 0 4 1 2	
City State Zip Code Amount of Each Disb Mendenhall MS 39114-	
Purpose of Disbursement SEE BELOW; SALARY TRAVEL EXPENSE Candidate Name Category/ Type Refund or Dispose Contributions Req 11 C.F.R. 400.53	quired Under
Office Sought: House Senate President State: Disbursement For: Primary General Other (specify) Other (specify) ■ SEE BELOW; SAL EXPENSE	ARY TRAVEL
Full Name (Last, First, Middle Initial) C. Ms. Jannie Brown Transaction ID: 604 Date of Disbursement	nt
Mailing Address 830 Rose Hill Road	2006
City State Zip Code Amount of Each Disb Mendenhall MS 39114-	oursement this Period 200.00
TRAVEL EXPENSE Candidate Name Category/ Type Refund or Dispose Contributions Req 11 C.F.R. 400.53 [MEMO ITEM]	quired Under
Office Sought: Senate	EXPENSE
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ΙT	ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page				X 17
	y Information copied from such Reports and Statem for commercial purposes, other than using the name				
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson				
Α.	Full Name (Last, First, Middle Initial) Ms. Jannie Brown Mailing Address 830 Rose Hill Road				Transaction ID: 60412.E4853 Date of Disbursement M 4 M / D 1 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
			Zip Code 39114-		Amount of Each Disbursement this Period
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	Office Sought: House Disburse Senate President	ment For: Primary Other (specif	General ▼	Туре	11 C.F.R. 400.53 [MEMO ITEM] MEMO: SALARY
	State: District:				
В.	Full Name (Last, First, Middle Initial) Mr. John Brown				Transaction ID: 60519.E4927 Date of Disbursement
	Mailing Address 270 W. Peace Street				$\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ 0 & 5 & M \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y & Q & O & G \\ Y & Y & Y & Q & Q & G & Y \end{bmatrix}$
			Zip Code 39046-		Amount of Each Disbursement this Period
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	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	ment For: Primary Other (specif	General ▼		CANVASSING
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C.	Full Name (Last, First, Middle Initial) Mr. John Brown				Transaction ID: 60519.E4960 Date of Disbursement
	Mailing Address 270 W. Peace Street				$\begin{bmatrix} 0 & 5 & M \\ 0 & 5 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 0 \\ 1 & 0 \end{bmatrix} / \begin{bmatrix} 0 & 1 & 0 \\ 0 & 2 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix}$
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	Purpose of Disbursement RALLY			•	477.00
	Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ment For: Primary Other (specif	General ▼	-	RALLY
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Ν	NAME OF COMMITTEE (In Full)									
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Α.	Full Name (Last, First, Middle Initial) Mr. John Brown				Transac Date of I			E50	22	
	Mailing Address 270 W. Peace Street	et			05 12 2006					
	City Canton	State Zip Code MS 39046-			Amount of Each Disbursement this Period					
	Purpose of Disbursement SEE BELOW; SALARIES TRANSPORATI			•	Refu	nd or Di	sposal o	f Evo	500.00	
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В.	Full Name (Last, First, Middle Initial) Mr. John Brown				Transac Date of I	Disburse	ement	E50	23	
	Mailing Address 270 W. Peace Street		0 5	/ 1	2 /	2	006			
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C.	Full Name (Last, First, Middle Initial) Mr. John Brown				Transac Date of I			E50	25	
	Mailing Address 270 W. Peace Street	et			0 5	/ D 1	^D /	Y 2	006	
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Α.	Full Name (Last, F Mr. John Brown	,					Date	saction ID: 605 of Disbursemer	nt			
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В.	Full Name (Last, F Mr. John Brown	1						saction ID: 605 of Disbursemen	nt			
	Mailing Address	270 W. Peace S	treet				0.5	1 6	^Y 2006 ^Y			
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	Candidate Name					Category/ Type	- C	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought:	House Senate	Disburser	nent For: Primary	General		RALL	IES				
	State:	President District:		Other (spe	ecify) 🔻							
_	Full Name (Last, F	. ,					Trans	action ID: 604	110.E4807			
C.	Leatha Brown a	and Bobby Rushing	l					of Disbursemer				
	Mailing Address	1505 A B.B. Kin	g Road				0 ^M 4	M / D O 6	² 2006			
	City Indianola			State VIS	Zip Code 38751-3700		Amou	nt of Each Disk	oursement this Period			
	Purpose of Disbursement RENT						T L	efund or Dispos	750.00 sal of Excess			
	Candidate Name					Category/ Type		ontributions Red I C.F.R. 400.53				
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\rangle	Friends of Benr	, ,													
_	Full Name (Last, F	First, Middle Initial)						Trans	actio	n ID	605	519.E	488	3	
Α.	Mr. Wayne L. E	Brown						Date of Disbursement O 4							
	Mailing Address	830 Rose Hill R	oad							2	21		2 (0 0 6	
	City Mendenhall			State MS	Zip Code 39114-			Amou	int of	Each	Dist	oursen	ent	this P	eriod
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	Mailing Address 830 Rose Hill Road							0 4		້2	8 8		2 (o ŏ 6	
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	Full Name (Last, F							Trans	actio	n ID	605	519.E	491	2	
C.	Mr. Wayne L. E	Brown						Date	of Dis	burs	emer	-			Υ
	Mailing Address	830 Rose Hill R	oad					[™] 5		C	5		2 () Ó 6	
	City State Zip Code Mendenhall MS 39114-							Amou	int of	Each	Dist	oursen			-
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	y Information copied from such Reports for commercial purposes, other than usir									
\setminus	NAME OF COMMITTEE (In Full)									
\mathbb{Z}	Friends of Bennie Thompson									
A.	Full Name (Last, First, Middle Initial) Mr. Wayne L. Brown					Transaction ID: 60519.E4 Date of Disbursement	980			
	Mailing Address 830 Rose Hill R	oad				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & G \\ Y & 2 & 0 & Q & G \end{bmatrix} $				
	City Mendenhall	Sta MS		Zip Code 39114-		Amount of Each Disburseme	ent this Period			
	Purpose of Disbursement SALARY					Refund or Disposal of Ex	300.00			
	Candidate Name				Category/ Type	Contributions Required U				
	Office Sought: House Senate		rimary	General		SALARY				
	State: President District:	O	ther (spec	city) 🔻						
	Full Name (Last, First, Middle Initial)					Transaction ID: 60410.E4	.817			
В.	Cingular Wireless					Date of Disbursement				
	Mailing Address P.O. Box 31488	1				0 4 M / D 0 6 / Y	ž 0 0 6 °			
	City Tampa	Sta FL		Zip Code 33631-		Amount of Each Disburseme	ent this Period			
	Purpose of Disbursement PHONE SERVICES		· · ·	Refund or Disposal of Excess Contributions Required Under						
	Candidate Name				Category/ Type					
	Office Sought: House Senate	Disburseme Pr	ent For: rimary	General		PHONE SERVICES				
	State: President District:	0	ther (spec	cify) 🔻						
C.	Full Name (Last, First, Middle Initial) Cingular Wireless					Transaction ID: 60519.E4 Date of Disbursement	887			
	Mailing Address P.O. Box 31488					0 4 M / 2 5 / Y	2006			
	City Tampa	Sta FL		Zip Code 33631-		Amount of Each Disburseme	ent this Period			
	Purpose of Disbursement				-		162.72			
	PHONE SERVICES Candidate Name				Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Senate	Disburseme	ent For:	General	71	PHONE SERVICES				
	State: President District:	O	ther (spec	cify) 🔻						
s	UBTOTAL of Disbursements This Page	(optional)			>		625.72			

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	CHEDULE B (FEC Form 3)		erate schedule(s)	FOR LINE (check only	NUMBER: PAGE 77 / 146
IT	EMIZED DISBURSEMENTS		category of the Summary Page	_ i `	X 17 18 19a 19b
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	y Information copied from such Reports and Stat for commercial purposes, other than using the na				
\setminus	NAME OF COMMITTEE (In Full)				
//	Friends of Bennie Thompson				
_	Full Name (Last, First, Middle Initial)				Transaction ID: 60410.E4801
Α.	Clarksdale Public Utilities				Date of Disbursement
	Mailing Address 416 3rd St.				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & \check{Y} & \check{O} & \check{O} & 6 \\ & 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$
	City Clarksdale	State MS	Zip Code 38614-		Amount of Each Disbursement this Period
	Purpose of Disbursement	IVIO	30014-		195.00
	UTILITY DEPOSIT				Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
		rsement For:			UTILITY DEPOSIT
	Senate President	Other (spe	General		
	State: District:	(0]	· · · · · · · · · · · · · · · · · · ·		
_	Full Name (Last, First, Middle Initial)				Transaction ID: 60519.E5066
В.	Clarksdale Public Utilities				Date of Disbursement
	Mailing Address 416 3rd St.				$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \begin{smallmatrix} M \\ S \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D \\ I \end{smallmatrix} \begin{smallmatrix} D \\ I \end{smallmatrix} \Big] \ / \ \begin{bmatrix} \begin{smallmatrix} Y \\ I \end{smallmatrix} \begin{smallmatrix} Y \\ I \end{smallmatrix} \begin{smallmatrix} Y \\ O \end{smallmatrix} \begin{smallmatrix} O \end{smallmatrix} \begin{smallmatrix} G \end{smallmatrix} \Big]$
	City	State	Zip Code		Amount of Each Disbursement this Period
	Clarksdale Purpose of Disbursement	MS	38614-		93.86
	UTILITIES				Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	- I	rsement For:	Camanal		UTILITIES
	Senate President	Other (spe	General		
	State: District:	••. (666	√ Value 1		
_	Full Name (Last, First, Middle Initial)				Transaction ID: 60410.E4824
C.	Classic Printing Company				Date of Disbursement
	Mailing Address P.O. Box 68696				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 7 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & O & O & G \\ Y & 2 & O & O & G \end{bmatrix}$
	City Jackson	State MS	Zip Code 39286-8696		Amount of Each Disbursement this Period
	Purpose of Disbursement			· · ·	198.00
	PRINTING Candidate Name			Category	Refund or Disposal of Excess Contributions Required Under
	Candidate Ivalle			Category/ Type	11 C.F.R. 400.53
		sement For:			PRINTING
	Senate	Primary Other (and	General		
	State: President State:	Other (spe	eciiy) ▼		
Г					
s	UBTOTAL of Disbursements This Page (optional	J)			486.86

91	CHEDIII E B /EEC Form 2	\				
	CHEDULE B (FEC Form 3		Use sepe	rate schedule(s)	FOR LINE (check only	NUMBER: PAGE 78 / 146
П	EMIZED DISBURSEMENT	S		category of the Summary Page	_ i `	X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports a for commercial purposes, other than using					or the purpose of solicating contributions
	NAME OF COMMITTEE (In Full)	<i>y</i>	4.14 444.00	or any pontion		
\rangle	Friends of Bennie Thompson					
Α.	Full Name (Last, First, Middle Initial) Classic Printing Company					Transaction ID: 60519.E4867 Date of Disbursement
	Mailing Address P.O. Box 68696					$\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ 1 & 9 & M \end{smallmatrix} & \begin{bmatrix} Y & Y & Y & O & O & O \\ Y & Y & O & O & O \end{bmatrix}$
	City Jackson		State MS	Zip Code 39286-8696		Amount of Each Disbursement this Period
	Purpose of Disbursement PRINTING				, ,	8138.50 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disburser	nent For: Primary Other (spe	General cify) ▼		PRINTING
	State: District:					
В.	Full Name (Last, First, Middle Initial) Coahoma Lighthouse Ministries					Transaction ID: 60519.E4961 Date of Disbursement
	Mailing Address 606 6th Street					$\begin{bmatrix} M & 5 & M \\ 0 & 5 & M \end{bmatrix} \ \begin{bmatrix} D & D \\ 1 & 0 \end{bmatrix} \ \begin{bmatrix} Y & Y & Y & O & O & O \\ Y & Y & O & O & O \end{bmatrix} $
	City Clarksdale		State VIS	Zip Code 38614-		Amount of Each Disbursement this Period
	Purpose of Disbursement RENT				1200.00 Refund or Disposal of Excess	
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disburser	ment For: Primary Other (spe	General		RENT
	State: District:		` '	<i>3</i> , 4		
C.	Full Name (Last, First, Middle Initial) Thelma B. Cocroft					Transaction ID: 60519.E4925 Date of Disbursement
	Mailing Address 603 Boyd St.					$\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix} $
	City Carthage		State MS	Zip Code 39051-		Amount of Each Disbursement this Period
	Purpose of Disbursement CANVASSING					200.00 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Senate President	Disburser	ment For: Primary Other (spec	General cify) ▼		CANVASSING
	State: District:			· 		
s	UBTOTAL of Disbursements This Page	(optional)				9538.50

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	CHEDULE B (FEC Form 3)	Use seperate schedul		FOR LINE (check only	NUMBER: PAGE 79 / 146
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Pa		1 ` <u>-</u>	X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and Statem for commercial purposes, other than using the name				
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson				
Α.	Full Name (Last, First, Middle Initial) Thelma B. Cocroft Mailing Address 603 Boyd St.				Transaction ID: 60519.E5017 Date of Disbursement
	City	State Zip Code MS 39051-			Amount of Each Disbursement this Period
	Purpose of Disbursement CANVASSING Candidate Name			Category/	Refund or Disposal of Excess Contributions Required Under
		ment For: Primary Gene		Type	11 C.F.R. 400.53 CANVASSING
	President State: District:	Other (specify)	I ai		
В.	Full Name (Last, First, Middle Initial) Ms. Sharlet Collins				Transaction ID: 60519.E4862 Date of Disbursement
	Mailing Address 1029 Hansen Street				$\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ 1 & 7 & 7 & 2 & 0 & 0 & 6 \\ \end{smallmatrix}$
		State Zip Code MS 39083-			Amount of Each Disbursement this Period
	Purpose of Disbursement CAMPAIGN RALLY				Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	ment For: Primary Gene Other (specify)	ral		CAMPAIGN RALLY
	State: District:				
C.	Full Name (Last, First, Middle Initial) Ms. Sharlet Collins				Transaction ID: 60519.E4859 Date of Disbursement
	Mailing Address 1029 Hansen Street				$\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{smallmatrix} & \begin{smallmatrix} I & D & D \\ 1 & 7 & 7 \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 & Y \end{bmatrix}$
		State Zip Code MS 39083-			Amount of Each Disbursement this Period
	Purpose of Disbursement FOOD FOR VOLUNTEERS			•	250.00
	Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President	ment For: Primary Gene Other (specify)	ral		FOOD FOR VOLUNTEERS
	State: District:	· · · · · ·			
s	UBTOTAL of Disbursements This Page (optional) .			>	1250.00

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	CHEDULE B (FEO	•	for each	erate schedule(s) category of the Summary Page	FOR LINE (check onl	-	R:	19a 20c		80 / 146 19b 21	
	y Information copied from s for commercial purposes, o					for the pu	rpose of s	solicating co	ontrib	utions	
	NAME OF COMMITTEE										
\rangle	Friends of Bennie Tho	,									
_	Full Name (Last, First, Mic	ddle Initial)				Transaction ID: 60519.E4877					
A.	Ms. Sharlet Collins					Date of Disbursement					
	Mailing Address 1029	Hansen Street			0 4		21	2 (OÓ6 [°]		
	City Hazlehurst		State MS	Zip Code 39083-		Amount of Each Disbursement this Period					
	Purpose of Disbursement CAMPAIGN RALLY			efund or F	Disposal of	_	776.00				
	Candidate Name		Category/ Type	Co		ns Required					
	Se	use Disburs nate esident	sement For: Primary Other (spe	General ccify) ▼		CAMF	PAIGN F	RALLY			
	State: Distric	t:									
В.	Full Name (Last, First, Mic Ms. Sharlet Collins	ddle Initial)				Date	of Disburs				
	Mailing Address 1029		0 5	M / D	0 5 Y	ž	o ŏ 6 Š				
	City Hazlehurst		Amou	int of Eacl	n Disbursei						
	Purpose of Disbursement CANVASSING					1155.00 Refund or Disposal of Excess				SS	
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Se	use Disburs nate esident	Primary Other (spe	General		CAN	/ASSINC	j.			
	State: Distric	_	outlot (ope	,oy) ∀							
С.	Full Name (Last, First, Mic Ms. Sharlet Collins						action ID	: 60519.E sement	4994	4	
	Mailing Address 1029	Hansen Street				0 ^M 5	M / D	1 2 / Y	ž (0 0 6	
	City Hazlehurst		State MS	Zip Code 39083-		Amou	int of Eacl	n Disbursei	nent 1	this Period	
	Purpose of Disbursement SEE BELOW; SALARIES	TRANSPORTATION				Re	efund or D	Disposal of	_	115.00	
	Candidate Name	Category/ Type	Co		ns Required						
	Se	nate esident	Primary Other (spe	General ♥		SEE I PORT	BELOW: FATION	; SALARII	ES T	RANS-	
_	State: Distric	ι:									

3346.00

SUBTOTAL of Disbursements This Page (optional)

SCHEDULE B (FEC Form 3)			l E	OR LINE	NIIMRE	D.				AGE	81 / 146	
	EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the		heck only		١ ١.				AGL	. 01/140	
•••	LIMIZED DISBORSEMENTS	Detailed Summary Page			X 17 20a		18 20b		19a 20d		19b 21	
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam											
\setminus	NAME OF COMMITTEE (In Full)											
/	Friends of Bennie Thompson											
Α.	Full Name (Last, First, Middle Initial) Ms. Sharlet Collins				Trans Date of				60519 ment	.E49	97	
	Mailing Address 1029 Hansen Street				0 ^M 5	М	/ D	1 :	^D /	Y	2006	
	City Hazlehurst	State Zip Code MS 39083-			Amount of Each Disbursement this Period 300.00 Refund or Disposal of Excess							
	Purpose of Disbursement FOOD										ess	
	Candidate Name		Cateo Typ	, ,	11	C.F	R. 4	00	Requir).53	ed Uı	nder	
	Senate President	ement For: Primary General Other (specify)			MEMO: FOOD							
	State: District:											
В.	Full Name (Last, First, Middle Initial) Ms. Sharlet Collins				Trans Date o				60519 ment	.E49	96	
	Mailing Address 1029 Hansen Street		0 ^M 5	М	/ D	1 :	2 /	Y 2	2006			
	City Hazlehurst		Amou	nt of	f Eacl	h [Disburs	emer	nt this Period			
	Purpose of Disbursement TRANSPORTATION				Refund or Disposal of Excess Contributions Required Under				300.00 cess			
	Candidate Name		Cateo Typ		11	C.F	R. 4	00	Requir).53	ed Ui	nder	
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)			(MEM			-	SPOR ⁻	ΓΑΤΙ	ON	
	State: District:											
C.	Full Name (Last, First, Middle Initial) Ms. Sharlet Collins				Trans Date o		-		60519 ment	.E49	95	
	Mailing Address 1029 Hansen Street				0 ^M 5	М	/ D	1 :	^D /	Y	2006	
	City Hazlehurst	State Zip Code MS 39083-			Amou	nt of	f Eac	h [Disburs	emer	nt this Period	
	Purpose of Disbursement			-							815.00	
	SALARIES Candidate Name	Cateo		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53								
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Тур	De .	[MEMO ITEM] MEMO: SALARIES							
	State: District:	, , , , , ,										
s	UBTOTAL of Disbursements This Page (optional)								•		0.00	

