

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

1 NAME OF COMMITTEE (in full)

Boyd For Congress

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

P.O. Box 15703

CITY, STATE and ZIP CODE

Tallahassee, FL 32317

STATE/DISTRICT

FL 02

2. FEC IDENTIFICATION NUMBER  
C00310607

3. IS THIS REPORT AN AMENDMENT?

YES  NO

## 4. TYPE OF REPORT

April 15 Quarterly Report

Twelfth day report preceding

(Type of Election)

July 15 Quarterly Report

election on \_\_\_\_\_ in the State of \_\_\_\_\_

October 15 Quarterly Report

Thirtieth day report following the General Election on

January 31 Year End Report

in the State of \_\_\_\_\_

July 31 Mid-Year Report (Non-election Year Only)

Termination Report

This report contains activity for

Primary Election

General Election

Special Election

Runoff Election

## SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-date
01/01/2000 through 03/31/2000		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	\$68650.00	\$68650.00
(b) Total Contribution Refunds (From Line 20(d))	\$0.00	\$0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$68650.00	\$68650.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$23467.75	\$23467.75
(b) Total Offsets to Operating Expenditures (from Line 14)	\$0.00	\$0.00
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	\$23467.75	\$23467.75
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$289194.47	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule G and/or Schedule D)	\$0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule G and/or Schedule U)	\$2000.00	

For further information:  
Federal Election Commission  
535 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-219-3420

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

Type or Print Name of Treasurer

Jennifer Cannon

Signature of Treasurer

*Jennifer Cannon*

Date

4-14-00

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

**FEC FORM 3**  
(Revised 4/87)

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

Name of Committee (in full) Boyd For Congress	Report Covering the Period: From: 01/01/2000 To: 03/31/2000	
I. RECEIPTS	Column A Total This Period	Column B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (Use Schedule A)	\$19650.00	
(ii) Unitemized	\$1000.00	
(iii) Total of contributions from individual	\$20650.00	\$20650.00
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$48000.00	\$48000.00
(d) The Candidate	\$0.00	\$0.00
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(ii), (b), (c) and (d))	\$68650.00	\$68650.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) All Other Loans	\$0.00	\$0.00
(c) TOTAL LOANS (add 13(a) and (b))	\$0.00	\$0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	\$0.00	\$0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	\$0.00	\$0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	\$68650.00	\$68650.00
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	\$23487.75	\$23487.75
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 19(a) and (b))	\$0.00	\$0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	\$0.00	\$0.00
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$0.00	\$0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	\$0.00	\$0.00
21. OTHER DISBURSEMENTS	\$0.00	\$0.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	\$23487.75	\$23487.75
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$244012.22
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$68650.00
25. SUBTOTAL (add Line 23 and Line 24)		\$312662.22
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		\$23487.75
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		\$289194.47

SCHEDULE A

ITEMIZED RECEIPTS

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

Any information copied from such reports and statements may not be valid 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)

Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DuRose Ausley P.O. Box 391 Tallahassee, FL 32302- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Mac Parlone, Ausley, Ferguson, Occupation Attorney	01/11/200	\$500.00
Aggregate Year-to-Date ->		\$500.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Booker III 3900 Wisconsin Ave Washington, DC 20016- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Fannie Mae Occupation Vice President	03/30/200	\$250.00
Aggregate Year-to-Date ->		\$250.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Brooks 1800 F. Paul Dirac Drive Tallahassee, FL 32306-4005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Unknown Occupation Unknown	01/19/200	\$250.00
Aggregate Year-to-Date ->		\$250.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chad Brownstein 45 West 67th St. #31D New York, NY 10023-6267 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Business Executive Occupation Business Executive	03/22/200	\$1000.00
Aggregate Year-to-Date ->		\$1000.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert BULLeson 1007 E. Desoto Park Dr. Tallahassee, FL 32302- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Fl. Trans. Building Assoc. Occupation Government Consultant	01/19/200	\$500.00
Aggregate Year-to-Date ->		\$500.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert and Judith Carden P.O. Box 1834 Winter Haven, FL 33882- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Farmer Occupation Farmer	02/03/200	\$500.00
Aggregate Year-to-Date ->		\$500.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward Carney 4517 Miccosukee Rd. Tallahassee, FL 32308-6832 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	TMRMC Occupation Doctor	01/12/200	\$500.00
Aggregate Year-to-Date ->		\$500.00	

SUBTOTAL of Receipts This Page (optional)

\$3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page	PAGE	OF
	2	5
FOR LINE NUMBER 11(a)(i)		

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 electoral purposes, other than using the 2000-2004 address of any political committee to solicit contributions from such sources.