S	CHEDULE B (FEC Form 3)	FOR LINE	NUMBER: PAGE 82 / 146										
	EMIZED DISBURSEMENTS		erate schedule(s) category of the	(check only									
		Detailed :	Summary Page		X 17 18 19a 19b 20a 20b 20c 21								
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam												
$\overline{\ }$	NAME OF COMMITTEE (In Full)												
	Friends of Bennie Thompson												
١.	Full Name (Last, First, Middle Initial) Mr. Larry Cozart				Transaction ID: 60412.E4845 Date of Disbursement								
	Mailing Address P.O. Box 271				$\begin{bmatrix}\begin{smallmatrix}\mathbf{M} & \mathbf{M} $								
	011	0			Amount of Eoob Dichurs amount this Davied								
	City Lambert	State MS	Zip Code 38643-		Amount of Each Disbursement this Period								
	Purpose of Disbursement				500.00								
	SEE BELOW; SALARY TRAVEL EXPENSE Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53										
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼	71	SEE BELOW; SALARY TRAVEL EXPENSE								
	Full Name (Last, First, Middle Initial)		Transaction ID: 60412.E4846										
3.	Mr. Larry Cozart				Date of Disbursement								
	Mailing Address P.O. Box 271		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 1 \end{smallmatrix} \end{bmatrix} \ \ \ \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & O & O & G \\ \end{smallmatrix} \end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$										
	City Lambert	State MS	Zip Code 38643-		Amount of Each Disbursement this Period								
	Purpose of Disbursement SALARY				300.00 Refund or Disposal of Excess								
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]								
	Senate President	ement For: Primary Other (spe	General ♥		MEMO: SALARY								
	State: District: Full Name (Last, First, Middle Initial)												
).	Mr. Larry Cozart				Transaction ID: 60412.E4847 Date of Disbursement								
	Mailing Address P.O. Box 271				$\begin{bmatrix} \begin{smallmatrix} M & A & M \\ O & A & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & O & G \\ Y & Z & O & O & G \end{bmatrix}$								
	City Lambert		Amount of Each Disbursement this Period										
	Purpose of Disbursement TRAVEL EXPENSE				200.00								
	Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53								
	Senate President	ement For: Primary Other (spe	General ecify) ▼		[MEMO: TRAVEL EXPENSE								
	State: District:												
s	UBTOTAL of Disbursements This Page (optional)			>	500.00								

	CHEDULE B (FEC Form 3)		e schedule(s)	FOR LINE (check only					
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		Dotanou Gui	milary r ago		20a 20b 20c 21				
	y Information copied from such Reports and State for commercial purposes, other than using the na								
Λ	NAME OF COMMITTEE (In Full)								
/	Friends of Bennie Thompson								
	Full Name (Last, First, Middle Initial)				Transaction ID: 60519.E4881				
Α.	Mr. Larry Cozart				Date of Disbursement				
	Mailing Address P.O. Box 271				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
	City		ip Code		Amount of Each Disbursement this Period				
	Lambert Purpose of Disbursement	MS 3	38643- 		300.00				
	SALARY				Refund or Disposal of Excess				
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	°	sement For:			SALARY				
	Senate President	Other (specify	General ✓						
	State: District:	o trior (opcon)	'						
_	Full Name (Last, First, Middle Initial)				Transaction ID: 60519.E4896				
В.	Mr. Larry Cozart				Date of Disbursement				
	Mailing Address P.O. Box 271				$\begin{bmatrix} \begin{smallmatrix} M & A & M \\ O & A & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & B \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & O & O & G \end{bmatrix}$				
	City		ip Code 38643-		Amount of Each Disbursement this Period				
	Lambert		300.00						
	Purpose of Disbursement SALARY		Refund or Disposal of Excess						
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
		sement For:	0		SALARY				
	Senate President	Other (specify	General ✓						
	State: District:		<i>'</i>						
_	Full Name (Last, First, Middle Initial)				Transaction ID: 60519.E4910				
C.	Mr. Larry Cozart				Date of Disbursement				
	Mailing Address P.O. Box 271				$\begin{bmatrix} 0 & 5 & M \\ 0 & 5 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & D \\ 0 & 5 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 2 & 0 & 0 \\ 0 & 0 & M \end{bmatrix}$				
	City Lambert		ip Code 38643-		Amount of Each Disbursement this Period				
	Purpose of Disbursement SALARY				300.00				
	Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disbur	sement For:			SALARY				
	Senate	Primary	General		ONERITI				
	President State: District:	Other (specify	<i>(</i>) ▼						
Г									
s	UBTOTAL of Disbursements This Page (optiona)			900.00				

91	CHEDIII E B /EEC Form 2									
	CHEDULE B (FEC Form 3	-		erate schedule(s)	FOR LINE (check only	NUMBER: PAGE 84 / 146				
IT	EMIZED DISBURSEMEN	ΓS		category of the Summary Page		X 17				
	y Information copied from such Reports a for commercial purposes, other than usin					or the purpose of solicating contributions licit contributions from such committee				
\setminus	NAME OF COMMITTEE (In Full)									
	Friends of Bennie Thompson									
Α.	Full Name (Last, First, Middle Initial) Mr. Larry Cozart					Transaction ID: 60519.E4978 Date of Disbursement				
	Mailing Address P.O. Box 271					05 12 7 2006				
	City		State	Zip Code		Amount of Each Disbursement this Period				
	Lambert Purpose of Disbursement		MS	38643-		300.00				
	SALARY					Refund or Disposal of Excess				
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Senate	Disburser	ment For: Primary	General		SALARY				
	President		Other (spe							
_	State: District:									
В.	Full Name (Last, First, Middle Initial) Ms. Catherine Davis					Transaction ID: 60519.E4923 Date of Disbursement				
	Mailing Address 1108 Wilson La	ne				$\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & S \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ O & O & G \end{smallmatrix} \end{bmatrix}$				
	City Bolton		State MS	Zip Code 39041-		Amount of Each Disbursement this Period				
	Purpose of Disbursement CANVASSING	<u>'</u>	VIO	33041		510.00 Refund or Disposal of Excess				
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Senate	Disburser	Primary	General		CANVASSING				
	State: President District:		Other (spe	cify) 🔻						
_	Full Name (Last, First, Middle Initial)					Transaction ID: 60519.E5002				
C.	Ms. Catherine Davis					Date of Disbursement				
	Mailing Address 1108 Wilson La	ne				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$				
	City Bolton		State VIS	Zip Code 39041-		Amount of Each Disbursement this Period				
	Purpose of Disbursement SEE BELOW; SALARIES TRANSPOR	TATION			•	480.00				
	Candidate Name	TATION			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House	Disburser			715.5	SEE BELOW; SALARIES TRANS-				
	Senate President		Primary Other (spe	General		PORTATION , SALATILES TITALIS				
_	State: District:			~y / ▼						
S	UBTOTAL of Disbursements This Page	(optional)				1290.00				

91	CHEDIII E B /EEC Form 3) \					
	CHEDULE B (FEC Form 3	-		erate schedule(s)	FOR LINE (check only	NUMBER: PAGE 85 / 146	
IT	EMIZED DISBURSEMEN	TS		category of the Summary Page	_ i `	X 17	
	y Information copied from such Reports for commercial purposes, other than using					for the purpose of solicating contributions licit contributions from such committee	
\setminus	NAME OF COMMITTEE (In Full)						
\angle	Friends of Bennie Thompson						
Α.	Full Name (Last, First, Middle Initial) Ms. Catherine Davis					Transaction ID: 60519.E5003 Date of Disbursement	
	Mailing Address 1108 Wilson La	ne			0 5 M / D 1 D / Y Y Y O O 6 Y		
	City Bolton		State MS	Zip Code 39041-		Amount of Each Disbursement this Period	
	Purpose of Disbursement	<u>'</u>	NIO	39041-	v v	150.00	
	FOOD					Refund or Disposal of Excess Contributions Required Under	
	Candidate Name				Category/ Type	11 C.F.R. 400.53	
	Office Sought: House	Disburser				[MEMO ITEM] MEMO: FOOD	
	Senate President		Primary Other (spe	General			
	State: District:		Other (spe	City) 🔻			
	Full Name (Last, First, Middle Initial)					Transaction ID: 60519.E5005	
В.	Ms. Catherine Davis					Date of Disbursement	
	Mailing Address 1108 Wilson La		$ \begin{bmatrix} M & 5 & M \\ 0 & 5 & M \end{bmatrix} \begin{bmatrix} D & 1 & D \\ 1 & 2 & M \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$				
	City		State	Zip Code		Amount of Each Disbursement this Period	
	Bolton		MS	39041-		100.00	
	Purpose of Disbursement TRANSPORTATION					Refund or Disposal of Excess	
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Senate	Disburser	ment For: Primary	General		[MEMO ITEM] MEMO: TRANSPORTATION	
	President		Other (spe				
	State: District:						
C.	Full Name (Last, First, Middle Initial) Ms. Catherine Davis					Transaction ID: 60519.E5004 Date of Disbursement	
	Mailing Address 1108 Wilson La	ne				$\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & \check{Y} & O & O & O \\ 2 & 0 & O & O & O \end{bmatrix}$	
	City Bolton		State MS	Zip Code 39041-		Amount of Each Disbursement this Period	
	Purpose of Disbursement SALARIES					230.00	
	Candidate Name				Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House	Disburser	ment For:		Туре	[MEMO ITEM]	
	Senate	Dissuisei	Primary	General		MEMO: SALARIES	
	President		Other (spe				
_	State: District:						
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	y Information copied from such Reports and for commercial purposes, other than using t				or the purpose of sol	licating contributions			
\vdash	NAME OF COMMITTEE (In Full)								
$ \rangle$	Friends of Bennie Thompson								
_	Full Name (Last, First, Middle Initial)				Transaction ID:	20510 E4905			
A.	Ms. Temeka Davis				Transaction ID: 60519.E4895 Date of Disbursement				
	Mailing Address 4444 St. Thomas	Rd.			04 / 2	8 / 2006			
	City Bolton	State MS	Zip Code 39041-		Amount of Each I	Disbursement this Period			
	Purpose of Disbursement					300.00			
	SALARY					posal of Excess			
	Candidate Name			Category/ Type	Contributions 11 C.F.R. 400	Required Under 0.53			
	Office Sought: House Senate President	Disbursement For: Primary Other (spe	General ecify) ▼		SALARY				
	State: District:		<i>37</i> , ▼						
	Full Name (Last, First, Middle Initial)				Transaction ID: (20510 E4000			
B.	Ms. Temeka Davis				Date of Disburser	ment			
	Mailing Address 4444 St. Thomas		0 5 0	5 / 2006					
	City Bolton	State MS	Zip Code 39041-		Amount of Each I	Disbursement this Period			
	Purpose of Disbursement SALARY				Refund or Dis	300.00 posal of Excess			
	Candidate Name			Category/ Type	Contributions 11 C.F.R. 400	Required Under 0.53			
	Office Sought: House Senate	Disbursement For: Primary	General		SALARY				
	President	Other (spe							
	State: District:								
C.	Full Name (Last, First, Middle Initial) Ms. Temeka Davis				Transaction ID: 0 Date of Disburser				
	Mailing Address 4444 St. Thomas		05 1	$\begin{bmatrix} 0 \\ 2 \end{bmatrix}$ $\begin{bmatrix} 1 \\ 2 \\ 0 \\ 0 \\ 6 \end{bmatrix}$					
	City Bolton	State MS	Zip Code 39041-		Amount of Each [Disbursement this Period			
	Purpose of Disbursement		1			300.00			
	SALARY					posal of Excess			
	Candidate Name	Category/ Type	11 C.F.R. 400	Required Under 0.53					
	Office Sought: House Senate	Disbursement For: Primary	General		SALARY				
	President	Other (spe							
	State: District:	3 (ope	·- J/ ▼						

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	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINI	E NUMBER: PAGE 87 / 146
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(311331131	X 17 18 19a 19b
An	y Information copied from such Reports and State	ments may not be sold or used	l d by any person	
	or commercial purposes, other than using the nan			
$ \rangle$	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
\mathbb{L}	Theras of Bernie Thompson			
A.	Full Name (Last, First, Middle Initial) DCCC			Transaction ID: 60519.C7700IK Date of Disbursement
	Mailing Address 430 South Capitol St			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Washington	State Zip Code DC 20003-		Amount of Each Disbursement this Period
	Purpose of Disbursement FUNDRAISING EXPENSE		v v	26.67
	Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		IN KIND: FUNDRAISING EXPE- NSE
	State: District:			
В.	Full Name (Last, First, Middle Initial) Democratic Properties Corporation			Transaction ID: 60519.E4963 Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address 430 South Capitol Stree	05 11 2006		
	City Washington	State Zip Code DC 20003-		Amount of Each Disbursement this Period
	Purpose of Disbursement FACILITIES RENTAL	20003-		150.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	ement For: Primary General Other (specify)		FACILITIES RENTAL
	State: District: Full Name (Last, First, Middle Initial)			
C.	Mr. Larry Dennis			Transaction ID: 60410.E4800 Date of Disbursement
	Mailing Address P.O. Box 582			04
	City Pickens	State Zip Code MS 39146-		Amount of Each Disbursement this Period
	Purpose of Disbursement SALARY		•	1100.00
	Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Senate	ement For: Primary General		SALARY
	State: President State:	Other (specify) ▼		
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S	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE	_	PAGE 88 / 146				
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	for commercial purposes, other than using the name								
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson								
۹.	Full Name (Last, First, Middle Initial) Diversified Computer Solutions			Transaction ID: 604 Date of Disbursement	t				
	Mailing Address 2168 Monaco Street			$\begin{bmatrix} 0 & 4 & M & J & D & D & D & D & D & D & D & D & D$	2006				
	•	State Zip Code MS 39204-		Amount of Each Disb					
	Purpose of Disbursement COMPUTER MAINTENANCE Candidate Name	[Category/	Refund or Disposa Contributions Req 11 C.F.R. 400.53					
	Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify)	Туре	COMPUTER MAIN	TENANCE				
3.	Full Name (Last, First, Middle Initial) Diversified Computer Solutions			Transaction ID: 605 Date of Disbursement					
	Mailing Address 2168 Monaco Street			$\begin{bmatrix} 0 & 4 & M & / & 1 & 7 \end{bmatrix}$	Ž O O G Š				
	•	State Zip Code MS 39204-		Amount of Each Disb					
	Purpose of Disbursement COMPUTER REPAIR Candidate Name		Category/ Type	Refund or Dispose Contributions Req 11 C.F.R. 400.53					
	Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼		COMPUTER REPA	JR				
Э.	Full Name (Last, First, Middle Initial) Entergy			Transaction ID: 604 Date of Disbursement	t				
	Mailing Address P.O. Box 8105			$\begin{bmatrix} 0 & 4 & M \\ 0 & 4 & M \end{bmatrix}$	2006				
	•	State Zip Code LA 70891-		Amount of Each Disb					
	Purpose of Disbursement UTILITIES			Refund or Disposa					
	Candidate Name		Category/ Type	Contributions Req	uired Under				
	Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼		UTILITIES					
S	SUBTOTAL of Disbursements This Page (optional)								
	OTAL This Period (last page this line number only)								

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s for each category of the Detailed Summary Page) FOR LINE (check on	PAGE 89 / 146 ly one) X 17		
	y Information copied from such Reports and St for commercial purposes, other than using the			for the purpose of solicating contributions		
Oi	<u> </u>	ame and address of any politica	ii committee to so	Olicit Contributions from Such Committee		
$ \rangle$	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson					
_	Full Name (Last, First, Middle Initial)			Transaction ID: 60412.E4825		
Α.	Entergy	Date of Disbursement				
	Mailing Address P.O. Box 8105	$\begin{bmatrix} 0 & 4 & M \\ 0 & 4 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 0 \\ 0 & 1 & 0 \end{bmatrix} / \begin{bmatrix} 0 & 1 & 0 \\ 0 & 2 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix}$				
	City Baton Rouge		Amount of Each Disbursement this Period			
	Purpose of Disbursement	79.29				
	UTILITIES Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disk Senate President	ursement For: ☐ Primary ☐ General ☐ Other (specify) ▼		UTILITIES		
	State: District:					
В.	Full Name (Last, First, Middle Initial) Entergy	Transaction ID: 60519.E4894 Date of Disbursement				
	Mailing Address P.O. Box 8105	0 4 M / 2 8 / Y 2 0 0 6 Y				
	City Baton Rouge	State Zip Code LA 70891-		Amount of Each Disbursement this Period		
	Purpose of Disbursement UTILITIES	343.56 Refund or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Senate	ursement For: Primary General		UTILITIES		
	President State: District:	Other (specify)				
_	Full Name (Last, First, Middle Initial)			Transaction ID: 60519.E4962		
C.	Entergy			Date of Disbursement		
	Mailing Address P.O. Box 8105			05 11 7 2006		
	City Baton Rouge	State Zip Code LA 70891-		Amount of Each Disbursement this Period		
	Purpose of Disbursement UTILITIES			132.65		
	Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Senate	ursement For: Primary General		UTILITIES		
	President State: District:	Other (specify)				

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C.		,					
	CHEDULE B (FEC Form 3	USE	Use seperate schedule(s)			NUMBER: one)	PAGE 90 / 146
IT	ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page		l ` <u>-</u>	X 17	19a 19b 20c 21
	y Information copied from such Reports ar for commercial purposes, other than using						
\setminus	NAME OF COMMITTEE (In Full)						
\mathbb{Z}	Friends of Bennie Thompson						
A.	Full Name (Last, First, Middle Initial) Entergy					Transaction ID: 605 Date of Disbursemen	t
	Mailing Address P.O. Box 8105					05 16	Ž O Ď 6 Š
	City Baton Rouge	State LA	Zip Code 70891-			Amount of Each Disb	ursement this Period
	Purpose of Disbursement UTILITIES				•	Refund or Dispos	260.57 al of Excess
	Candidate Name				Category/ Type	Contributions Rec	uired Under
	Office Sought: House Senate President	Disbursement I		eral		UTILITIES	
	State: District:		. (opcony) •				
В.	Full Name (Last, First, Middle Initial) Ms. LaTasha Estus					Transaction ID: 604 Date of Disbursemen	t
	Mailing Address P.O. Box 16177					04 / 10	2006
	City Jackson	State MS	Zip Code 39236-			Amount of Each Disb	
	Purpose of Disbursement WEBSITE DESIGN	•	Refund or Disposal of Excess Contributions Required Under				
	Candidate Name			C	Category/ Type	Contributions Req	uired Under
	Office Sought: House Senate President	Disbursement I Prima Othe		eral		WEBSITE DESIGN	I
	State: District:		(6666)				
C.	Full Name (Last, First, Middle Initial) Federal Express					Transaction ID: 604 Date of Disbursemen	
	Mailing Address P.O. Box 94515					04 / 10	2006
	City Palatine	State IL	Zip Code 60094-4	515		Amount of Each Disb	ursement this Period
	Purpose of Disbursement OVERNIGHT DELIVERY				•	Refund or Dispos	80.02
	Candidate Name				Category/ Type	Contributions Rec 11 C.F.R. 400.53	
	Office Sought: House Senate President	Disbursement I		eral		OVERNIGHT DELI	VERY
_	State: District:		(Spoon)				
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IT	ITEMIZED DISBURSEMENTS		for each o	category of the	(спеск	only one)
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						on for the purpose of solicating contributions
or	for commercial purposes, other than using	g the name	and addres	ss of any political	committee to	o solicit contributions from such committee
Ν	NAME OF COMMITTEE (In Full)					
/	Friends of Bennie Thompson					
<u></u>	Full Name (Last, First, Middle Initial)					Transaction ID: 60510 E4040
A.	Federal Express					Transaction ID: 60519.E4940 Date of Disbursement
						05 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address P.O. Box 94515					0.5 . 0.9 . 2006
	City	(State	Zip Code		Amount of Each Disbursement this Period
	Palatine		IL	60094-4515		
	Purpose of Disbursement OVERNIGHT DELIVERY					34.23
	Candidate Name				Category/	Refund or Disposal of Excess Contributions Required Under
	Cardidate Ivario				Type	11 C.F.R. 400.53
	Office Sought: House	Disburse	ment For:			OVERNIGHT DELIVERY
	Senate		Primary	General		OVERNIGHT DELIVERY
	President		Other (spe	cify) 🔻		
	State: District:					
В.	Full Name (Last, First, Middle Initial) Fernandez Creative Services					Transaction ID: 60519.E5068
	remandez Greative Services					Date of Disbursement
	Mailing Address 200 Commerce/	Suite B				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City		State	Zip Code		Amount of Each Disbursement this Period
	Jackson		MS	39205-		306.50
	Purpose of Disbursement RADIO SPOT PRODUCTION					
	Candidate Name	Refund or Disposal of Excess Contributions Required Under				
					Category/ Type	11 C.F.R. 400.53
	Office Sought: House	Disburse	ment For:			RADIO SPOT PRODUCTION
	Senate		Primary	General		TIABLE OF OTT HODGOTION
	State: President District:		Other (spe	city) 🔻		
	Full Name (Last, First, Middle Initial)					
C.	Flowers & Frames By Will, Inc.					Transaction ID: 60410.E4809 Date of Disbursement
						M M / D D / Y Y Y Y
	Mailing Address P.O. Box 3036					0 4 0 6 2 0 0 6
	City		State	Zip Code		Amount of Each Disbursement this Period
	Jackson		MS	39207-		100.40
	Purpose of Disbursement FLORAL ARRANGEMENT					128.40
	Candidate Name				Category/	Refund or Disposal of Excess Contributions Required Under
	Cardidate Ivario				Type	11 C.F.R. 400.53
	Office Sought: House	Disburse	ment For:			FLODAL ADDANGEMENT
	Senate		Primary	General		FLORAL ARRANGEMENT
	President		Other (spe	cify) 🔻		
_	State: District:					
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	y Information copied f for commercial purpo:												
\setminus	NAME OF COMMIT	TEE (In Full)											
\backslash	Friends of Bennie	Thompson											
Α.	Full Name (Last, First, Middle Initial) A. Mr. Stephen Gavin							Date o	action I	seme			
	Mailing Address P.O. Box 351							0 4		1 9		20	0 6
	City			State	Zip Code			Amou	nt of Eac	h Dis	bursen	nent tl	nis Period
	Tougaloo			MS	39174-							-	49.54
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	Candidate Name						egory/ /pe		ontribution C.F.R.			Unde	er
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (spe	General			SEE E HASE	BELOW	; EQ	UIPM	ENT	PURC-
	State: D	istrict:		Othor (ope	∀								
	Full Name (Last, Firs	st, Middle Initial)						Trans	action I) . 60	814 F	5493	
В.	Walmart							Date o	of Disbur	seme	-		
	Mailing Address	2711 Greenway	Dr.					0 4	M / L	1 9	/ _	2 0	0 6
	City Jackson			State MS	Zip Code 39204-			Amou	nt of Ead	h Dis	bursen	nent t	nis Period
	Purpose of Disbursement EQUIPMENT PURCHASE						-	49.54 Refund or Disposal of Excess					
	Candidate Name		Category/ Type Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]										
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (spe	General		·		O ITEN D: EQU		ENT P	URC	HASE
	State: D	istrict:											
C.	Full Name (Last, First Mr. Stephen Gavi								action I ll of Disbur			4885	
	Mailing Address	P.O. Box 351						0 ^M 4	M / D	21	/ Y	ž o	0 6 °
	City Tougaloo			State MS	Zip Code 39174-			Amou	nt of Ead	h Dis	bursen	nent t	nis Period
	Purpose of Disburse SEE BELOW; BANG						$\overline{}$		efund or	Diame.	and of F	_	60.00
	Candidate Name	QOLI HOKEI					egory/ vpe	L Co	ontribution C.F.R.	ns Re	equired		
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (spe	General ecify) ▼			SEE E	BELOW	; BA	NQUE	ET TI	CKET
	State: D	istrict:			<u> </u>								
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F. M	* *		committee to so	
Fı A. M	riends of Bennie Thompson			
4. M				
_	ull Name (Last, First, Middle Initial) Îr. Stephen Gavin			Transaction ID: 60519.E4905 Date of Disbursement
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	ity ougaloo	State Zip Code MS 39174-		Amount of Each Disbursement this Period
	urpose of Disbursement RAVEL EXPENSE			27.55 Refund or Disposal of Excess
_	andidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	ffice Sought: House Disburs Senate President tate: District:	ement For: Primary General Other (specify)		TRAVEL EXPENSE
Fı	ull Name (Last, First, Middle Initial) Is. Trina George			Transaction ID: 60519.E4866 Date of Disbursement
_	lailing Address P.O. Box 776			0 4 M / D 1 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ity Iorth Carrollton	State Zip Code MS 38947-		Amount of Each Disbursement this Period
Pı	urpose of Disbursement RAVEL EXPENSE			121.50
_	andidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	fflice Sought: House Disburs Senate President tate: District:	ement For: Primary General Other (specify)		TRAVEL EXPENSE
_	ull Name (Last, First, Middle Initial) ilobal Crossing Conferencing			Transaction ID: 60412.E4829 Date of Disbursement
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	ity enver	State Zip Code CO 80291-0518		Amount of Each Disbursement this Period
C	urpose of Disbursement ONFERENCING			211.35 Refund or Disposal of Excess
C	andidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	ffice Sought: House Disburs Senate President tate: District:	ement For: Primary General Other (specify)		CONFERENCING
	RTOTAL of Disbursements This Page (optional)			360.40

SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 94 / 146 Use seperate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Friends of Bennie Thompson Full Name (Last, First, Middle Initial) Transaction ID: 60519.E4951 Robert Grayson Date of Disbursement 10 0 5 2006 Mailing Address P.O. Box 225 City State Zip Code Amount of Each Disbursement this Period MS 38963-Tutwiler 450.00 Purpose of Disbursement **TRANSPORTATION** Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: House **TRANSPORTATION** General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 60519.E5042 Robert Grayson Date of Disbursement 0 5 2006 Mailing Address P.O. Box 225 City State Zip Code Amount of Each Disbursement this Period 38963-Tutwiler MS 1110.00 Purpose of Disbursement SEE BELOW; SALARIES TRANSPORTATION Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: SEE BELOW; SALARIES TRANS-PORTATION Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 60519.E5045 C. Robert Grayson Date of Disbursement 2006 Mailing Address P.O. Box 225 City State Zip Code Amount of Each Disbursement this Period Tutwiler MS 38963-200.00 Purpose of Disbursement FOOD Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Office Sought: House Disbursement For: MEMO: FOOD Senate Primary General President Other (specify) State: District: 1560.00

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						for the purpose of solicating contributions licit contributions from such committee
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson					
Α.	Full Name (Last, First, Middle Initial Robert Grayson Mailing Address P.O. Box 22					Transaction ID: 60519.E5043 Date of Disbursement O 5 M / D 1 D / Y Y Y O O 6
	City Tutwiler Purpose of Disbursement SALARIES		State MS	Zip Code 38963-		Amount of Each Disbursement this Period 600.00 Refund or Disposal of Excess
	Office Sought: House Senate President State: District:	Disburse	ement For: Primary Other (spe	General ecify)	Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SALARIES
_	Full Name (Last, First, Middle Initia	<u> </u>				Transaction ID: 60519.E5044
B.	Robert Grayson Mailing Address P.O. Box 22	5				Date of Disbursement O 5 M / D 1 D / Y Y Y O O 6 Y
	City Tutwiler Purpose of Disbursement		State MS	Zip Code 38963-		Amount of Each Disbursement this Period 310.00
	TRANSPORTATION Candidate Name				Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: Senate President State: District:	Disburse	ement For: Primary Other (spe	General ecify) ▼		[MEMO ITEM] MEMO: TRANSPORTATION
C.	Full Name (Last, First, Middle Initia Beulah Greer)				Transaction ID: 60519.E4924 Date of Disbursement
	Mailing Address 301 Henry S	Street				05 7 2006
	City Lexington		State MS	Zip Code 39095-		Amount of Each Disbursement this Period
	Purpose of Disbursement CANVASSING Candidate Name				Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: Senate President State: District:	Disburse	ement For: Primary Other (spe	General ecify) ▼		CANVASSING
Г	State. DISTRICT.					
s	UBTOTAL of Disbursements This F	age (optional)			>	1125.00

2							
	CHEDULE B (FEC Form 3)		rate schedule(s)	FOR LINE (check only	NUMBER: PAGE 96 / 146		
IT	ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page		X 17 18 19a 19b		
_					20a 20b 20c 21		
	y Information copied from such Reports and Statem for commercial purposes, other than using the name						
Λ	NAME OF COMMITTEE (In Full)						
//	Friends of Bennie Thompson						
_	Full Name (Last, First, Middle Initial)				Transaction ID: 60519.E4936		
Α.	Beulah Greer				Date of Disbursement		
	Mailing Address 301 Henry Street		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
		State MS	Zip Code 39095-		Amount of Each Disbursement this Period		
	Purpose of Disbursement	IVIO	33033-		357.89		
	RALLY				Refund or Disposal of Excess		
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse	ment For: Primary	General		RALLY		
	President	Other (spe					
	State: District:						
В.	Full Name (Last, First, Middle Initial)				Transaction ID: 60519.E5006		
Ь.	Beulah Greer				Date of Disbursement		
	Mailing Address 301 Henry Street		$ \begin{bmatrix} 0 & 5 & M \\ 0 & 5 & M \end{bmatrix} \begin{bmatrix} 0 & 1 & 2 \\ 0 & 1 & 2 \end{bmatrix} \begin{bmatrix} 0 & 2 & 0 & 0 & 6 \\ 0 & 2 & 0 & 0 & 6 \end{bmatrix} $				
		State	Zip Code		Amount of Each Disbursement this Period		
	Lexington Purpose of Disbursement	MS	39095-		955.00		
	SEE BELOW; SALARIES TRANSPORTATION	Refund or Disposal of Excess					
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse	ment For: Primary	General		SEE BELOW; SALARIES TRANS- PORTATION		
	President	Other (spe			PORTATION		
	State: District:						
C.	Full Name (Last, First, Middle Initial) Beulah Greer				Transaction ID: 60519.E5009 Date of Disbursement		
	Mailing Address 301 Henry Street				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$		
		State MS	Zip Code 39095-		Amount of Each Disbursement this Period		
	Purpose of Disbursement FOOD				255.00 Refund or Disposal of Excess		
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
		ment For:			[MEMO ITEM] MEMO: FOOD		
	Senate President	Primary Other (spe	General				
	State: District:	Julio (Spe	~y/ ▼				
	<u>'</u>				1010.00		
S	UBTOTAL of Disbursements This Page (optional) .				1312.89		

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	for each cat	e schedule(s) egory of the mmary Page	(check only	NUMBER: PAGE 97 / 146 / one) X 17	
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam				or the purpose of solicating contributions	
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson					
Α.	Full Name (Last, First, Middle Initial) Beulah Greer Mailing Address 301 Henry Street				Transaction ID: 60519.E5007 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City Lexington		ip Code 39095-		Amount of Each Disbursement this Period 400.00	
	Purpose of Disbursement SALARIES Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (specify	General y) ▼		[MEMO ITEM] MEMO: SALARIES	
В.	Full Name (Last, First, Middle Initial) Beulah Greer				Transaction ID: 60519.E5008 Date of Disbursement	
	Mailing Address 301 Henry Street		0 5 M / 1 2 / Y 2 0 0 6 Y			
	City Lexington		ip Code 39095-		Amount of Each Disbursement this Period	
	Purpose of Disbursement TRANSPORTATION Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Senate President	ement For: Primary Other (specify	General y) ▼	71	[MEMO ITEM] MEMO: TRANSPORTATION	
— С.	State: District: Full Name (Last, First, Middle Initial) ICBC Broadcast Holdings, Inc.				Transaction ID: 60519.E4938	
	Mailing Address 731 S. Pear Orchard Ro	ad			Date of Disbursement O 5 D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City Ridgeland		Tip Code 39157-		Amount of Each Disbursement this Period	
	Purpose of Disbursement RADIO SPOTS Candidate Name			Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Disburse Senate President	ement For: Primary Other (specification)	General	Туре	RADIO SPOTS	
	State: District:		<i>•</i>			
s	UBTOTAL of Disbursements This Page (optional)				14126.75	

50	CHEDULE B (FEC Form 3)	Use sepe	erate schedule(s)	-	NUMBER: PAGE 98 / 146			
IT	EMIZED DISBURSEMENTS	for each o	category of the Summary Page	(check only	X 17			
	y Information copied from such Reports and Statem for commercial purposes, other than using the name							
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson							
Α.	Full Name (Last, First, Middle Initial) ICBC Broadcast Holdings, Inc. Mailing Address 731 S. Pear Orchard Roa	ad			Transaction ID: 60519.E4937 Date of Disbursement M 5 M			
		State MS	Zip Code 39157-		Amount of Each Disbursement this Period			
	Purpose of Disbursement RADIO SPOTS Candidate Name	ment For:		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Senate President State: District:	Primary Other (spe	General cify) ▼		RADIO SPOTS			
В.	Full Name (Last, First, Middle Initial) Independent Security Company				Transaction ID: 60519.E5067 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	Mailing Address P.O. Box 10135	Ctata	7in Codo					
	,	State MS	Zip Code 39286-		Amount of Each Disbursement this Period 280.00			
	EQUIPMENT INSTALLATION Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: Senate President State: Disburse Disburse	ment For: Primary Other (spe	General cify) ▼		EQUIPMENT INSTALLATION			
C.	Full Name (Last, First, Middle Initial) Ingram Signs & Screenprinting				Transaction ID: 60519.E4965 Date of Disbursement			
	Mailing Address 7605 Hwy. 35 South				$\begin{bmatrix} 0.5 & M \\ 0.5 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 1 & 1 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{bmatrix}$			
	Forest	State MS	Zip Code 39074-		Amount of Each Disbursement this Period			
	Purpose of Disbursement SIGNS Candidate Name	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General cify) ▼		SIGNS			
s	SUBTOTAL of Disbursements This Page (optional)							
T	OTAL This Period (last page this line number only)							

91	CHEDIII E B /EEC Form 2	\				
	CHEDULE B (FEC Form 3	-		erate schedule(s)	FOR LINE (check only	NUMBER: PAGE 99 / 146
ITEMIZED DISBURSEMENT		for each category of the Detailed Summary Page		_ i `	X 17	
	y Information copied from such Reports a for commercial purposes, other than usin					
\setminus	NAME OF COMMITTEE (In Full)					
	Friends of Bennie Thompson					
Α.	Full Name (Last, First, Middle Initial) Jackson Advocate					Transaction ID: 60412.E4844 Date of Disbursement
	Mailing Address 438 N. Mill Street	$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 4 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$				
	City Jackson		State MS	Zip Code 39202-		Amount of Each Disbursement this Period
	Purpose of Disbursement AD					500.00
	Candidate Name				Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disburser	ment For: Primary Other (spe	General cify) ▼		AD
	State: District:					
В.	Full Name (Last, First, Middle Initial) Cliff Johnson					Transaction ID: 60523.C7885IK Date of Disbursement
	Mailing Address 701 Lakeridge C		$\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix} $			
	City Clinton		State MS	Zip Code 39056-		Amount of Each Disbursement this Period
	Purpose of Disbursement FUNDRAISING EXPENSE					275.00 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disburser	ment For: Primary Other (spe	General		IN KIND: FUNDRAISING EXPENSE
	State: District:		` '	<i>37</i>		
C.	Full Name (Last, First, Middle Initial) David Jordan					Transaction ID: 60519.E4926 Date of Disbursement
	Mailing Address P.O. Box 8173					$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 5 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 5 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & G \end{smallmatrix} \end{bmatrix}$
	City Greenwood		State MS	Zip Code 38935-		Amount of Each Disbursement this Period
	Purpose of Disbursement CANVASSING				• •	1500.00
	Candidate Name				Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disburser	nent For: Primary Other (spe	General		CANVASSING
_	State: District:					
s	UBTOTAL of Disbursements This Page	(optional)			•	2275.00

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	CHEDULE B (FEC Form 3 EMIZED DISBURSEMENTS	s	for each	erate schedule(s) category of the Summary Page	FOR LINE (check on	E NUMBE ily one) X 17 20a	R: 18 20b	19a 20c	GE	100 / 146 19b 21
	y Information copied from such Reports an for commercial purposes, other than using									
6	NAME OF COMMITTEE (In Full)	ine name a	nu auure	ss of arry political	Committee to s	Olicit Corti	ibutions i	TOTT SUCTION	,011111	iiilee
	Friends of Bennie Thompson									
Α.	Full Name (Last, First, Middle Initial) David Jordan	Transaction ID: 60519.E5018 Date of Disbursement								
	Mailing Address P.O. Box 8173	0 5		12 /	2	0 0 6 °				
	City Greenwood		Amou	nt of Eac	h Disburse	-	this Period			
	Purpose of Disbursement SEE BELOW; SALARIES TRANSPORT				_	450.00				
	Candidate Name		Category/ Type	L Co		Disposal of ns Require 00.53				
	Senate President		ent For: rimary other (spe	General cify) ▼		SEE E PORT	BELOW ATION	; SALARI	ES T	ΓRANS-
_	State: District:									
В.	Full Name (Last, First, Middle Initial) David Jordan		Date o	of Disburs						
	Mailing Address P.O. Box 8173	0 5		12 /	2	0 0 6 °				
	City Greenwood		Amount of Each Disbursement this Period 250.00							
	Purpose of Disbursement SALARIES		D.);	-				
	Candidate Name		Category/ Type	11	ntributior C.F.R. 4		Exce d Und	ss der		
	Office Sought: House Senate President		ent For: rimary other (spe	General			O ITEM D: SALA			
	State: District:		\ 1	, ,						
C.	Full Name (Last, First, Middle Initial) David Jordan					Date o	of Disburs			
	Mailing Address P.O. Box 8173					0 ^M 5	M / D	12 /	ž	0 0 6
	City Greenwood								-	this Period
	Purpose of Disbursement TRANSPORTATION				•		fund == F	Names -L st	-	150.00
	Candidate Name				Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Senate President		ent For: rimary other (spe	General		[MEMO: TRANSPORTATION				
	State: District:		√ - I							

450.00

SUBTOTAL of Disbursements This Page (optional)