NAME OF COMMITTEE (In Full)  
Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Clarke 4703 Highgrove Rd. Tallahassee, FL 32308-	Attorney	01/10/200	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$500.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douglas Croley 2953 Royal Oaks Drive Tallahassee, FL 32308-	Nationwide Representative	01/11/200	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$500.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Davis, Jr. 2727 Miller Landing Rd. Tallahassee, FL 32308-	Oral Surgeon	01/12/200	\$400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$400.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elvia Goldberg 12121 Wilshire Blvd., Ste.301 Los Angeles, CA 90025-	CPA	01/18/200	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$1000.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven Goldberg 12121 Wilshire Blvd., Ste. 301 Los Angeles, CA 90025-	Accountant	01/18/200	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$1000.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hillard Gordon 11601 Wilshire Blvd., Suite 2300 Los Angeles, CA 90025-	Self CPA	01/18/200	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$1000.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bill and Teresa Gunter 3444 Jonathans Landing Dr. Tallahassee, FL 32308-	Bill Gunter and Associates Insurance Executive	01/19/200	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$250.00	

SUBTOTAL of Receipts This Page (optional)	\$4650.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 5

FOR LINE NUMBER 11(a)(i)

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)  
Boyd for Congress

<p>A. Full Name, Mailing Address and Zip Code Frank Helms 2208 Mendoza Avenue Tallahassee, FL 32315-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Helms Exterminators</p> <p>Occupation President</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 03/09/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code Robert Hightower P.O. Box 4165 Tallahassee, FL 32315-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -&gt; \$250.00</p>	<p>Date (month, day, year) 01/19/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>C. Full Name, Mailing Address and Zip Code Lewis Korman 911 Park Ave., Apt. 13a New York, NY 10021</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Starlight International</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 01/18/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>D. Full Name, Mailing Address and Zip Code Sharon Korman 911 Park Ave., Apt. 13a New York, NY 10021-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Starlight International</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 01/18/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>E. Full Name, Mailing Address and Zip Code John Lewis 4501 Rockridge Hollow Tallahassee, FL 32308-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Super Lube</p> <p>Occupation President</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 01/12/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Linda McCarthy 1227 Pine Valley Dr. New Bern, NC 28562-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Starlight International</p> <p>Occupation Representative</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 03/09/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>G. Full Name, Mailing Address and Zip Code Michael McCarthy 1227 Pine Valley Dr. New Bern, NC 28562-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Starlight International</p> <p>Occupation Representative</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 03/09/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$5250.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such reports and statements may not be used by any person for the purpose of soliciting contributions or for electoral purposes, other than using the name and address of any political committee in electoral communications that such committee has authorized.

NAME OF COMMITTEE (In Full)  
Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code Robert Miller P.O. Box 13879 Tallahassee, FL 32317-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Capital Insurance Agency</p> <p>Occupation Ins. Sales &amp; Mgmt.</p> <p>Aggregate Year-to-Date -&gt; \$200.00</p>	<p>Date (month, day, year) 01/12/200</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>B. Full Name, Mailing Address and Zip Code Herbert Morgan PC Box 13856 Tallahassee, FL 32317-3856</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Herb Morgan Realty, Inc.</p> <p>Occupation Realtor</p> <p>Aggregate Year-to-Date -&gt; \$300.00</p>	<p>Date (month, day, year) 01/12/200</p>	<p>Amount of Each Receipt this Period \$300.00</p>
<p>C. Full Name, Mailing Address and Zip Code Janet Patten 511 Hays Street Tallahassee, FL 32301-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer National Magnetic Field Lab</p> <p>Occupation Director</p> <p>Aggregate Year-to-Date -&gt; \$250.00</p>	<p>Date (month, day, year) 01/19/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>D. Full Name, Mailing Address and Zip Code Alan Poma Diamond Star Power, Inc 4651 Gulf Shore Blvd, N #PH-5</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self</p> <p>Occupation Retail Marketing Consulting</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 03/09/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>E. Full Name, Mailing Address and Zip Code Robert Redding 405 Rucker Pl. Alexandria, VA 22301-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer The Redding Firm</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 03/29/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>F. Full Name, Mailing Address and Zip Code Herman Sanchez P.O. Box 1107 Cross City, FL 32628-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation LOGGING/TRUCKING</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 01/06/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>G. Full Name, Mailing Address and Zip Code Kingswood Sprott 123 Homewood Dr. Winter Haven, FL 33880-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Citrus Grower</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 02/03/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>

SUBTOTAL of Receipts This Page (optional)	\$3750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such reports and statements may not be valid 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 individuals.