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SCHEDULE B (FEC Form 3		Use seperate schedule(s)					E NUMBER: PAGE 101 / 146			
ITEMIZED DISBURSEMENT		for each category of the Detailed Summary Page				(check onl				
				Detailed	Juninary r age			20a 20b	— —	
		ed from such Reports ar poses, other than using								
abla	NAME OF COM	ЛІТТЕЕ (In Full)								
/	Friends of Ben	nie Thompson								
_		First, Middle Initial)						Transaction II	D: 60519.E5021	
Α.	David Jordan							Date of Disbur		
	Mailing Address P.O. Box 8173							$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	City			State	Zip Code			Amount of Eac	ch Disbursement this Period	
	Greenwood			MS	38935-					
	Purpose of Disbu	rsement					•	— Refund or	50.00 Disposal of Excess	
	Candidate Name					Ca	ategory/	Contributio	ns Required Under	
							Туре	11 C.F.R. 4 [MEMO ITEN		
	Office Sought:		Disburse	ment For:	□			MEMO: FOO		
		Senate President		Primary	General					
	State:	District:		Other (spe	eciry) 🔻					
_		First, Middle Initial)								
В.	Joyces Caterin							Date of Disbur		
	Mailing Address 711 Rice Road, Apt. 29-C							04	06 7 2006	
	City		(State	Zip Code			Amount of Eac	ch Disbursement this Period	
	Ridgeland			MS	39157-					
	Purpose of Disbursement								500.00	
	FOOD FOR VOLUNTEER Condidate Name						/		Disposal of Excess ons Required Under	
							ategory/ Type	11 C.F.R. 400.53		
	Office Sought:		Disburse	ment For:				FOOD FOR	VOLUNTEER	
		Senate		Primary	General					
	State:	President District:		Other (spe	ecity) 🔻					
_		First, Middle Initial)							D 00540 07000U/	
C.	Al Levy	mot, madio milaly						Date of Disbur	D: 60519.C7863IK	
								M M / D		
	Mailing Address	1528 Lakeside Dı	rive					0 5	17 2006	
	City Jackson			State MS	Zip Code 39216-			Amount of Eac	ch Disbursement this Period	
	Purpose of Disbu	rsement							500.00	
	FUNDRAISING E								Disposal of Excess	
							ategory/ Type	Contributio	ns Required Under 400.53	
	Office Sought:	House	Disburse	ment For:		•		ועו אואיטי בי וו	NDRAISING EXPE-	
		Senate		Primary	General			NSE NSE	ADITAIONA EVEE-	
	-	President		Other (spe	ecify) 🔻					
_	State:	District:								
s	SUBTOTAL of Disb	oursements This Page (o	optional) .				▶		1000.00	

	CHEDULE B (FEC Form 3)	Use seperate schedule(s	:) I		NUMBER: PAGE 102 / 146			
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page		(check only	X 17			
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam							
\setminus	NAME OF COMMITTEE (In Full)							
$ \rangle$	Friends of Bennie Thompson							
Α.	Full Name (Last, First, Middle Initial) Lockheed Martin Employees PAC				Transaction ID: 60519.C7662IK Date of Disbursement O 4			
	Mailing Address 1550 Crystal Drive, Crys Suite 300	· 						
	City Arlington	State Zip Code VA 22202-			Amount of Each Disbursement this Period			
	Purpose of Disbursement FUNDRAISING EXPENSE				1538.00 Refund or Disposal of Excess			
	Candidate Name			egory/ ype	Contributions Required Under 11 C.F.R. 400.53			
	Senate President	ement For: Primary General Other (specify)			IN KIND: FUNDRAISING EXPENSE			
	State: District:							
В.	Full Name (Last, First, Middle Initial) Marcus Willis Design		Transaction ID: 60412.E4834 Date of Disbursement					
	Mailing Address 18959 Dallas Parkway 2		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & O & G \end{smallmatrix} \end{bmatrix} $					
	City Dallas	State Zip Code TX 75287-			Amount of Each Disbursement this Period			
	Purpose of Disbursement GRAPHIC DESIGN			330.00 Refund or Disposal of Excess				
	Candidate Name		egory/ ype	Contributions Required Under 11 C.F.R. 400.53				
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)			GRAPHIC DESIGN			
	State: District:	Carlor (opcomy)						
C.	Full Name (Last, First, Middle Initial) Mr. Rufus McClain				Transaction ID: 60519.E4928 Date of Disbursement			
	Mailing Address 1126 Wiggs Road				$\begin{bmatrix}\begin{smallmatrix}M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix}\begin{smallmatrix}D & D \\ 0 & 5 \end{bmatrix} / \begin{bmatrix}\begin{smallmatrix}Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$			
	City Marks	State Zip Code MS 38646-			Amount of Each Disbursement this Period			
	Purpose of Disbursement CANVASSING				1500.00 Refund or Disposal of Excess			
	Candidate Name			egory/ ype	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disburse Senate President	ement For: Primary Other (specify) ▼	1		CANVASSING			
_	State: District:	□ Other (specify) ▼						
s	UBTOTAL of Disbursements This Page (optional)			•	3368.00			

9	CHEDIII E B /EEC Form 2 \			1			
	CHEDULE B (FEC Form 3)		erate schedule(s)	FOR LINE (check only			
11	ITEMIZED DISBURSEMENTS		category of the Summary Page	_ i `	X 17	19a 19b 20c 21	
	y Information copied from such Reports and Sta for commercial purposes, other than using the r						
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson						
<u></u>	Full Name (Last, First, Middle Initial)				T	10 55000	
A.	Mr. Rufus McClain				Transaction ID: 605 Date of Disbursemen	t	
	Mailing Address 1126 Wiggs Road				05 12	Ý ŽOŠGÝ	
	City Marks	State MS	Zip Code 38646-		Amount of Each Disb	ursement this Period	
	Purpose of Disbursement SEE BELOW; SALARIES TRANSPORTATION	DN			Refund or Dispos	1125.00 al of Excess	
	Candidate Name			Category/ Type	Contributions Rec 11 C.F.R. 400.53	quired Under	
	Office Sought: House Disbuter Senate President	Primary Other (spe	General cify) ▼		SEE BELOW; SAL PORTATION	ARIES TRANS-	
	State: District:		•				
В.	Full Name (Last, First, Middle Initial) Mr. Rufus McClain				Transaction ID: 605 Date of Disbursemen	t	
	Mailing Address 1126 Wiggs Road		05 12	² 2 0 0 6 °			
	City Marks	State MS	Zip Code 38646-		Amount of Each Disb	ursement this Period	
	Purpose of Disbursement TRANSPORTATION	325.00 Refund or Disposal of Excess					
	Candidate Name	Category/ Type	Contributions Rec				
	Office Sought: House Disbusion Senate President	Primary Other (spe	General		[MEMO ITEM] MEMO: TRANSPO	PRTATION	
	State: District:	Other (ope	∪ y) ∀				
C.	Full Name (Last, First, Middle Initial) Mr. Rufus McClain				Transaction ID: 605 Date of Disbursemen		
	Mailing Address 1126 Wiggs Road				05 12	2006	
	City Marks	State MS	Zip Code 38646-		Amount of Each Disb	ursement this Period	
	Purpose of Disbursement SALARIES				Refund or Dispos	600.00	
	Candidate Name			Category/ Type	Contributions Rec		
	Office Sought: House Disbring Senate President	Primary Other (spe	General		[MEMO ITEM] MEMO: SALARIES	3	
	State: District:	Outer (spe	○ <i>j</i> / ▼				
s	UBTOTAL of Disbursements This Page (option	ıal)		<u> </u>		1125.00	

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	for each	erate schedule(s) category of the Summary Page	(check only	NUMBER: PAGE 104 / 146 y one) X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and for commercial purposes, other than using the				for the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson				
Α.	Full Name (Last, First, Middle Initial) Mr. Rufus McClain Mailing Address 1126 Wiggs Road				Transaction ID: 60519.E5033 Date of Disbursement O 5 M / D 1 D / Y Y Y O Y 6 Y
	City Marks Purpose of Disbursement FOOD Candidate Name	State MS	Zip Code 38646-	Catagory	Amount of Each Disbursement this Period 200.00 Refund or Disposal of Excess Contributions Required Under
		isbursement For: Primary Other (sp	General	Category/ Type	11 C.F.R. 400.53 [MEMO ITEM] MEMO: FOOD
В.	Full Name (Last, First, Middle Initial) MCI Mailing Address P.O. Box 96022				Transaction ID: 60519.E4872 Date of Disbursement M 4 M / D 2 1 Y Y Y O 6 Y 2 0 0 6
	City Charlotte Purpose of Disbursement LONG DISTANCE SERVICE Candidate Name Office Sought: House Senate President State: District:	State NC isbursement For: Primary Other (spe	General	Category/ Type	Amount of Each Disbursement this Period 27.04 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 LONG DISTANCE SERVICE
C .	Full Name (Last, First, Middle Initial) Media Strategies and Research Mailing Address 9990 Lee Highway City Fairfax Purpose of Disbursement MEDIA Candidate Name	state VA isbursement For: Primary Other (sp	General	Category/ Type	Transaction ID: 60519.E5071 Date of Disbursement M 5 M / D 1 6 / Y 2 0 0 6 Y Amount of Each Disbursement this Period 32500.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 MEDIA
	State: District:		· ·		2007.04
s	UBTOTAL of Disbursements This Page (or	tional)			32527.04

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	CHEDULE B (FEC Form 3			erate schedule(s) category of the	FOR LINE (check onl	E NUMBER: PAGE 105 / 146 ly one)		
11	EMIZED DISBURSEMEN ⁻	15		Summary Page		X 17 18 19a 19b 20a 20b 20c 21		
	y Information copied from such Reports a for commercial purposes, other than usin					for the purpose of solicating contributions olicit contributions from such committee		
abla	NAME OF COMMITTEE (In Full)							
\rangle	Friends of Bennie Thompson							
_	Full Name (Last, First, Middle Initial)					Transaction ID: 60523,C7886IK		
A.	A. Doug Minor					Date of Disbursement		
	Mailing Address P.O. Box 22725	05 12 7 2006						
	City Jackson		State MS	Zip Code 39225-		Amount of Each Disbursement this Period		
	Purpose of Disbursement FUNDRAISING EXPENSE					275.00 Refund or Disposal of Excess		
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President	Disburser	nent For: Primary Other (spe	General		IN KIND: FUNDRAISING EXPE- NSE		
	State: District:		(- -	·····				
В.	Full Name (Last, First, Middle Initial) National Democratic Club		Transaction ID: 60519.E4884 Date of Disbursement					
	Mailing Address 30 Ivy Street, SI	$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 4 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$						
	City Washington		State DC	Zip Code 20003-4701		Amount of Each Disbursement this Period		
	Purpose of Disbursement CLUB CHARGES	· · ·	175.50 Refund or Disposal of Excess					
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate	Disburser	ment For: Primary	General		CLUB CHARGES		
	President State: District:		Other (spe	ecify) 🔻				
	Full Name (Last, First, Middle Initial)					Transaction ID: 60519.E5076		
C.	National Democratic Club					Date of Disbursement		
	Mailing Address 30 Ivy Street, SI	≣				05 16 7 2006		
	City Washington		State DC	Zip Code 20003-4701		Amount of Each Disbursement this Period		
	Purpose of Disbursement CLUB CHARGES		170.20 Refund or Disposal of Excess					
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Senate	Disburser	Primary	General		CLUB CHARGES		
	State: President District:		Other (spe	eciry) 🔻				
_						 		

620.70

SUBTOTAL of Disbursements This Page (optional)

S.	CHEDIII E B	/FFC Form 2	` -							
		(FEC Form 3	Use seperate scriedule(s)				R LINE Neck only	NUMBER:	PAGE 106/	146
ITEMIZED DISBURSEMENT		for each category of the Detailed Summary Page		(011	X	17 18	19a 19b 20c 21			
								r the purpose of solicat cit contributions from s		
\rangle	NAME OF COMMI Friends of Benni	, ,								
Α.	Full Name (Last, Fi Mr. Henry Nicks							Transaction ID: 605 Date of Disbursemen	t	
	Mailing Address	P.O. Box 334						04 / 17	² 2006	Y
	City Tunica			state MS	Zip Code 38676-			Amount of Each Disb	ursement this Pe	eriod
	Purpose of Disburs					· ·		Refund or Dispos	450.0	0
	Candidate Name					Catego	-	Contributions Rec 11 C.F.R. 400.53		
	Office Sought:	House Senate President		nent For: Primary Other (spe	General cify) ▼			FOOD FOR VOLU	NTEERS	
	State:	District:			•					
В.	Full Name (Last, Fi Mr. Henry Nicks							Transaction ID: 605 Date of Disbursemen		
	Mailing Address	P.O. Box 334						$\begin{bmatrix} 0 & 5 & M \\ 0 & 5 & M \end{bmatrix}$	Ž 0 0 6	Y
	City Tunica			state MS	Zip Code 38676-			Amount of Each Disb	ursement this Pe	eriod
	Purpose of Disbursement CANVASSING							Refund or Dispos	350.0	0
	Candidate Name					Catego Typo		Contributions Rec 11 C.F.R. 400.53		
	Office Sought:	House Senate		Primary	General			CANVASSING		
	State:	President District:		Other (spe	ecity) 🔻					
	Full Name (Last, Fi	I						Transaction ID: 605	10 550/6	
C.	Mr. Henry Nicks							Date of Disbursemen	t	V
	Mailing Address	P.O. Box 334						$\begin{bmatrix} 0 & 5 & M \\ 0 & 5 & M \end{bmatrix}$	² 2006	
	City Tunica			state MS	Zip Code 38676-			Amount of Each Disb	ursement this Pe	eriod
	Purpose of Disburs	sement _ARIES TRANSPOR	TATION			°		Refund or Dispos	860.0	0
	Candidate Name					Catego Type	-	Contributions Rec 11 C.F.R. 400.53	quired Under	
	Office Sought:	House Senate President		nent For: Primary Other (spe	General cify) ▼			SEE BELOW; SAL PORTATION	ARIES TRAN	S-
_	State:	District:								
	LIRTOTAL of Diebu	reaments This Page ((ontional)						1660.0	0

	CHEDULE B (FEC Form 3)	Use so	eperate schedule(s)	FOR LINE	NUMBER: PAGE 107 / 146 y one)		
ITEMIZED DISBURSEMENT		Detaile	ch category of the ed Summary Page		X 17		
	y Information copied from such Reports and for commercial purposes, other than using the						
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson						
Α.	Full Name (Last, First, Middle Initial) Mr. Henry Nickson, Jr. Mailing Address P.O. Box 334			Transaction ID: 60519.E5047 Date of Disbursement M 5 M / D 1 D / Y Y Y O Y O O O			
	City Tunica	State MS	Zip Code 38676-		Amount of Each Disbursement this Period		
	Purpose of Disbursement SALARIES Candidate Name			Category/	500.00 Refund or Disposal of Excess Contributions Required Under		
		isbursement For Primary Other (s		Type	11 C.F.R. 400.53 [MEMO ITEM] MEMO: SALARIES		
В.	Full Name (Last, First, Middle Initial) Mr. Henry Nickson, Jr. Mailing Address P.O. Box 334				Transaction ID: 60519.E5049 Date of Disbursement O 5 M / D 2 V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City Tunica Purpose of Disbursement FOOD Candidate Name	State MS	Zip Code 38676-	Category/	Amount of Each Disbursement this Period 100.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House District:	isbursement For Primary Other (s		Туре	[MEMO: FOOD		
C.	Full Name (Last, First, Middle Initial) Mr. Henry Nickson, Jr.				Transaction ID: 60519.E5048 Date of Disbursement		
	Mailing Address P.O. Box 334				$\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & O & O & G \end{bmatrix}$		
	City Tunica	State MS	Zip Code 38676-		Amount of Each Disbursement this Period 260.00		
		isbursement For		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: TRANSPORTATION		
	Senate President State: District:	Other (s	General □ General		-		
s	UBTOTAL of Disbursements This Page (op	tional)	<u></u>	>	0.00		

SCHEDULE B (FEC Form 3)					NUMBER: PAGE 108 / 146		
	EMIZED DISBURSEMENTS		rate schedule(s) ategory of the	(check only			
			Summary Page		X 17		
	y Information copied from such Reports and Sta for commercial purposes, other than using the n						
Λ	NAME OF COMMITTEE (In Full)						
V	Friends of Bennie Thompson						
Α.	Full Name (Last, First, Middle Initial) Office Depot Credit Plan				Transaction ID: 60412.E4827 Date of Disbursement		
	Mailing Address P.O. Box 9020				0 4 1 0 2 0 0 6		
	-						
	City Des Moines	State IA	Zip Code 50368-9020		Amount of Each Disbursement this Period		
	Purpose of Disbursement OFFICE SUPPLIES			0 0	479.83 Refund or Disposal of Excess		
	Candidate Name		7	Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disbu Senate President	Primary Other (spec	General cify) ▼		OFFICE SUPPLIES		
_	State: District:						
В.	Full Name (Last, First, Middle Initial) Office Depot Credit Plan		Transaction ID: 60519.E4941 Date of Disbursement				
	Mailing Address P.O. Box 9020				$\begin{bmatrix}\begin{smallmatrix}M&5&M\\0&5&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&0&D\\0&9\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\2&0&0&6&Y\end{smallmatrix}\end{bmatrix}$		
	City Des Moines	State IA	Zip Code 50368-9020		Amount of Each Disbursement this Period		
	Purpose of Disbursement OFFICE SUPPLIES	85.59 Refund or Disposal of Excess					
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disbution Senate President	rsement For: Primary Other (spec	General T	,,	OFFICE SUPPLIES		
	State: District:						
C.	Full Name (Last, First, Middle Initial) Mr. C.W. Peeples				Transaction ID: 60412.E4855 Date of Disbursement		
	Mailing Address P.O. Box 272				$\begin{bmatrix}\begin{smallmatrix}M&A&M\\0&4&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&1&D\\1&2\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\2&0&0&6\end{smallmatrix}\end{bmatrix}$		
	City Kilmichael	State MS	Zip Code 39747-		Amount of Each Disbursement this Period		
	Purpose of Disbursement		Г	•	300.00		
	TRAVEL EXPENSE Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disbu	Primary Other (spec	General	туре	TRAVEL EXPENSE		
	State: District:	Other (spec	<i></i>				
s	UBTOTAL of Disbursements This Page (option	al)		>	865.42		

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	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE (check on	E NUMBER: PAGE 109 / 146
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(6.1.66.1.6.1	X 17
	y Information copied from such Reports and S for commercial purposes, other than using the			
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Α.	Full Name (Last, First, Middle Initial) Mr. Henry Phillips			Transaction ID: 60519.E4919 Date of Disbursement
	Mailing Address 102 Eastover Dr.			05 7 2006
	City Cleveland	State Zip Code MS 38732-		Amount of Each Disbursement this Period
	Purpose of Disbursement CANVASSING			1200.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	bursement For: Primary General Other (specify)		CANVASSING
	State: District:			
В.	Full Name (Last, First, Middle Initial) Mr. Henry Phillips			Transaction ID: 60519.E4981 Date of Disbursement
	Mailing Address 102 Eastover Dr.			05 0 1 2 7 2 0 0 6
	City Cleveland	State Zip Code MS 38732-		Amount of Each Disbursement this Period
	Purpose of Disbursement SEE BELOW; SALARIES TRANSPORTAT	ION		1760.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Dis Senate President	bursement For: Primary General Other (specify) ▼		SEE BELOW; SALARIES TRANS- PORTATION
	State: District:			
C.	Full Name (Last, First, Middle Initial) Mr. Henry Phillips			Transaction ID: 60519.E4984 Date of Disbursement
	Mailing Address 102 Eastover Dr.			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Cleveland	State Zip Code MS 38732-		Amount of Each Disbursement this Period
	Purpose of Disbursement FOOD		•	560.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under
	Office Sought: House Dis Senate President	bursement For: Primary General Other (specify)		MEMO: FOOD
	State: District:	Outer (Specify) \		
s	UBTOTAL of Disbursements This Page (option	onal)	>	2960.00