NAME OF COMMITTEE (In Full)  
 Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Thompson P.O. Box 391 Tallahassee, FL 32302-0391 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Mac Farlane, Ausley, Ferguson, Attorney	01/12/200	\$500.00
Aggregate Year-to-Date ->		\$500.00	
Samuel Turnbull PO Box 3774 Tallahassee, FL 32315- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired	Date (month, day, year) 01/20/200	Amount of Each Receipt this Period \$250.00
Aggregate Year-to-Date ->		\$250.00	
James Walton, III 7019 McBride Pointe Tallahassee, FL 32312- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self	Date (month, day, year) 01/12/200	Amount of Each Receipt this Period \$500.00
Aggregate Year-to-Date ->		\$500.00	
James Walton, III 7019 McBride Pointe Tallahassee, FL 32312- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self	Date (month, day, year) 01/19/200	Amount of Each Receipt this Period \$250.00
Aggregate Year-to-Date ->		\$750.00	
Valerie Weiner 124 Lighthouse Mall Marina Del Rey, CA 90292- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Starlight Int. Agent	Date (month, day, year) 01/18/200	Amount of Each Receipt this Period \$1000.00
Aggregate Year-to-Date ->		\$1000.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	/ /	
Aggregate Year-to-Date ->			
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	/ /	
Aggregate Year-to-Date ->			

SUBTOTAL of Receipts This Page (optional)	\$2500.00
TOTAL This Period (last page this line number only)	\$19650.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 8  
FOR LINE NUMBER 11(c)

Any information copied from such Reports and Statements may not be valid 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)**  
Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code Brown &amp; Williamson Tobacco EMPAC Ms. Sissy Pressnell, Mgr Gov't Affairs 1701 Pennsylvania Avenue, NW Washington, DC 20036-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/29/200  \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Nat'l Cattleman's Beef Association PAC Attn: Candy Harrison Vice President, Public Policy Washington, DC 20004-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 02/25/200  \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>C. Full Name, Mailing Address and Zip Code American Trucking Association PAC Attn: Royal R. Roth 430 First St., S.E. Washington, DC 20003-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/19/200  \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code A. Dude &amp; Sons, Inc., PAC Attn: Doug Mann Post Office Box 257 Cviado, FL 32765-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 02/16/200  \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>E. Full Name, Mailing Address and Zip Code American Assn. of Crop Insurers PAC 1 Mass. Ave., No. 800  Washington, DC 20001-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/29/200  \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>F. Full Name, Mailing Address and Zip Code The AAN-Nursery Industry PAC 1250 I Street, N.W. Suite 503 Washington, DC 20005-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/29/200  \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>G. Full Name, Mailing Address and Zip Code Action Cmte for Rural Electric PAC Attn: Wally Rustad 4301 Wilson Blvd. Arlington, VA 22203-1860</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/29/200  \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>

<p><b>SUBTOTAL</b> of Receipts This Page (optional)</p>	<p>\$6000.00</p>
<p><b>TOTAL</b> This Period (last page this line number only)</p>	<p></p>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 3  
FOR LIKE NUMBER  
11(c)

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)**  
Boyd For Congress

<p><b>A. Full Name, Mailing Address and Zip Code</b> American Federation Of Government Employees PAC 80 F Street, NW Washington, DC 20001-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Date (month, day, year)</b> 03/18/200</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b> Am Fed of State, County &amp; Mun Emp PAC Attn: Mark Neumeiser 1625 L St., NW Washington, DC 20036-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-to-Date -&gt;</b> \$1000.00</p>	<p><b>Date (month, day, year)</b> 03/31/200</p>	<p><b>Amount of Each Receipt this Period</b> \$1000.00</p>
<p><b>C. Full Name, Mailing Address and Zip Code</b> American Association Of Anesthesiologists Inc. 520 N. Northwest HWY Park Ridge, IL 60068-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-to-Date -&gt;</b> \$2000.00</p>	<p><b>Date (month, day, year)</b> 03/18/200</p>	<p><b>Amount of Each Receipt this Period</b> \$2000.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b> Alitel Corporation PAC One Allied Dr. Little Rock, AR 72202-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-to-Date -&gt;</b> \$1000.00</p>	<p><b>Date (month, day, year)</b> 03/29/200</p>	<p><b>Amount of Each Receipt this Period</b> \$1000.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b> American Council of Life Insurance PAC Attn: Robert Arensberg Washington, DC 20004-2599</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Date (month, day, year)</b> 03/30/200</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b> American Council of Life Insurance PAC Attn: Robert Arensberg Washington, DC 20004-2599</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year to Date -&gt;</b> \$1000.00</p>	<p><b>Date (month, day, year)</b> 03/30/200</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b> American Bankers Association PAC Attn: Floyd Stone 1120 Connecticut Ave., NW Washington, DC 20036-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Date (month, day, year)</b> 03/09/200</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>

<p><b>SUBTOTAL of Receipts This Page (optional)</b></p>	<p>\$6000.00</p>
<p><b>TOTAL This Period (last page this line number only)</b></p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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)  
 Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code                  American Crystal Sugar PAC                  101 North Third Street                  Moorhead, MN 56560-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/29/200</p> <p>03/22/200</p> <p>03/30/200</p> <p>01/11/200</p> <p>03/18/200</p> <p>03/17/200</p> <p>01/18/200</p>	<p>Amount of Each Receipt this Period</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$1000.00</p> <p>\$500.00</p> <p>\$1000.00</p>
<p>B. Full Name, Mailing Address and Zip Code                  American Hotel &amp; Motel Assn.                  Attn: John Cornors                  1201 New York Avenue, N.W.                  Washington, DC 20053-931</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/22/200</p> <p>03/22/200</p> <p>03/30/200</p> <p>01/11/200</p> <p>03/18/200</p> <p>03/17/200</p> <p>01/18/200</p>	<p>Amount of Each Receipt this Period</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$1000.00</p> <p>\$500.00</p> <p>\$1000.00</p>
<p>C. Full Name, Mailing Address and Zip Code                  American Optometric Association PAC                  Attn: Noel Brazil                  1505 Prince St., Suite 300                  Alexandria, VA 22314-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/30/200</p> <p>03/22/200</p> <p>03/30/200</p> <p>01/11/200</p> <p>03/18/200</p> <p>03/17/200</p> <p>01/18/200</p>	<p>Amount of Each Receipt this Period</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$1000.00</p> <p>\$500.00</p> <p>\$1000.00</p>
<p>D. Full Name, Mailing Address and Zip Code                  Bank of America PAC                  315 S. Calhoun St. Ste. 120                  Tallahassee, FL 32301-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 01/11/200</p> <p>03/22/200</p> <p>03/30/200</p> <p>01/11/200</p> <p>03/18/200</p> <p>03/17/200</p> <p>01/18/200</p>	<p>Amount of Each Receipt this Period</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$1000.00</p> <p>\$500.00</p> <p>\$1000.00</p>
<p>E. Full Name, Mailing Address and Zip Code                  Blue Cross &amp; Blue Shield Assoc. PAC                  Attn: Barry Trimble                  1310 G Street, N.W., 12th. Floor                  Washington, DC 20005-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/18/200</p> <p>03/22/200</p> <p>03/30/200</p> <p>01/11/200</p> <p>03/18/200</p> <p>03/17/200</p> <p>01/18/200</p>	<p>Amount of Each Receipt this Period</p> <p>\$1000.00</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$1000.00</p> <p>\$500.00</p> <p>\$1000.00</p>
<p>F. Full Name, Mailing Address and Zip Code                  Hoing Political Action Committee                  1200 Wilson Blvd.                  Attn: Maria Little                  Arlington, VA 22209-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/17/200</p> <p>03/22/200</p> <p>03/30/200</p> <p>01/11/200</p> <p>03/18/200</p> <p>03/17/200</p> <p>01/18/200</p>	<p>Amount of Each Receipt this Period</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$1000.00</p> <p>\$500.00</p> <p>\$1000.00</p>
<p>G. Full Name, Mailing Address and Zip Code                  Build PAC, National Assoc. of Home Build                  Attn: Tom Hipple                  1201 15th. Street, N.W.                  Washington, DC 20005-2800</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 01/18/200</p> <p>03/22/200</p> <p>03/30/200</p> <p>01/11/200</p> <p>03/18/200</p> <p>03/17/200</p> <p>01/18/200</p>	<p>Amount of Each Receipt this Period</p> <p>\$1000.00</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$500.00</p> <p>\$1000.00</p> <p>\$500.00</p> <p>\$1000.00</p>