91	CHEDULE B (FEC Form 3	\ _				
ITEMIZED DISBURSEMENT		-		rate schedule(s)	FOR LINE (check only	NUMBER: PAGE 110 / 146 vone)
		for each category of the Detailed Summary Page		_ i `	X 17	
	y Information copied from such Reports a for commercial purposes, other than using					
\setminus	NAME OF COMMITTEE (In Full)					
	Friends of Bennie Thompson					
A.	Full Name (Last, First, Middle Initial) Mr. Henry Phillips					Transaction ID: 60519.E4983 Date of Disbursement
	Mailing Address 102 Eastover Dr	-				$\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ 1 & 2 & 2 & 0 & 0 & 6 \\ \end{smallmatrix}$
	City Cleveland		tate /IS	Zip Code 38732-		Amount of Each Disbursement this Period
	Purpose of Disbursement SALARIES				, ,	600.00 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		nent For: Primary Other (spe	General cify) ▼		[MEMO ITEM] MEMO: SALARIES
	State: District:		` '	<i>37</i> , ₹		
В.	Full Name (Last, First, Middle Initial) Mr. Henry Phillips					Transaction ID: 60519.E4982 Date of Disbursement
	Mailing Address 102 Eastover Dr		05 12 7 2006			
	City Cleveland		tate /IS	Zip Code 38732-		Amount of Each Disbursement this Period
	Purpose of Disbursement TRANSPORTATION		Refund or Disposal of Excess			
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		nent For: Primary Other (spe	General Cify) ▼		[MEMO ITEM] MEMO: TRANSPORTATION
	State: District:					
C.	Full Name (Last, First, Middle Initial) Brad Pigott					Transaction ID: 60523.C7883IK Date of Disbursement
	Mailing Address 1217 Pinehurst S	Street				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & 1 & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$
	City Jackson		tate //S	Zip Code 39202-		Amount of Each Disbursement this Period
	Purpose of Disbursement FUNDRAISING EXPENSE					475.00 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		nent For: Primary Other (spe	General cify) ▼		IN KIND: FUNDRAISING EXPENSE
_	State: District:					
s	UBTOTAL of Disbursements This Page	(optional)				475.00

2	CHEDULE B (FEC Form 3)	F05 : ":=	AHIMPED. DAGE 444 / 112				
	EMIZED DISBURSEMENTS	Use seperate schedule(s)	(check only	NUMBER: PAGE 111 / 146 yone)			
Detailed Summary Pa		for each category of the Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21			
	ly Information copied from such Reports and Statem for commercial purposes, other than using the name						
$\overline{\ }$	NAME OF COMMITTEE (In Full)						
/	Friends of Bennie Thompson						
۹.	Full Name (Last, First, Middle Initial) Ms. Nicole Pressley			Transaction ID: 60412.E4841 Date of Disbursement 04 M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	Mailing Address 3365 Medgar Evers Blvd	•		04 12 2000			
		State Zip Code MS 39213-		Amount of Each Disbursement this Period			
	Purpose of Disbursement		•	1710.00			
	SALARY Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		SALARY			
	Full Name (Last, First, Middle Initial)			Transaction ID: 60510 E4901			
3.	Ms. Nicole Pressley			Transaction ID: 60519.E4891 Date of Disbursement			
	Mailing Address 3365 Medgar Evers Blvd			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & O \\ Y & Z & O & O & O \end{bmatrix} $			
	•	State Zip Code MS 39213-		Amount of Each Disbursement this Period			
	Purpose of Disbursement	33210-	-	1710.00			
	SALARY Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Senate President	ement For: Primary General Other (specify)	Туре	SALARY			
	State: District:						
Э.	Full Name (Last, First, Middle Initial) Ms. Nicole Pressley			Transaction ID: 60519.E4935 Date of Disbursement			
	Mailing Address 3365 Medgar Evers Blvd			$\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & O \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ O & O & O \end{smallmatrix} \end{bmatrix} $			
		State Zip Code MS 39213-		Amount of Each Disbursement this Period			
	Purpose of Disbursement SALARY	Purpose of Disbursement					
	Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Senate	ement For: Primary General		SALARY			
	President State: District:	Other (specify)					
S	UBTOTAL of Disbursements This Page (optional)			5130.00			
_	- 1.5 (spinorial)		<u>-</u>				

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SCHEDULE B (FEC Form 3)		Use sepe	erate schedule(s)	FOR LINE (check only	NUMBER: PAGE 112 / 146
IT	EMIZED DISBURSEMENTS		category of the Summary Page	_ i `	X 17
		Detailed	ouninary rage		20a 20b 20c 21
	y Information copied from such Reports and Sta for commercial purposes, other than using the n				
Λ	NAME OF COMMITTEE (In Full)				
\mathbb{Z}	Friends of Bennie Thompson				
A.	Full Name (Last, First, Middle Initial)				Transaction ID: 60519.E4998
	Ms. Nicole Pressley				Date of Disbursement
	Mailing Address 3365 Medgar Evers B	vd.			$\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & G \\ Y & Z & Q & Q & G \end{bmatrix} $
	City	State	Zip Code		Amount of Each Disbursement this Period
	Jackson	MS	39213-		6240.00
	Purpose of Disbursement SEE BELOW; SALARIES TRANSPORTATIO	N		•	Refund or Disposal of Excess
	Candidate Name			Category/	Contributions Required Under 11 C.F.R. 400.53
				Туре	11 C.F.R. 400.53
	Office Sought: House Disbu	rsement For: Primary	General		SEE BELOW; SALARIES TRANS- PORTATION
	President	Other (spe			FORTATION
	State: District:				
В.	Full Name (Last, First, Middle Initial)				Transaction ID: 60519.E4999
ъ.	Ms. Nicole Pressley				Date of Disbursement
	Mailing Address 3365 Medgar Evers B	vd.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$
	City	State	Zip Code		Amount of Each Disbursement this Period
	Jackson	MS	39213-		4000.00
	Purpose of Disbursement SALARIES				Refund or Disposal of Excess
	Candidate Name			Category/	Contributions Required Under
				Туре	11 C.F.R. 400.53 [MEMO ITEM]
	Office Sought: House Disbu	rsement For:	General		MEMO: SALARIES
	President	Other (spe			
	State: District:		,, ,		
_	Full Name (Last, First, Middle Initial)				Transaction ID: 60519.E5001
C.	Ms. Nicole Pressley				Date of Disbursement
	Mailing Address 3365 Medgar Evers B	vd.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$
	City Jackson	State MS	Zip Code 39213-		Amount of Each Disbursement this Period
	Purpose of Disbursement FOOD			• •	1000.00
	Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disbu	rsement For:		ı ype	[MEMO ITEM]
	Senate	Primary	General		MEMO: FOOD
	President	Other (spe	ecify) 🔻		
_	State: District:				
s	UBTOTAL of Disbursements This Page (option	al)			6240.00

2	CHEDULE B (FEC Form 3)			1	
	ITEMIZED DISBURSEMENTS		erate schedule(s)	FOR LINE (check only	NUMBER: PAGE 113 / 146 yone)
Ш			category of the Summary Page	I `	X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and Stor commercial purposes, other than using the				
\setminus	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson				
\mathbb{L}	Thende of Bernille Thempeen				
A.	Full Name (Last, First, Middle Initial) Ms. Nicole Pressley				Transaction ID: 60519.E5000 Date of Disbursement
	Mailing Address 3365 Medgar Evers	Blvd.			$\begin{bmatrix} \begin{smallmatrix} M \\ D \end{smallmatrix} \begin{smallmatrix} M \\ D \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} D \\ D \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \begin{bmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} Y \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} Y \\ D \end{smallmatrix} \end{bmatrix} \end{bmatrix} \begin{bmatrix} Y \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} Y \\ D \end{smallmatrix} \end{bmatrix} \end{bmatrix} \begin{bmatrix} Y \\ D \end{smallmatrix} \end{bmatrix} \end{bmatrix} \begin{bmatrix} Y \\ D \end{smallmatrix} \end{bmatrix} \end{bmatrix} \begin{bmatrix} Y \\ P \end{smallmatrix} \end{bmatrix} \end{bmatrix} \begin{bmatrix} Y \\ P \end{smallmatrix} \end{bmatrix} \begin{bmatrix} Y \\ P \end{smallmatrix} \end{bmatrix} \end{bmatrix} \begin{bmatrix} Y \\ P \end{smallmatrix} \end{bmatrix} \begin{bmatrix} Y \\ P \end{smallmatrix} \end{bmatrix} \begin{bmatrix} Y \\ P \end{smallmatrix} \end{bmatrix} \end{bmatrix} \begin{bmatrix} Y \\ P \end{smallmatrix} \end{bmatrix} \begin{bmatrix} $
	City Jackson	State MS	Zip Code 39213-		Amount of Each Disbursement this Period
	Purpose of Disbursement TRANSPORTATION				1240.00 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Dis	sbursement For: Primary	General		[MEMO ITEM] MEMO: TRANSPORTATION
	President State: District:	Other (spe	ecify) 🔻		
	Full Name (Last, First, Middle Initial)				Transaction ID: COE10 FE0E2
В.	Mr. Al Rankins				Transaction ID: 60519.E5053 Date of Disbursement
	Mailing Address 1032 Meadow Dr.				$\begin{bmatrix} \begin{smallmatrix} M \\ D \end{smallmatrix} \begin{smallmatrix} M \\ D \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} M \\ D \end{smallmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \begin{bmatrix} M \\ D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} M \\ \mathsf$
	City Greenville	State MS	Zip Code 38703-		Amount of Each Disbursement this Period
	Purpose of Disbursement SEE BELOW; SALARIES TRANSPORTAT	ION			1780.00 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Dis	sbursement For: Primary	General		SEE BELOW; SALARIES TRANS- PORTATION
	President State: District:	Other (spe	ecify) 🔻		
C.	Full Name (Last, First, Middle Initial) Mr. AI Rankins				Transaction ID: 60519.E5056 Date of Disbursement
	Mailing Address 1032 Meadow Dr.				05 12 / 2006
	City Greenville	State MS	Zip Code 38703-		Amount of Each Disbursement this Period
	Purpose of Disbursement FOOD			• •	400.00 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Dis	Primary Other (see	General		[MEMO: FOOD
	State: District:	Other (spe	;ciiy) ▼		
s	UBTOTAL of Disbursements This Page (opt	ional)			1780.00

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solication or for commercial purposes, other than using the name and address of any political committee to solicit contributions from su NAME OF COMMITTEE (In Full) Friends of Bennie Thompson Full Name (Last, First, Middle Initial) Mr. Al Rankins Mailing Address 1032 Meadow Dr. City State Zip Code Amount of Each Disbuser.	uch committee		
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating or for commercial purposes, other than using the name and address of any political committee to solicit contributions from surpose of solicating or for commercial purposes, other than using the name and address of any political committee to solicit contributions from surpose of solicating or for commercial purposes, other than using the name and address of any political committee to solicit contributions from surpose of solicating or for the purpose of solicating or for the purpose of solicating or for the purpose of solicating or for commercial purposes, other than using the name and address of any political committee to solicit contributions from surpose of solicating or for commercial purposes, other than using the name and address of any political committee to solicit contributions from surpose of solicating or for commercial purposes, other than using the name and address of any political committee to solicit contributions from surpose of solicating or for commercial purposes, other than using the name and address of any political committee to solicit contributions from surpose of solicating or for commercial purposes, other than using the name and address of any political committee to solicit contributions from surpose of solicating or for commercial purposes, other than using the name and address of any political committee to solicit contributions from surpose of solicating or for commercial purposes, other than using the name and address of any political committee to solicit contributions from surpose of soli	ing contributions uch committee		
Friends of Bennie Thompson Full Name (Last, First, Middle Initial) Mr. Al Rankins Mailing Address 1032 Meadow Dr. City State Zip Code Transaction ID: 6057 Date of Disbursement	t		
A. Mr. Al Rankins Mailing Address 1032 Meadow Dr. City State Zip Code Amount of Each Disburse.	t		
City State Zip Code Amount of Each Disbu			
Greenville MS 38703- Purpose of Disbursement	oursement this Period 800.00		
SALARIES Candidate Name Category/ Type Refund or Disposa Contributions Requ 11 C.F.R. 400.53	quired Under		
Office Sought: House Senate Primary General President State: District: Disbursement For: Disbursement For: Primary General Other (specify) ▼	8		
Full Name (Last, First, Middle Initial) B. Mr. Al Rankins Mailing Address 1032 Meadow Dr. Transaction ID: 6057 Date of Disbursement			
City State Zip Code Amount of Each Disbu			
Candidate Name Category/ Type Contributions Requ 11 C.F.R. 400.53			
Office Sought: House Senate Primary General President State: District: Disbursement For: Disbursement For: Primary General Other (specify) ▼	PRTATION		
Full Name (Last, First, Middle Initial) C. RCI Transaction ID: 6051 Date of Disbursement	t		
Mailing Address 911 South Davis Street	['] 2006		
City State Zip Code Amount of Each Disbution Cleveland MS 38732- Purpose of Disbursement	oursement this Period 985.00		
RADIO SPOTS Candidate Name Category/ Type Refund or Disposa Contributions Requ 11 C.F.R. 400.53	quired Under		
Office Sought: House Senate Primary General President Other (specify) ▼			
State: District:			

SUBTOTAL of Disbursements This Page (optional)

91	CHEDIII E B /EEC Form 2	\				
SCHEDULE B (FEC Form 3)				rate schedule(s)	FOR LINE (check onl	NUMBER: PAGE 115/146
ITEMIZED DISBURSEMENT		for each category of the Detailed Summary Page			_ ` _	X 17
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	y Information copied from such Reports a for commercial purposes, other than using					for the purpose of solicating contributions slicit contributions from such committee
\setminus	NAME OF COMMITTEE (In Full)					
\angle	Friends of Bennie Thompson					
Α.	Full Name (Last, First, Middle Initial) RCI					Transaction ID: 60519.E4970 Date of Disbursement
	Mailing Address 911 South Davis	Street				05 M / D1 D / Y 2006 6 Y
	City Cleveland		State MS	Zip Code 38732-		Amount of Each Disbursement this Period
	Purpose of Disbursement RADIO SPOTS					1029.30 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disburser	nent For: Primary Other (spe	General cify) ▼		RADIO SPOTS
	State: District:					
В.	Full Name (Last, First, Middle Initial) Carlton W. Reeves					Transaction ID: 60523.C7884IK Date of Disbursement
	Mailing Address P.O. Box 22725	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
	City Jackson		State MS	Zip Code 39202-		Amount of Each Disbursement this Period
	Purpose of Disbursement FUNDRAISING EXPENSE		275.00 Refund or Disposal of Excess			
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disburser	ment For: Primary Other (spe	General Cify) ▼		IN KIND: FUNDRAISING EXPE- NSE
	State: District:					
C.	Full Name (Last, First, Middle Initial) Ms. Melinda Ricks					Transaction ID: 60412.E4848 Date of Disbursement
	Mailing Address P.O. Box 76					04 12 2006
	City Inverness		State VIS	Zip Code 38753-		Amount of Each Disbursement this Period
	Purpose of Disbursement					500.00
	SEE BELOW; SALARY TRAVEL EXPE	NSE			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disburser	ment For: Primary Other (spe	General	.)	SEE BELOW; SALARY TRAVEL EXPENSE
	State: District:		(-150)	<i>></i> / ∀		
S	UBTOTAL of Disbursements This Page	(optional)				1804.30

91	CHEDULE B (FEC Form 3) 				
ITEMIZED DISBURSEMENT		-		erate schedule(s)	FOR LINE (check on	E NUMBER: PAGE 116 / 146
		for each category of the Detailed Summary Page				X 17
	y Information copied from such Reports a or commercial purposes, other than usin					for the purpose of solicating contributions olicit contributions from such committee
\setminus	NAME OF COMMITTEE (In Full)					
	Friends of Bennie Thompson					
Α.	Full Name (Last, First, Middle Initial) Ms. Melinda Ricks					Transaction ID: 60412.E4850 Date of Disbursement
	Mailing Address P.O. Box 76					$ \begin{bmatrix} 0 & 4 & M \\ 0 & 4 & M \end{bmatrix} \begin{bmatrix} 0 & 1 & 2 \\ 0 & 1 & 2 \end{bmatrix} \begin{bmatrix} 0 & 1 & 2 \\ 0 & 2 & 0 & 0 & 6 \end{bmatrix} $
	City		State	Zip Code		Amount of Each Disbursement this Period
	Inverness		MS	38753-		200.00
	Purpose of Disbursement TRAVEL EXPENSE					Refund or Disposal of Excess
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House	Disburser	ment For:		Турс	[MEMO ITEM]
	Senate		Primary	General		MEMO: TRAVEL EXPENSE
	President State: District:		Other (spe	cify)		
	State: District: Full Name (Last, First, Middle Initial)					
В.	Ms. Melinda Ricks					Transaction ID: 60412.E4849 Date of Disbursement
	Mailing Address P.O. Box 76	$ \begin{bmatrix} 0 & 4 & M \\ 0 & 4 & M \end{bmatrix} \begin{bmatrix} 0 & 1 & 2 \\ 0 & 2 & 0 & 0 & 6 \end{bmatrix} $				
	City		State	Zip Code		Amount of Each Disbursement this Period
	Inverness		MS	38753-		300.00
	Purpose of Disbursement SALARY		Refund or Disposal of Excess			
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House	Disburser				- [MEMO ITEM] MEMO: SALARY
	Senate President		Primary Other (spe	General		
	State: District:		Other (spe	City) \blacktriangledown		
	Full Name (Last, First, Middle Initial)					Transaction ID: 60519.E4882
C.	Ms. Melinda Ricks					Date of Disbursement
	Mailing Address P.O. Box 76					$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$
	City Inverness		State MS	Zip Code 38753-		Amount of Each Disbursement this Period
	Purpose of Disbursement				•	300.00
	SALARY Candidate Name				Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburser	ment For		Туре	-
	Senate	2.0501001	Primary	General		SALARY
	President		Other (spe	cify)		
_	State: District:					
S	UBTOTAL of Disbursements This Page	(optional)				300.00

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SCHEDULE B (FEC Form 3)			Use seperate schedule(s)			FOR LINE (check only	NUMBER: PAGE 117 / 146		
ITEMIZED DISBURSEMENT		for each category of the Detailed Summary Page				`		19a 19b	
			201404				20a 20b	20c 21	
	y Information copied from such Reports a for commercial purposes, other than usin								
Λ	NAME OF COMMITTEE (In Full)								
	Friends of Bennie Thompson								
Α.	Full Name (Last, First, Middle Initial)						Transaction ID: 605	519.E4897	
A.	Ms. Melinda Ricks						Date of Disbursemen		
	Mailing Address P.O. Box 76						04 / 28 / 2006		
	City Inverness		State MS	Zip Code 38753-			Amount of Each Disk	oursement this Period	
	Purpose of Disbursement	<u>'</u>	VIO	30733		-		300.00	
	SALARY						Refund or Dispos Contributions Red		
	Candidate Name					egory/ ype	11 C.F.R. 400.53		
	Office Sought: House Senate	Disburser		General			SALARY		
	President		Primary Other (spe						
	State: District:			•					
В.	Full Name (Last, First, Middle Initial)						Transaction ID: 605		
Ь.	Ms. Melinda Ricks						Date of Disbursemen		
	Mailing Address P.O. Box 76						05 05	2006	
	City		State	Zip Code			Amount of Each Disk	oursement this Period	
	Inverness Purpose of Disbursement	I	MS	38753-				300.00	
	SALARY	Refund or Disposal of Exce							
	Candidate Name					egory/ ype	Contributions Rec		
	Office Sought: House Senate	Disburser					SALARY		
	President		Primary Other (spe	General					
	State: District:			•					
C.	Full Name (Last, First, Middle Initial)						Transaction ID: 605		
Ο.	Ms. Melinda Ricks						Date of Disbursemen		
	Mailing Address P.O. Box 76						05 12	2006	
	City Inverness		State MS	Zip Code 38753-			Amount of Each Disk	oursement this Period	
	Purpose of Disbursement SALARY					*	Refund or Dispos	300.00	
	Candidate Name					egory/ ype	Contributions Rec 11 C.F.R. 400.53	quired Under	
	Office Sought: House	Disburser					SALARY		
	Senate President	\vdash	Primary Other (spe	General					
	State: District:		2c. (ope	· - ·)/ • ▼					
6	IIRTOTAL of Dishursaments This Page	(ontional)						900.00	

6/	CHEDIII E B /EEC Earm 3) \				
	CHEDULE B (FEC Form 3	-		erate schedule(s)	FOR LIN	IE NUMBER: PAGE 118 / 146
ITEMIZED DISBURSEMENTS		TS	for each category of the Detailed Summary Page			X 17
						n for the purpose of solicating contributions solicit contributions from such committee
	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson					
Α.	Full Name (Last, First, Middle Initial) Lindsey Roberts					Transaction ID: 60519.E4950 Date of Disbursement
	Mailing Address P.O. Box 270					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Winona		State VIS	Zip Code 38967-		Amount of Each Disbursement this Period
	Purpose of Disbursement TRANSPORTATION					625.00 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		nent For: Primary Other (spe	General ccify) ▼		TRANSPORTATION
	State: District:			•		
В.	Full Name (Last, First, Middle Initial) Lindsey Roberts					Transaction ID: 60519.E5026 Date of Disbursement
	Mailing Address P.O. Box 270					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Winona		State VIS	Zip Code 38967-		Amount of Each Disbursement this Period
	Purpose of Disbursement	590.00				
	SEE BELOW; SALARIES TRANSPOR	TATION			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disburser	nent For: Primary Other (spe	General		SEE BELOW; SALARIES TRANS- PORTATION
	State: District:		Other (spe	Ciry) ▼		
C.	Full Name (Last, First, Middle Initial) Lindsey Roberts					Transaction ID: 60519.E5027 Date of Disbursement
	Mailing Address P.O. Box 270					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Winona		State VIS	Zip Code 38967-		Amount of Each Disbursement this Period
	Purpose of Disbursement SALARIES		350.00 Refund or Disposal of Excess			
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		ment For: Primary Other (spe	General cify) ▼		MEMO: SALARIES
_	State: District:					
	IIRTOTAL of Disburgaments This Page	(ontional)				1215.00

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	CHEDULE B (FEC Form 3)	Use seperate schedu	e(s)	-	NUMBER:	PAGE	119 / 146
IT	EMIZED DISBURSEMENTS	for each category of the	ne	(check only	- ´ — —	19a 🔲	19b
		Detailed Summary Pa	ge	<u> </u>			21
	y Information copied from such Reports and Statem for commercial purposes, other than using the name						
\setminus	NAME OF COMMITTEE (In Full)						
/	Friends of Bennie Thompson						
_	Full Name (Last, First, Middle Initial)				Transaction ID: 605	19.E502	9
A.	Lindsey Roberts				Date of Disbursemen	it	
	Mailing Address P.O. Box 270				05 12	Ž	0 0 6
		State Zip Code MS 38967-			Amount of Each Disk	oursement	this Period
	Purpose of Disbursement	WG 30907-	TE	•			40.00
	FOOD		_ L		Refund or Dispos		
	Candidate Name			Category/ Type	Contributions Rec		ier
	Office Sought: House Disburse	ment For:		71	[MEMO ITEM] MEMO: FOOD		
	Senate	Primary Gene	ral		MEMO. FOOD		
	President State: District:	Other (specify)					
	Full Name (Last, First, Middle Initial)					.40 5500	
В.	Lindsey Roberts				Transaction ID: 605 Date of Disbursemen	ıt	
	Mailing Address P.O. Box 270				05 12	20	0 0 6 °
		State Zip Code			Amount of Each Disk	oursement	this Period
	Winona Purpose of Disbursement	MS 38967-				2	200.00
	TRANSPORTATION				Refund or Dispos	al of Exce	SS
	Candidate Name	Category/ Type			Contributions Required Under 11 C.F.R. 400.53		
		ment For:			[MEMO ITEM] MEMO: TRANSPO	RTATIO	N
	Senate President	Primary Gene Other (specify) ▼	ral				
	State: District:	Ctrici (Specify)					
_	Full Name (Last, First, Middle Initial)				Transaction ID: 605	19.E501	0
C.	Rufus Straughter/Lawrence Browder				Date of Disbursemen		
	Mailing Address 120 Van Buren Street				05 12	Ž Ž	0 0 6
		State Zip Code MS 39038-			Amount of Each Disk	oursement	this Period
	Purpose of Disbursement		Пг				545.00
	SEE BELOW; SALARIES TRANSPORTATION Candidate Name		$\dashv $	Category/	Refund or Dispos Contributions Rec		
	Cardidate Name		'	Type	11 C.F.R. 400.53		:=:
	Office Sought: House Disburse	ment For:			SEE BELOW; SAL	ARIES T	BANS-
	Senate	Primary Gene	ral		PORTATION, SAL	., u u L O 1	I IAINO-
	State: President State:	Other (specify)					
Г							• • • •
s	UBTOTAL of Disbursements This Page (optional) .			▶		5	45.00

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ITEMIZED DISBURSEMENTS for each cate		Use sepe	erate schedule(s)		NUMBER: PAGE 120 / 146	
		category of the É Summary Page	(check only	X 17		
	y Information copied from such Reports and S for commercial purposes, other than using the				or the purpose of solicating contributions	
	NAME OF COMMITTEE (In Full)		·- ,			
\rangle	Friends of Bennie Thompson					
Α.	Full Name (Last, First, Middle Initial) Rufus Straughter/Lawrence Browder				Transaction ID: 60519.E5011 Date of Disbursement	
	Mailing Address 120 Van Buren Stree	et			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 5 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \ \ \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$	
	City Belzoni	State MS	Zip Code 39038-		Amount of Each Disbursement this Period	
	Purpose of Disbursement TRANSPORTATION				S0.00 Refund or Disposal of Excess	
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
	Office Sought: House Dis Senate President	bursement For: Primary Other (spe	General		MEMO: TRANSPORTATION	
	State: District:		<i>y,</i> ↓			
В.	Full Name (Last, First, Middle Initial) Rufus Straughter/Lawrence Browder				Transaction ID: 60519.E5012 Date of Disbursement	
	Mailing Address 120 Van Buren Stree	et			$\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix} $	
	City Belzoni	State MS	Zip Code 39038-		Amount of Each Disbursement this Period	
	Purpose of Disbursement SALARIES		Refund or Disposal of Excess			
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
	Office Sought: House Dis Senate President	bursement For: Primary Other (spe	General ecify) ▼		MEMO: SALARIES	
	State: District:		<i>,</i> , ↓			
C.	Full Name (Last, First, Middle Initial) Rufus Straughter/Lawrence Browder				Transaction ID: 60519.E5013 Date of Disbursement	
	Mailing Address 120 Van Buren Stree	et			$\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$	
	City Belzoni	State MS	Zip Code 39038-		Amount of Each Disbursement this Period	
	Purpose of Disbursement FOOD				95.00 Refund or Disposal of Excess	
	Candidate Name		C	Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
	Office Sought: House Dis Senate President	bursement For: Primary Other (spe	General ecify) ▼		MEMO: FOOD	
	State: District:					
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SCHEDULE B (FEC Form 3)) Ilsa sana	erate schedule(s)		NUMBER: PAGE 121 / 146		
ITEMIZED DISBURSEMENTS		for each o	category of the ((check only	<u> </u>		
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						or the purpose of solicating contributions	
or			the name and addres	ss of any political co	ommittee to so	licit contributions from such committee	
\rangle	NAME OF COMM Friends of Benn	, ,					
Α.	Full Name (Last, F Juanita Scott	irst, Middle Initial)				Transaction ID: 60519.E4929 Date of Disbursement	
	Mailing Address	803 Oak St.				05 05 7 2006	
	City Indianola		State MS	Zip Code 38751-3625		Amount of Each Disbursement this Period	
	Purpose of Disburs CANVASSING	sement				1400.00 Refund or Disposal of Excess	
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought:	Senate President	Disbursement For: Primary Other (spe	General cify) ▼		CANVASSING	
_		District:					
В.	Full Name (Last, F Juanita Scott	irst, Middle Initial)				Transaction ID: 60519.E4957 Date of Disbursement	
	Mailing Address	803 Oak St.				$\begin{bmatrix} 0 & 5 & M \\ 0 & 5 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 1 & 0 \\ 0 & 1 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 1 & 0 \\ 0 & 2 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix}$	
	City Indianola		State MS	Amount of Each Disbursement this Period			
	Purpose of Disburs	sement LARIES TRANSPORTA		600.00			
	Candidate Name	LANILS THANSFORT	ATION	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought:	House [Senate President	Disbursement For: Primary Other (spe	General cify) ▼		SEE BELOW; SALARIES TRANS- PORTATION	
	State:	District:					
C.	Full Name (Last, F Juanita Scott	irst, Middle Initial)				Transaction ID: 60519.E4958 Date of Disbursement	
	Mailing Address	803 Oak St.		05 10 7 2006			
	City Indianola		State MS	Zip Code 38751-3625		Amount of Each Disbursement this Period	
	Purpose of Disburs	sement		Refund or Disposal of Excess			
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
	Office Sought:	House I Senate President	Disbursement For: Primary Other (spe	General cify) ▼		MEMO: SALARIES	
_	State:	District:		<u>. </u>			
s	UBTOTAL of Disbu	ursements This Page (o	ptional)		<u></u>	2000.00	

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	CHEDULE B (FEC Form 3	Use seperate schedule		FOR LINE (check only	
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Pag		l ` <u> </u>	(17
	y Information copied from such Reports and for commercial purposes, other than using t				
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson				
Α.	Full Name (Last, First, Middle Initial) Juanita Scott Mailing Address 803 Oak St.				Transaction ID: 60519.E5038 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		7: 0.1			
	City Indianola	State Zip Code MS 38751-36	25		Amount of Each Disbursement this Period
	Purpose of Disbursement SEE BELOW; SALARIES TRANSPORTA	ATION	lг		1480.00 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	Disbursement For: Primary Gener Other (specify) ▼	al		SEE BELOW; SALARIES TRANS- PORTATION
	State: District:				
В.	Full Name (Last, First, Middle Initial) Juanita Scott				Transaction ID: 60519.E5039 Date of Disbursement
	Mailing Address 803 Oak St.		$ \begin{bmatrix} 0.5 & M \\ 0.5 & M \end{bmatrix} \begin{bmatrix} 0.5 & M \\ 0.5 & M \\ 0.5 & M \end{bmatrix} \begin{bmatrix} 0.5 & M \\ 0.5 & M \\ 0.5 & M \end{bmatrix} \begin{bmatrix} 0.5 & M \\ 0.5 & M \\ 0.5 & M \end{bmatrix} \begin{bmatrix} 0.5 & M \\ 0.5 & M \\ 0.5 & M \end{bmatrix} \begin{bmatrix} 0.5 & M \\ 0.5 & M \\ 0.5 & M \\ 0.5 & M \end{bmatrix} \begin{bmatrix} 0.5 & M \\ 0.5$		
	City Indianola	State Zip Code MS 38751-36	25		Amount of Each Disbursement this Period
	Purpose of Disbursement SALARIES	700.0 Refund or Disposal of Excess			
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	Disbursement For: Primary Gener Other (specify) ▼	al		[MEMO ITEM] MEMO: SALARIES
	State: District:				
C.	Full Name (Last, First, Middle Initial) Juanita Scott				Transaction ID: 60519.E5041 Date of Disbursement
	Mailing Address 803 Oak St.				$ \begin{bmatrix} M & M \\ 0 & 5 \end{bmatrix} \begin{bmatrix} D & D & D \\ 1 & 2 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{bmatrix} $
	City Indianola	State Zip Code MS 38751-36	25		Amount of Each Disbursement this Period
	Purpose of Disbursement FOOD		Тг	• • •	300.00 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President	Disbursement For: Primary Gener Other (specify)	al		[MEMO ITEM] MEMO: FOOD
	State: District:				
s	UBTOTAL of Disbursements This Page (op	otional)			1480.00

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	CHEDULE B (FEC Form 3	-		erate schedule(s)	FOR LINE (check only	NUMBER: PAGE 123 / 146
IT	ITEMIZED DISBURSEMENTS			category of the Summary Page	_ i `	X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports an for commercial purposes, other than using					
	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson					
Α.	Full Name (Last, First, Middle Initial) Juanita Scott					Transaction ID: 60519.E5040 Date of Disbursement 05 12 7 2006
	Mailing Address 803 Oak St.					05
	City Indianola		state MS	Zip Code 38751-3625		Amount of Each Disbursement this Period
	Purpose of Disbursement TRANSPORTATION					480.00 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		nent For: Primary Other (spe	General cify) ▼	,,	[MEMO ITEM] MEMO: TRANSPORTATION
	State: District:					
В.	Full Name (Last, First, Middle Initial) Mr. Clarence E. Scutter					Transaction ID: 60519.E4864 Date of Disbursement
	Mailing Address P.O. Box 401		04			
	City Port Gibson		itate MS	Zip Code 39150-		Amount of Each Disbursement this Period
	Purpose of Disbursement VOTER RALLY					325.00 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		nent For: Primary Other (spe	General cify) ▼		VOTER RALLY
	State: District:			· 		
C.	Full Name (Last, First, Middle Initial) Mr. Clarence E. Scutter					Transaction ID: 60519.E4921 Date of Disbursement
	Mailing Address P.O. Box 401					$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & D \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Q & Q & G \\ Y & Z & Q & Q & G \end{bmatrix}$
	City Port Gibson		state MS	Zip Code 39150-		Amount of Each Disbursement this Period
	Purpose of Disbursement CANVASSING					500.00 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President		nent For: Primary Other (spe	General		CANVASSING
_	State: District:			y/ ▼		
s	UBTOTAL of Disbursements This Page (o	optional)			>	825.00

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	CHEDULE B (FEC Form 3)		rate schedule(s)	FOR LINE (check only	NUMBER: PAGE 124 / 146
IT	EMIZED DISBURSEMENTS		ategory of the Summary Page	l ` <u>-</u>	X 17
	y Information copied from such Reports and Statem for commercial purposes, other than using the name				
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson				
Α.	Full Name (Last, First, Middle Initial) Mr. Clarence E. Scutter Mailing Address P.O. Box 401				Transaction ID: 60519.E4987 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Port Gibson	State MS	Zip Code 39150-		Amount of Each Disbursement this Period
	Purpose of Disbursement SEE BELOW; SALARIES TRANSPORTATION Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spec	General cify) ▼		SEE BELOW; SALARIES TRANS- PORTATION
_	Full Name (Last, First, Middle Initial)				
В.	Mr. Clarence E. Scutter				Transaction ID: 60519.E4990 Date of Disbursement
	Mailing Address P.O. Box 401				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & D \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & O \\ Y & Z & O & O & O \end{bmatrix} $
		State MS	Zip Code 39150-		Amount of Each Disbursement this Period
	Purpose of Disbursement FOOD				470.00 Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Senate President	ement For: Primary Other (spec	General cify) ▼		MEMO: FOOD
	State: District:				
C.	Full Name (Last, First, Middle Initial) Mr. Clarence E. Scutter				Transaction ID: 60519.E4988 Date of Disbursement
	Mailing Address P.O. Box 401				$\begin{bmatrix} M & M & M \\ 0 & 5 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 1 & 2 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{bmatrix}$
	City Port Gibson	State MS	Zip Code 39150-		Amount of Each Disbursement this Period
	Purpose of Disbursement SALARIES			· ·	500.00 Refund or Disposal of Excess
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General cify) ▼		[MEMO ITEM] MEMO: SALARIES
_	State: District:				
s	UBTOTAL of Disbursements This Page (optional)			>	1225.00

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50	CHEDULE B (FEC Form 3	Use seperate scriedule(s)				FOR LINE (check onl	NUMBER:	PAGE 125 / 146
ITEMIZED DISBURSEMENTS		ΓS	for each category of the Detailed Summary Page			` -	X 17	19a 19b 20c 21
	y Information copied from such Reports for commercial purposes, other than usin							
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson							
Α.	Full Name (Last, First, Middle Initial) Mr. Clarence E. Scutter						Transaction ID: 609 Date of Disburseme	nt
	Mailing Address P.O. Box 401						05 12	^Y 2006 ^Y
	City Port Gibson		State MS	Zip Code 39150-			Amount of Each Dis	bursement this Period
	Purpose of Disbursement TRANSPORTATION						Refund or Dispo	255.00 sal of Excess
	Candidate Name			tegory/ ype	Contributions Re	equired Under		
	Office Sought: House Senate President	Disburser	ment For: Primary Other (spe	General ecify) ▼			[MEMO ITEM] MEMO: TRANSPO	ORTATION
	State: District:			•				
В.	Full Name (Last, First, Middle Initial) Ms. Linda Williams Short						Transaction ID: 609 Date of Disburseme	nt
	Mailing Address P.O. Box 293						05 / 10	2006
	City Mayersville		State MS	Zip Code 39113-			Amount of Each Dis	bursement this Period
	Purpose of Disbursement TRANSPORTATION			Refund or Disposal of Ex		210.00 sal of Excess		
	Candidate Name				tegory/ ype	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President	Disburser	nent For: Primary Other (spe	General			TRANSPORTATIO	NC
	State: District:		CC. (Opc	√,, \				
C.	Full Name (Last, First, Middle Initial) Ms. Linda Williams Short						Transaction ID: 609 Date of Disburseme	
	Mailing Address P.O. Box 293						05 / 12	2006
	City Mayersville		State MS	Zip Code 39113-			Amount of Each Dis	bursement this Period
	Purpose of Disbursement SEE BELOW; SALARIES FOOD		Refund or Disposal of Exces		370.00 sal of Excess			
	Candidate Name	l l			tegory/ ype	Contributions Re	equired Under	
	Office Sought: House Senate President	Disburser	ment For: Primary Other (spe	General vecify) ▼			SEE BELOW; SA	LARIES FOOD
	State: District:							
	IIRTOTAL of Disbursements This Page	(ontional)						580.00