SUBTOTAL of Receipts This Page (optional)	\$4500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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)  
Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code Build PAC, National Assoc. of Home Build Attn: Tom Hipple 120 15th Street, N.W. Washington, DC 20005-2800</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 02/21/200</p>	<p>Amount of Each Receipt this Period 92000.00</p>
Aggregate Year-to-Date ->		\$3000.00	
<p>B. Full Name, Mailing Address and Zip Code Committee for Advancement of SE Cotton PAC Attn: John Maguire Washington, DC 20036-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/18/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
Aggregate Year-to-Date ->		\$1000.00	
<p>C. Full Name, Mailing Address and Zip Code Champions for Good Gov. of Champ. Int'l Attn: Jeanne Connelly 1875 Eye St. Ste. 540 Washington, DC 20006-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/18/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
Aggregate Year-to-Date ->		\$500.00	
<p>D. Full Name, Mailing Address and Zip Code Conagra Good Gov't. Association One Conagra Dr. Omaha, NE 68102-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/17/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
Aggregate Year-to-Date ->		\$500.00	
<p>E. Full Name, Mailing Address and Zip Code Dairy Farmers of America, Inc. DRPAC Attn: Sam Stone 10222 N Executive Hills Blvd Kansas City, MO 64153-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 02/11/200</p>	<p>Amount of Each Receipt this Period \$1500.00</p>
Aggregate Year-to-Date ->		\$1500.00	
<p>F. Full Name, Mailing Address and Zip Code Deloitte &amp; Touche, L.L.P., PAC Attn: Wade Williams 555 12th Street, NW, Suite 500 Washington, DC 20004 0365</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/02/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
Aggregate Year-to-Date ->		\$1000.00	
<p>G. Full Name, Mailing Address and Zip Code United Egg Association PAC 1303 Hightower Tr. Ste. 200 Atlanta, GA 30350-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/29/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
Aggregate Year-to-Date ->		\$1000.00	

SUBTOTAL of Receipts This Page (optional)	\$7500.00
TOTAL This Period (Last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Any information reported 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)

Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Exxon Mobil Corporation PAC Attn: Walter Buchholz P.O. Box 2180 Houston, TX 77252-2180 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/22/200	\$500.00
		Aggregate Year-to-Date ->	\$500.00
B. Full Name, Mailing Address and Zip Code International Assoc. of Fire Fighters Attn: Fred Nesbitt 1750 New York Ave., N. W. Washington, DC 20006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/30/200	\$500.00
		Aggregate Year-to-Date ->	\$500.00
C. Full Name, Mailing Address and Zip Code Federal Express PAC 1980 Nonconnah Blvd. Memphis, TN 38132- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/17/200	\$5000.00
		Aggregate Year-to-Date ->	\$5000.00
D. Full Name, Mailing Address and Zip Code General Dynamics Voluntary PAC Attn: Cork Colburn 3190 Fairview Park Drive Falls Church, VA 22042-4523 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/17/200	\$500.00
		Aggregate Year-to-Date ->	\$500.00
E. Full Name, Mailing Address and Zip Code Independent Insurance Agents of Amer PAC Attn: Maria Berthound 412 First Street, S.E., Suite 300 Washington, DC 20003-1804 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/17/200	\$1000.00
		Aggregate Year-to-Date ->	\$1000.00
F. Full Name, Mailing Address and Zip Code Kesh Industries Inc. PAC 1450 G Street, NW Suite 445 Attn: Kimberly Kehoe Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/22/200	\$1000.00
		Aggregate Year-to-Date ->	\$1000.00
G. Full Name, Mailing Address and Zip Code Laborers' Political League Attn: Don Kaniewski 905-16th Street, N.W. Washington, DC 20006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/30/200	\$1000.00
		Aggregate Year-to-Date ->	\$1000.00