64	CHEDIII E B /EEC Form 2 \		T = .			
	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE (check only	NUMBER: PAGE 126 / 146 / one)		
11	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17		
	y Information copied from such Reports and State for commercial purposes, other than using the name					
	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson					
Α.	Full Name (Last, First, Middle Initial) Ms. Linda Williams Short			Transaction ID: 60519.E5016 Date of Disbursement M M M M M M M M M M M M M M M M M M M		
	Mailing Address P.O. Box 293			05 12 2006		
	City Mayersville	State Zip Code MS 39113-		Amount of Each Disbursement this Period		
	Purpose of Disbursement FOOD			70.00 Refund or Disposal of Excess		
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)	,,	[MEMO ITEM] MEMO: FOOD		
	State: District:					
В.	Full Name (Last, First, Middle Initial) Ms. Linda Williams Short			Transaction ID: 60519.E5015 Date of Disbursement M M M M D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Mailing Address P.O. Box 293			05 12 7 2006		
	City Mayersville	State Zip Code MS 39113-		Amount of Each Disbursement this Period		
	Purpose of Disbursement SALARIES			300.00 Refund or Disposal of Excess		
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] MEMO: SALARIES		
	State: District:					
C.	Full Name (Last, First, Middle Initial) Signs First Metro			Transaction ID: 60412.E4830 Date of Disbursement		
	Mailing Address 4157 Robinson Rd., Sui		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 4 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$			
	City Jackson	State Zip Code MS 39209-		Amount of Each Disbursement this Period		
	Purpose of Disbursement		-	81.72		
	PRINTING Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		PRINTING		
_	State: District:					
s	UBTOTAL of Disbursements This Page (optional)		<u>Þ</u>	81.72		

ITEMIZED DISBURSEMENTS		Use seperate schedule(s) for each category of the	FOR LINE (check only	NUMBER: PAGE 127 / 146 y one)
		Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and State for commercial purposes, other than using the na			
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Α.	Full Name (Last, First, Middle Initial) Signs First Metro Mailing Address 4157 Robinson Rd., St.	uite A		Transaction ID: 60412.E4831 Date of Disbursement M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code		Amount of Each Disbursement this Period
	Jackson Purpose of Disbursement PRINTING	MS 39209-	•	989.85 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼		PRINTING
В.	Full Name (Last, First, Middle Initial) Signs First Metro	Transaction ID: 60519.E4888 Date of Disbursement		
	Mailing Address 4157 Robinson Rd., Su		$\begin{bmatrix}\begin{smallmatrix}M&4&M\\0&4&\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&2&5\\2&5&\end{smallmatrix}]/\begin{bmatrix}\begin{smallmatrix}Y&Y&2&0&0&6\\&2&0&0&6\end{smallmatrix}$	
	City Jackson Purpose of Disbursement	State Zip Code MS 39209-		Amount of Each Disbursement this Period 548.97
	PRINTING Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President State: District:	sement For: Primary General Other (specify)		PRINTING
C.	Full Name (Last, First, Middle Initial) Mr. Reubin Smith			Transaction ID: 60519.E4922 Date of Disbursement
	Mailing Address P.O. Box 434		05 05 7 2006	
	City Clarksdale	State Zip Code MS 38614-		Amount of Each Disbursement this Period 1300.00
	Purpose of Disbursement CANVASSING Candidate Name	Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify)	Туре	CANVASSING
_	UBTOTAL of Disbursements This Page (optiona			2838.82

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 128 / 14 (check only one)	46				
	Detailed Summary Page	X 17 18 19a 19b 20a 20b 20c 21					
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam		y any person for the purpose of solicating contributions ommittee to solicit contributions from such committee					
NAME OF COMMITTEE (In Full) Friends of Bennie Thompson							
Full Name (Last, First, Middle Initial) A. Mr. Reubin Smith		Transaction ID: 60519.E4954 Date of Disbursement	1				
Mailing Address P.O. Box 434		0 5 M / D 1 D / Y 2 0 0 6 Y					
City Clarksdale	State Zip Code MS 38614-	Amount of Each Disbursement this Per	-				
Purpose of Disbursement SEE BELOW; SALARIES TRANSPORTATION	Г	3000.00					
Candidate Name		Category/ Type Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53					
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	SEE BELOW; SALARIES TRANS PORTATION	; -				
Full Name (Last, First, Middle Initial) B. Mr. Reubin Smith		Transaction ID: 60519.E4955 Date of Disbursement					
Mailing Address P.O. Box 434	Mailing Address P.O. Box 434						
City Clarksdale	State Zip Code MS 38614-	Amount of Each Disbursement this Per					
Purpose of Disbursement SALARIES	2000.00 Refund or Disposal of Excess						
Candidate Name	Category/ Type Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]						
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)	MEMO: SALARIES					
Full Name (Last, First, Middle Initial) C. Mr. Reubin Smith		Transaction ID: 60519.E4956 Date of Disbursement					
Mailing Address P.O. Box 434		0 5 M / D 1 D / Y 2 0 0 6 Y					
City Clarksdale	State Zip Code MS 38614-	Amount of Each Disbursement this Per	riod				
Purpose of Disbursement TRANSPORTATION		600.00 Refund or Disposal of Excess					
Candidate Name		Category/ Type Contributions Required Under 11 C.F.R. 400.53					
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)	[MEMO: TRANSPORTATION					
SUBTOTAL of Disbursements This Page (optional)		3000.00					
TOTAL This Period (last page this line number only)			$\overline{}$				

6	CHEDIII E B /EEC Form	o \							
	CHEDULE B (FEC Form	•	Use seperate schedule(s)			FOR LINE (check only	E NUMBER: PAGE 129 / 146 nly one)		
П	ITEMIZED DISBURSEMENTS		for each of Detailed		`	X 17 18 20a 20b	19a 19b 20c 21		
	y Information copied from such Reports for commercial purposes, other than usi								
	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson								
Α.	Full Name (Last, First, Middle Initial) Mr. Reubin Smith						Transaction ID: 605 Date of Disbursemen	nt	
	Mailing Address P.O. Box 434						$\begin{array}{c c} & \begin{array}{ccccccccccccccccccccccccccccccccccc$		
	City Clarksdale		State MS	Zip Code 38614-			Amount of Each Disl	bursement this Period	
	Purpose of Disbursement FOOD						Refund or Dispos	400.00 sal of Excess	
	Candidate Name			Ca			Contributions Required Under 11 C.F.R. 400.53		
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General			[MEMO ITEM] MEMO: FOOD		
	State: District:		O (Op 0	·····/ •					
В.	Full Name (Last, First, Middle Initial) Mr. Reubin Smith	•					Transaction ID: 605 Date of Disbursemen	nt	
	Mailing Address P.O. Box 434						0 5 1 2	y žoó6°	
	City Clarksdale		State MS	Zip Code 38614-			Amount of Each Disk	bursement this Period	
	Purpose of Disbursement SEE BELOW; SALARIES FOOD						Refund or Dispos		
	Candidate Name					egory/ ype	Contributions Re		
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ecify)			SEE BELOW; SAI	LARIES FOOD	
	State: District:								
C.	Full Name (Last, First, Middle Initial) Mr. Reubin Smith						Transaction ID: 605 Date of Disbursement		
	Mailing Address P.O. Box 434						05 12	2006	
	City Clarksdale		State MS	Zip Code 38614-			Amount of Each Disl	bursement this Period	
	Purpose of Disbursement SALARIES						Refund or Dispos	1160.00	
	Candidate Name					egory/ ype	Contributions Re	quired Under	
	Office Sought: House Senate President	Disburse	ment For: Primary Other (spe	General ccify) ▼			[MEMO ITEM] MEMO: SALARIES	S	
_	State: District:								
s	UBTOTAL of Disbursements This Page	e (optional) .				▶		1500.00	

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	CHEDULE B (FEC Form 3	-		erate schedule(s)	FOR LIN	NE NUMBER: PAGE 130 / 146
ΙT	EMIZED DISBURSEMENT	S	for each category of the Detailed Summary Page		(Onlook o	X 17 18 19a 19b
_	o la farancia l'accessi de la constanti de la	1.01 1				20a 20b 20c 21
	for commercial purposes, other than using					n for the purpose of solicating contributions solicit contributions from such committee
\setminus	NAME OF COMMITTEE (In Full)					
	Friends of Bennie Thompson					
^	Full Name (Last, First, Middle Initial)					Transaction ID: 60519.E4993
Α.	Mr. Reubin Smith					Date of Disbursement
	Mailing Address P.O. Box 434			05 12 7 2006		
	City Clarksdale		State MS	Zip Code 38614-		Amount of Each Disbursement this Period
	Purpose of Disbursement		VIO	00011		390.00
	FOOD Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under		
			Type	11 C.F.R. 400.53 [MEMO ITEM]		
	Office Sought: House Senate	Disburser	nent For: Primary	General		MEMO: FOOD
	President		Other (spe			
	State: District:					
В.	Full Name (Last, First, Middle Initial)					Transaction ID: 60519.E4920
Б.	Flora Stigler	Date of Disbursement				
	Mailing Address P.O. Box 242		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
	City Carrollton		State MS	Zip Code 38917-		Amount of Each Disbursement this Period
	Purpose of Disbursement	·	VIO	30917-		800.00
	CANVASSING				Refund or Disposal of Excess	
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate	Disburser	nent For: Primary	General		CANVASSING
	President		Other (spe			
	State: District:					
C.	Full Name (Last, First, Middle Initial) Flora Stigler					Transaction ID: 60519.E4985 Date of Disbursement
						M M / D D / Y Y Y Y
	Mailing Address P.O. Box 242					05 12 2006
	City Carrollton		State MS	Zip Code 38917-		Amount of Each Disbursement this Period
	Purpose of Disbursement SEE BELOW; SALARIES					340.00 Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate					SEE BELOW; SALARIES
	President		Other (spe	General cify) ▼		
_	State: District:			•		
s	UBTOTAL of Disbursements This Page (optional)			>	1140.00

9/	PHEDIII E B /I	EEC Form 2	\						
	CHEDULE B (I		-		erate schedule(s)	\ I	FOR LINE I check only		PAGE 131 / 146
ITEMIZED DISBURSEMENTS		S	for each category of the Detailed Summary Page			Ď	17 18	19a 19b 20c 21	
								or the purpose of solicat cit contributions from s	
	NAME OF COMMITTE Friends of Bennie	, ,							
Α.	Full Name (Last, First Flora Stigler	t, Middle Initial)						Transaction ID: 605 Date of Disbursemen	nt
	Mailing Address	P.O. Box 242						05 12	^Y 2006
	City Carrollton			state MS	Zip Code 38917-			Amount of Each Disb	oursement this Period
	Purpose of Disburser SALARIES	nent		Refund or Dispos	340.00				
	Candidate Name		egory/ ype	Contributions Rec					
	Office Sought:	House Senate President		nent For: Primary Other (spe	General cify) ▼			[MEMO ITEM] MEMO: SALARIES	}
	State: Dis	strict:							
В.	Full Name (Last, First Telesouth Broadca							Transaction ID: 605 Date of Disbursemen	
	Mailing Address 3192 Browning Road							05 / 11 / 2006	
	City Greenwood			state MS	Zip Code 38935-			Amount of Each Disb	oursement this Period
	Purpose of Disburser RADIO SPOTS	nent					Refund or Dispos	435.00	
	Candidate Name					egory/ ype	Contributions Required Under 11 C.F.R. 400.53		
	Office Sought:	House Senate	Disburser	nent For: Primary	General			RADIO SPOTS	
	State: Dis	President strict:		Other (spe	cify) \blacktriangledown				
_	Full Name (Last, First	t, Middle Initial)						Transaction ID: 605	 19.E4943
C.	Terris, Barnes, Wa	alters						Date of Disbursemen	ıt
	Mailing Address	400 Montgomery	St., Ste.	900				$\begin{bmatrix} 0 & 5 & M \\ 0 & 5 & M \end{bmatrix}$	² 2006
	City San Francisco			state CA	Zip Code 94104-			Amount of Each Disb	oursement this Period
	Purpose of Disbursement MAILING							Refund or Dispos	2500.00 al of Excess
	Candidate Name						egory/ ype	Contributions Rec 11 C.F.R. 400.53	
	Office Sought:	House Senate President		nent For: Primary Other (spe	General			MAILING	
_	State: Dis	strict:							
١	LIRTOTAL of Dishures	ements This Page	(ontional)						2935.00

91	CHEDIII E B /EEC Form 2	\			1	
	CHEDULE B (FEC Form 3	-		rate schedule(s)	FOR LIN (check or	E NUMBER: PAGE 132 / 146
П	EMIZED DISBURSEMENT	RSEMENTS for each category of the Detailed Summary Page			l ` -	X 17 18 19a 19b
_						20a 20b 20c 21
	y Information copied from such Reports a for commercial purposes, other than using					of for the purpose of solicating contributions colicit contributions from such committee
Λ	NAME OF COMMITTEE (In Full)					
V	Friends of Bennie Thompson					
_	Full Name (Last, First, Middle Initial)					Transaction ID: 60519.E4873
Α.	The Image Specialist Co.					Date of Disbursement
	Mailing Address 323 Cotton Row					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City		State	Zip Code		Amount of Each Disbursement this Period
	Cleveland		MS	38732-		F10.00
	Purpose of Disbursement EQUIPMENT RENTAL					513.60
	Candidate Name				Category/	Refund or Disposal of Excess Contributions Required Under
					Type	11 C.F.R. 400.53
	Office Sought: House	Disburser	ment For:			EQUIPMENT RENTAL
	Senate		Primary	General		Egon WEITH HEITHAL
	President State: District:		Other (spe	city)		
_	Full Name (Last, First, Middle Initial)					- "
В.	The New Times, Inc.					Transaction ID: 60519.E4966 Date of Disbursement
						M M / D D / Y Y Y
	Mailing Address 1401 Main Stree	t				05 11 2006
	City	5	State	Zip Code		Amount of Each Disbursement this Period
	Vicksburg	1	MS	39180-		500.00
	Purpose of Disbursement NEWSPAPER AD				-	500.00
	Candidate Name				Category/	Refund or Disposal of Excess Contributions Required Under
					Type	11 C.F.R. 400.53
	Office Sought: House	Disburser				NEWSPAPER AD
	Senate President		Primary	General		
	State: District:		Other (spe	Cily) \		
_	Full Name (Last, First, Middle Initial)					Transaction ID: 60410.E4803
C.	Mr. James Thrasher					Date of Disbursement
	Mailing Address P.O. Box 11115					04 / 05 / 2006
	Mailing Address P.O. Box 11115					04 03 2000
	City Jackson		State MS	Zip Code 39208-		Amount of Each Disbursement this Period
	Purpose of Disbursement	<u>'</u>	VIO	39200-		149.08
	A/C SERVICE					Refund or Disposal of Excess
	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House	Disburser	ment For:			A/C SERVICE
	Senate		Primary	General		, , o olitiol
	State: President District:		Other (spe	cify) 🔻		
_	State: District:					
s	UBTOTAL of Disbursements This Page (optional)			.	1162.68

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S	CHEDULE B (FEC Form 3	5)	Use sepe	erate schedule(s)		-	NUMBER:	PAGE 133 / 146	6
ΙΤ	EMIZED DISBURSEMEN	ΓS		category of the Summary Page		check only	X 17	19a 19b 20c 21	
An	y Information copied from such Reports	and Stateme	ents may no	ot be sold or used	d by an	y person f			
	for commercial purposes, other than using								
	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson								
_	Full Name (Last, First, Middle Initial)						Transaction ID: 605	 519.E4916	
Α.	Mr. James Thrasher						Date of Disbursemen		
	Mailing Address P.O. Box 11115						05 05	Ž O O G	
	City Jackson		State MS	Zip Code 39208-			Amount of Each Disk	oursement this Perio	od
	Purpose of Disbursement				-			194.00	
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	Office Sought: House	Disburser					EQUIPMENT REP	AIR	
	Senate President		Primary Other (spe	General					
	State: District:		CC. (OPC	3 √					
	Full Name (Last, First, Middle Initial)						Transaction ID: 605	19.E4857	
В.	Trustmark National Bank						Date of Disbursemen		
	Mailing Address P.O. Box 291						04 01	2006	
	City		State	Zip Code			Amount of Each Disk	oursement this Perio	od
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\	NAME OF COMM	/IITTEE (In Full)								
/	Friends of Beni	nie Thompson								
		First, Middle Initial)						Transaction ID: 605	525.E5116	
٩.	Trustmark Nati	onal Bank						Date of Disbursemen	nt	
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_	•	First, Middle Initial)						Transaction ID: 605	519.E4931	
3.	Evelyn Turner							Date of Disbursemen	nt	
	Mailing Address	512 Martin Luther	King Jr. Dr	rive				05 05	200	6 ^Y
	City		State)	Zip Code			Amount of Each Disl	bursement this	Period
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Э.	Evelyn Turner	,,						Transaction ID: 605 Date of Disbursemen	nt	V
	Mailing Address	512 Martin Luther	King Jr. Dr	rive				05 12	ŽOŎ	6
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	y Information copied from such Reports and State for commercial purposes, other than using the nar				or the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson				
Α.	Full Name (Last, First, Middle Initial) Evelyn Turner Mailing Address 512 Martin Luther King	Jr. Drive			Transaction ID: 60519.E5059 Date of Disbursement
	City Yazoo City Purpose of Disbursement TRANSPORTATION Candidate Name Office Sought: House Senate President		General	Category/ Type	Amount of Each Disbursement this Period 380.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: TRANSPORTATION
	State: District:				
В.	Full Name (Last, First, Middle Initial) Evelyn Turner Mailing Address 512 Martin Luther King	Jr. Drive			Transaction ID: 60519.E5060 Date of Disbursement M 5 M / D 1 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Yazoo City		o Code 9194-		Amount of Each Disbursement this Period
	Purpose of Disbursement FOOD Candidate Name	Categor Type			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (specify)	General		MEMO: FOOD
C.	Full Name (Last, First, Middle Initial) Evelyn Turner				Transaction ID: 60519.E5058 Date of Disbursement 0 5
	Mailing Address 512 Martin Luther King	Jr. Drive			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ D & O & O \end{smallmatrix} \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ D & O & O \end{bmatrix}$
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<u>к </u>	Full Name (Last, U.S. Postal Se	First, Middle Initial)										10.E4	798	
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	City Bolton			State MS	Zip Code 39041-			Amou	ınt of	f Each	n Disb	urseme		is Period
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В.		First, Middle Initial) ervice Madison Street						Date		sburs	: 604 emen			ý 6 ^Y
	City Bolton			State MS	Zip Code 39041-			Amou	ınt of	f Each	n Disb	urseme	ent th	is Period
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_	State:	District: First, Middle Initial)									20.4	40.54		
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Mailing Address Madison Street City State Zip Code Bolton MS 39041- Purpose of Disbursement Post AGE Cardidate Name District: Full Name (Last, First, Middle Initial) State: District: District: District: District: Full Name (Last, First, Middle Initial) State: District: District: District: Full Name (Last, First, Middle Initial) Ct. U.S. Postal Service Mailing Address Madison Street Disbursement For: Ganeral Primary General Post AGE Cardidate Name Office Sought: House Senate President State: District: District: Full Name (Last, First, Middle Initial) Ct. U.S. Postal Service Mailing Address Madison Street City Senate President State: District: Di	Ū						
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for for many and address of any political committee to solicit contributions from such committee or solicit contributions from such contributions fro			r S f	or each c	ategory of the	(check only	y one) X 17
NAME OF COMMITTEE (in Full) Friends of Bennie Thompson Full Name (Last, First, Middle Initial) A. U.S. Postal Service Mailing Address Madison Street City Bolton MS 39041- Purpose of Disbursement POSTAGE Cardidate Name Office Sought: House Prisadent Disbursement For: Senate President Disbursement For: Bull Name (Last, First, Middle Initial) B. U.S. Postal Service Mailing Address Madison Street City State Disbursement For: Senate Prisadent Disbursement For: Bull Name (Last, First, Middle Initial) City State Zip Code MS 39041- Purpose of Disbursement POSTAGE Candidate Name City Disbursement Disbursement For: Disbursement For: Senate Prisadent Disbursement For: District: Full Name (Last, First, Middle Initial) Cu.S. Postal Service Mailing Address Madison Street Disbursement For: Senate Prisadent Disbursement For: Senate Prisadent Disbursement For: Senate Prisadent Disbursement For: Senate Prisadent Disbursement For: District: Full Name (Last, First, Middle Initial) Cu.S. Postal Service Mailing Address Madison Street Disbursement For: Senate Prisadent Disbursement For: District: Full Name (Last, First, Middle Initial) Cu.S. Postal Service Mailing Address Madison Street Disbursement For: District: Full Name (Last, First, Middle Initial) Cu.S. Postal Service Mailing Address Madison Street District: Full Name (Last, First, Middle Initial) Cu.S. Postal Service Mailing Address Madison Street District: Full Name (Last, First, Middle Initial) Cu.S. Postal Service Mailing Address Madison Street District: Full Name (Last, First, Middle Initial) Cu.S. Postal Service Mailing Address Madison Street District: Full Name (Last, First, Middle Initial) Cu.S. Postal Service Mailing Address Madison Street District: Full Name (Last, First, Middle Initial) Cu.S. Postal Service Mailing Address Madison Street District: Full Name (Last, First, Middle Initial) Cu.S. Postal Service Mailing Address Madison Street District: Full Name (Last, First, Middle Initial) Cu.S. Post							for the purpose of solicating contributions
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City Bolton MS 39041- Purpose of Disbursement ProstAGE Candidate Name Office Sought: House Primary General Disbursement Primary General ProstAGE Category' Type Office Sought: House Primary General Disbursement For: B. U.S. Postal Service Mailing Address Madison Street City Bolton MS 39041- Purpose of Disbursement Primary General Disbursement For: Senate Primary General Disbursement Dispuss of Excess Contributions Required Under 11 C.F.R. 400.53 Transaction ID: 60412.E4838 Date of Disbursement Primary General Disbursement Primary General Disbursement Trimary General Disbursement Dispuss of Excess Contributions Required Under 11 C.F.R. 400.53 POSTAGE City State Zip Code MS 39041- Purpose of Disbursement Primary General Disbursement Primary General Disbursement Dispuss General Disbursement Trimary General Disbursement Dispuss General Disbursement Primary General Disbursement Dispuss General Disbursement Primary General Disbursement Dispuss General Disbu	Α.	U.S. Postal Service					Date of Disbursement
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	y Information copied from such Reports and Stater for commercial purposes, other than using the nan			
\setminus	NAME OF COMMITTEE (In Full)			
/	Friends of Bennie Thompson			
Α.	Full Name (Last, First, Middle Initial) U.S. Postal Service			Transaction ID: 60412.E4856 Date of Disbursement
	Mailing Address Madison Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & O & O & G \\ Y & 2 & O & O & G \end{bmatrix}$
	City Bolton	State Zip Code MS 39041-		Amount of Each Disbursement this Period
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	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	sement For: Primary General Other (specify) ▼		POSTAGE
	State: District:			
В.	Full Name (Last, First, Middle Initial) U.S. Postal Service			Transaction ID: 60519.E4886 Date of Disbursement
	Mailing Address Madison Street			04
	City Bolton	State Zip Code MS 39041-		Amount of Each Disbursement this Period
	Purpose of Disbursement POSTAGE			390.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate President	sement For: Primary General Other (specify) ▼		POSTAGE
	State: District:			
C.	Full Name (Last, First, Middle Initial) Mr. Eldridge Walker			Transaction ID: 60519.E4949 Date of Disbursement
	Mailing Address P.O. Box 275			$\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ I & O \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ O & O & O \end{smallmatrix} \end{bmatrix} $
	City Rolling Fork	State Zip Code MS 39159-		Amount of Each Disbursement this Period
	Purpose of Disbursement TRANSPORTATION			450.00 Refund or Disposal of Excess
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Senate President	ement For: Primary General Other (specify)		TRANSPORTATION
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		ed from such Reports rposes, other than usin													IS
\setminus	NAME OF COM	MITTEE (In Full)													
	Friends of Ben	nie Thompson													
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Α.	Mr. Eldridge W	/alker						М	of D	isburs		nt	Y	Y	Y
	Mailing Address	P.O. Box 275						0 5		, L	1 2		2	οŏ	6
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		Senate President		Primary Other (spe	General			POR	TAT	ION					
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_	Full Name (Last,	First, Middle Initial)						Trans	sacti	on ID	: 60	519.E	503	36	
В.	Mr. Eldridge W	alker						Date	_	isburs		nt			
	Mailing Address	P.O. Box 275						0 ^M 5	М	/ D.	1 2	/ L	ž	οŏ	3 Y
	City Rolling Fork			State MS	Zip Code 39159-			Amou	unt o	f Each	n Dis	burse	men	t this I	Period
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		President		Other (spe	ecify) 🔻										
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C.	, ,	First, Middle Initial)										519.E	503	35	
•	Mr. Eldridge W	ainei								isburs		ent / v	Y	Υ .	Υ
	Mailing Address	P.O. Box 275						0 ^M 5		L	1 2		2	οŏ	6
	City Rolling Fork			State MS	Zip Code 39159-			Amou	ınt o	f Each	n Dis	burse	men	t this I	Period
	Purpose of Disbursement SALARIES						-	L					_	400.	00
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	Office Sought:	House	Disburser					[MEN MEM				S			
		Senate		Primary	General			1416141	٠. ر	<i>,</i> ,∟/٦					
	State:	President District:		Other (spe	еспу) 🔻										
_	Giaio.	District.													

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	CHEDULE B (FEC Form 3)	Use seperate schedule(s	s)	FOR LINE (check only	NUMBER: PAGE 140 / 146
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		`	X 17
	y Information copied from such Reports and S for commercial purposes, other than using the				
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson				
Α.	Full Name (Last, First, Middle Initial) Mr. Eldridge Walker Mailing Address P.O. Box 275				Transaction ID: 60519.E5037 Date of Disbursement M M D D V Y Y Y Y Y Y Y Y Y
	City	State Zip Code			Amount of Each Disbursement this Period
	Rolling Fork	MS 39159-			112.00
	Purpose of Disbursement FOOD				Refund or Disposal of Excess
	Candidate Name			ategory/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Dist Senate President	oursement For: Primary General Other (specify) ▼			[MEMO: FOOD
	State: District:				
В.	Full Name (Last, First, Middle Initial) Ms. Timla Washington				Transaction ID: 60519.E4875 Date of Disbursement
	Mailing Address P.O. Box 872				$\begin{bmatrix} \begin{smallmatrix} M & A & M \\ O & A & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ D & D & D \end{smallmatrix} & \begin{smallmatrix} V & Y & Y & Y & Q & O & G \\ V & D & O & G & G \end{bmatrix}$
	City Shaw	State Zip Code MS 38773-			Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL EXPENSE			* *	Refund or Disposal of Excess
	Candidate Name			ategory/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Dist Senate President	oursement For: Primary General Other (specify) ▼			TRAVEL EXPENSE
	State: District:				
C.	Full Name (Last, First, Middle Initial) Washington Co. Campaign Committee	9			Transaction ID: 60519.E5062 Date of Disbursement
	Mailing Address 1032 Meadow Drive				$\begin{bmatrix}\begin{smallmatrix}M\\05\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\12\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}D\\12\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}Y\\2006\end{smallmatrix}\end{bmatrix}^Y$
	City Greenville	State Zip Code MS 38703-			Amount of Each Disbursement this Period
	Purpose of Disbursement SEE BELOW; SALARIES TRANSPORTATI	ON		•	2510.00 Refund or Disposal of Excess
	Candidate Name			ategory/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Dist Senate President	oursement For: Primary General Other (specify) ▼	•		SEE BELOW; SALARIES TRANS- PORTATION
_	State: District:				
s	UBTOTAL of Disbursements This Page (optic	nal)		▶	2667.95

S	CHEDULE B (FEC Form 3)		FORLINE	NUMBER: PAGE 141 / 146				
	EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the	(check on					
		Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21				
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam							
Ν	NAME OF COMMITTEE (In Full)							
	Friends of Bennie Thompson							
A.	Full Name (Last, First, Middle Initial) Washington Co. Campaign Committee			Transaction ID: 60519.E5065 Date of Disbursement				
	Mailing Address 1032 Meadow Drive			05 M / D D / Y Y Y O O 6 Y				
	City Greenville	State Zip Code MS 38703-		Amount of Each Disbursement this Period				
	Purpose of Disbursement RALLY			Sound or Disposal of Excess				
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]				
	Senate President	ement For: Primary General Other (specify)		MEMO: RALLY				
	State: District:							
В.	Full Name (Last, First, Middle Initial) Washington Co. Campaign Committee			Transaction ID: 60519.E5064 Date of Disbursement				
	Mailing Address 1032 Meadow Drive			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
	,	State Zip Code MS 38703-		Amount of Each Disbursement this Period				
	Purpose of Disbursement TRANSPORTATION		510.00 Refund or Disposal of Excess					
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		[MEMO: TRANSPORTATION				
	State: District:							
C.	Full Name (Last, First, Middle Initial) Washington Co. Campaign Committee			Transaction ID: 60519.E5063 Date of Disbursement				
	Mailing Address 1032 Meadow Drive			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$				
		State Zip Code MS 38703-		Amount of Each Disbursement this Period				
	Purpose of Disbursement SALARIES			1500.00 Refund or Disposal of Excess				
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53					
	Office Sought: House Disburse Senate President	ement For: Primary		[MEMO ITEM] MEMO: SALARIES				
	State: District:	. · · · // ▼						
s	UBTOTAL of Disbursements This Page (optional)		>	0.00				

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check onl	NUMBER: PAGE 142 / 146 y one) X 17 18 19a 19b			
	y Information copied from such Reports and	Statements may not be sold or used					
or	for commercial purposes, other than using th	e name and address of any political	committee to so	olicit contributions from such committee			
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson						
_	Full Name (Last, First, Middle Initial)			Transaction ID: 60519.E4968			
A.	WBAD			Date of Disbursement			
	Mailing Address 126 Seven Oaks Ro	d.		$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \begin{smallmatrix} M \\ S \end{smallmatrix} & \begin{smallmatrix} D \\ O \end{smallmatrix} \begin{smallmatrix} D \\ I \end{smallmatrix} \begin{smallmatrix} D \\ I \end{smallmatrix} \begin{smallmatrix} D \\ I \end{smallmatrix} & \begin{smallmatrix} Y \\ I \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ I \end{smallmatrix} \begin{smallmatrix} Y \\ I \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ I \end{smallmatrix} \begin{smallmatrix} Y \\ I \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ I \end{smallmatrix} \begin{smallmatrix} Y \\ I \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ I \end{smallmatrix} \begin{smallmatrix} Y \\ I \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ I \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ I \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ I \end{smallmatrix} \end{smallmatrix}$			
	City Greenville	State Zip Code MS 38701-		Amount of Each Disbursement this Period			
	Purpose of Disbursement RADIO SPOTS			1080.00			
	Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53			
	Senate President	sbursement For: Primary General Other (specify)	.,,,,,	RADIO SPOTS			
	State: District:						
В.	Full Name (Last, First, Middle Initial) WCLD-FM			Transaction ID: 60410.E4810 Date of Disbursement			
	Mailing Address 911 South Davis St	reet		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & O & O & 6 \end{smallmatrix} $			
	City Cleveland	State Zip Code MS 38732-		Amount of Each Disbursement this Period			
	Purpose of Disbursement LIVE REMOTE			585.00 Refund or Disposal of Excess			
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Di Senate President	sbursement For: Primary General Other (specify) ▼		LIVE REMOTE			
	State: District:						
C.	Full Name (Last, First, Middle Initial) WGNL Radio Station			Transaction ID: 60519.E4967 Date of Disbursement			
	Mailing Address P.O. Box 1801			$\begin{bmatrix} \begin{smallmatrix} M & S & M \\ 0 & 5 & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ 1 & 1 & 1 \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 & Y \end{bmatrix}$			
	City Greenwood	State Zip Code MS 38930-		Amount of Each Disbursement this Period			
	Purpose of Disbursement RADIO SPOTS		•	1850.00 Refund or Disposal of Excess			
	Candidate Name						
	Senate President	sbursement For: Primary General Other (specify)		RADIO SPOTS			
_	State: District:						

3515.00

SUBTOTAL of Disbursements This Page (optional)

	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE (check only	NUMBER: PAGE 143 / 146
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	l ` <u>-</u>	X 17 18 19a 19b 20a 20b 20c 21
	y Information copied from such Reports and State for commercial purposes, other than using the nar			
\rangle	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Α.	Full Name (Last, First, Middle Initial) WHLH			Transaction ID: 60519.E4974 Date of Disbursement 05 11 2006
	Mailing Address 1375 Beasley Road			05 11 2006
	City Jackson	State Zip Code MS 39206-		Amount of Each Disbursement this Period
	Purpose of Disbursement RADIO SPOTS			4025.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate President	sement For: Primary General Other (specify) ▼		RADIO SPOTS
	State: District:			
В.	Full Name (Last, First, Middle Initial) WJIW-FM			Transaction ID: 60519.E4971 Date of Disbursement
	Mailing Address 830 Maine Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$
	City Greenville	State Zip Code MS 38702-		Amount of Each Disbursement this Period
	Purpose of Disbursement RADIO SPOTS		•	942.50 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate President	sement For: Primary General Other (specify)		RADIO SPOTS
	State: District:	care (epocary) V		
C.	Full Name (Last, First, Middle Initial) WONG			Transaction ID: 60519.E4973 Date of Disbursement
	Mailing Address 126 E. Sowell			$\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & I \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ I & I & I & I \end{bmatrix} $
	City Canton	State Zip Code MS 39046-		Amount of Each Disbursement this Period
	Purpose of Disbursement		-	870.00
	RADIO SPOTS Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate President	sement For: Primary General Other (specify)	7	RADIO SPOTS
	State: District:			
s	UBTOTAL of Disbursements This Page (optional)	>	5837.50

	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE (check only	NUMBER: PAGE 144 / 146
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	l ` <u>-</u>	χ 17
		Detailed Suffillary Fage		20a 20b 20c 21
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
\setminus	NAME OF COMMITTEE (In Full)			
/	Friends of Bennie Thompson			
<u>/</u>	Full Name (Last, First, Middle Initial)			Transaction ID: 60519.E4976
Α.	WRTM Radio Station			Date of Disbursement
	Mailing Address P.O. Box 9734			0 5 M / D 1 1 Y Y Y O O 6 Y
	City Jackson	State Zip Code MS 39286-		Amount of Each Disbursement this Period
	Purpose of Disbursement		•	1680.00
	RADIO SPOTS			Refund or Disposal of Excess Contributions Required Under
	Candidate Name		Category/ Type	11 C.F.R. 400.53
	Office Sought: House Disburse	ement For:	71	RADIO SPOTS
	Senate	Primary General		17/12/2 0/ 0/ 0
	President State: District:	Other (specify)		
_	Full Name (Last, First, Middle Initial)			Transaction ID: 60519.E4972
В.	WTYJ Radio			Date of Disbursement
	Mailing Address P.O. Box 1248			$\begin{bmatrix} M & M & M \\ 0 & 5 & M \end{bmatrix} \ / \ \begin{bmatrix} D & D & D \\ 1 & 1 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{bmatrix} $
	,	State Zip Code		Amount of Each Disbursement this Period
	Natchez Purpose of Disbursement	MS 39121-		1276.00
	RADIO SPOTS			Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse	ement For:		RADIO SPOTS
	President	Primary General Other (specify) ▼		
	State: District:	(-p)/ V		
C.	Full Name (Last, First, Middle Initial)			Transaction ID: 60519.E4953
Ο.	Gertrude Young			Date of Disbursement
	Mailing Address 2067 Sky Farm Avenue			05 10 / 2006
	City Vicksburg	State Zip Code MS 39180-		Amount of Each Disbursement this Period
	Purpose of Disbursement			324.00
	TRANSPORTATION Candidate Name		Catagory	Refund or Disposal of Excess Contributions Required Under
	Carolidate Harrie		Category/ Type	11 C.F.R. 400.53
		ement For:		TRANSPORTATION
	Senate President	Primary General		
	State: District:	Other (specify)		
	-			2000.00
S	UBTOTAL of Disbursements This Page (optional)			3280.00

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page) FOR LINE (check on	PAGE 145 / 146 ly one) X 17	
	y Information copied from such Reports and Si for commercial purposes, other than using the			for the purpose of solicating contributions	
	NAME OF COMMITTEE (In Full) Friends of Bennie Thompson	and and address of any pointed			
<u>/</u> A.	Full Name (Last, First, Middle Initial) Gertrude Young			Transaction ID: 60519.E5050 Date of Disbursement	
	Mailing Address 2067 Sky Farm Aver	ue		05 12 7 2006	
	City Vicksburg	State Zip Code MS 39180-	ı	Amount of Each Disbursement this Period 300.00	
	Purpose of Disbursement SEE BELOW; SALARIES TRANSPORTATION Candidate Name Category/ Type			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Disk Senate President State: District:	ursement For: Primary General Other (specify) ▼	Турс	SEE BELOW; SALARIES TRANS- PORTATION	
В.	Full Name (Last, First, Middle Initial) Gertrude Young Mailing Address 2067 Sky Farm Aver	ue .		Transaction ID: 60519.E5052 Date of Disbursement O 5	
	City Vicksburg Purpose of Disbursement FOOD Candidate Name	State Zip Code MS 39180-	Category/ Type	Amount of Each Disbursement this Period 100.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Senate President State: District:	ursement For: Primary General Other (specify) ▼		[MEMO: FOOD	
C.	Full Name (Last, First, Middle Initial) Gertrude Young			Transaction ID: 60519.E5051 Date of Disbursement 0 5	
	Mailing Address 2067 Sky Farm Avenue			05 12 7 2006	
	City Vicksburg Purpose of Disbursement SALARIES	State Zip Code MS 39180-		Amount of Each Disbursement this Period 200.00 Refund or Disposal of Excess Contributions Described Under	
	Candidate Name Office Sought: House Senate President State: District:	ursement For: Primary General Other (specify)	Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SALARIES	

300.00

193699.33

SUBTOTAL of Disbursements This Page (optional)

SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 146 / 146 Use seperate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 18 19a 19b 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Friends of Bennie Thompson Full Name (Last, First, Middle Initial) Transaction ID: 60412.E4836 JFK Junior Beta Date of Disbursement 10 o[™]4 2006 Mailing Address 204 North Edwards Avenue City State Zip Code Amount of Each Disbursement this Period Mound Bayou MS 38762-150.00 Purpose of Disbursement **DONATION** Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: 2006 House Senate X Primary General President Other (specify) State: District:

SUBTOTAL of Disbursements This Page (optional)	•	150.00
TOTAL This Period (last page this line number only)	<u> </u>	150.00