SUBTOTAL of Receipts This Page (optional)	\$9500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In Full)  
Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code Lockheed Martin Employees PAC 1725 Jefferson Davis Hwy Crystal Square Two, Suite 300 Arlington, VA 22202-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/30/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
Aggregate Year-to-Date ->		\$500.00	
<p>B. Full Name, Mailing Address and Zip Code Kann-Dak Farmers Cooperative NDFFAC 7525 Red River Rd. Wahpeton, ND 58075-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/17/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
Aggregate Year-to-Date ->		\$500.00	
<p>C. Full Name, Mailing Address and Zip Code National Association of Convenience Stores PAC Attn: Marc Katz Alexandria, VA 22314-2792</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 02/24/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
Aggregate Year-to-Date ->		\$1000.00	
<p>D. Full Name, Mailing Address and Zip Code National Association of Insurance and Financial Advisors PAC 1922 F. St., NW Washington, DC 20006-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 01/12/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
Aggregate Year-to-Date ->		\$1000.00	
<p>E. Full Name, Mailing Address and Zip Code National Chicken Council PAC Attn: Mary M. Colville 1315 Fifteenth Street, NW, Suite 930 Washington, DC 20005-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/17/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
Aggregate Year-to-Date ->		\$1000.00	
<p>F. Full Name, Mailing Address and Zip Code National Milk Producers Pac Attn: Roger Eldridge 2101 Wilson Blvd., Suite 400 Arlington, VA 22201-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/29/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
Aggregate Year-to-Date ->		\$500.00	
<p>G. Full Name, Mailing Address and Zip Code National Restaurant Association PAC Attn: Bill McCormick 1200 Seventeenth Street, N.W. Washington, DC 20036-3097</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 03/30/200</p>	<p>Amount of Each Receipt this Period \$500.00</p>
Aggregate Year-to-Date ->		\$500.00	

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

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	7	8
FOR LINE NUMBER		
11 (c)		

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)

Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code Retail PAC National Retail Federation, Inc. 325 - 7th St., N.W., Ste. 1000 Washington, DC 20004-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/17/200</p> <p>\$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code NationsBank Corporation PAC Attn: Mark Leggett 100 North Tryon St. Charlotte, NC 28202-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/09/200</p> <p>\$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>C. Full Name, Mailing Address and Zip Code Newport News Shipbuilding SHIP9AC Attn: Patrick Tucker 801 Pennsylvania Ave., NW, Ste. 350 Washington, DC 20004-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/30/200</p> <p>\$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Paul Magliocchetti Associates PAC 1755 Jefferson Davis HWY. Ste. 1107 Arlington, VA 22202-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/17/200</p> <p>\$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>E. Full Name, Mailing Address and Zip Code Peanut PAC of Alabama Attn: Randy Griggs P.O. Box 10182 Dothan, AL 36304-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/29/200</p> <p>\$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>F. Full Name, Mailing Address and Zip Code Philip Morris Companies Inc. PAC  120 Park Avenue New York, NY 10017-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 03/22/200</p> <p>\$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>G. Full Name, Mailing Address and Zip Code R J Reynolds Political Action Committee 401 N. Main Street  Winston Salem, NC 27102-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 02/11/200</p> <p>\$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>

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

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page	PAGE	OF
	3	8
FOR LINE NUMBER		
11(c)		

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 electoral purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Boyd For Congress

A. Full Name, Mailing Address and Zip Code Responsible Gov't Comm. of Gulf Employee One Energy Place  Pensacola, FL 32520- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	03/02/200	
Aggregate Year-to-Date ->		\$1000.00	
B. Full Name, Mailing Address and Zip Code Safari Club International PAC 1301 - 26th Street, NW, Suite 902  Washington, DC 20037- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	03/17/200	
Aggregate Year-to-Date ->		\$500.00	
C. Full Name, Mailing Address and Zip Code Southern Minnesota Sugar Cooperative PAL  Renville, MN 56384- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	03/17/200	
Aggregate Year-to-Date ->		\$500.00	
D. Full Name, Mailing Address and Zip Code USTeam PAC 100 West Fulham Ave. Attn: Todd Walker Greenwich, CT 06830- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	03/22/200	
Aggregate Year-to-Date ->		\$1000.00	
E. Full Name, Mailing Address and Zip Code Winston & Strawn 1400 L St. NW  Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	02/11/200	
Aggregate Year-to-Date ->		\$1000.00	
F. Full Name, Mailing Address and Zip Code   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Aggregate Year-to-Date ->			
G. Full Name, Mailing Address and Zip Code   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Aggregate Year-to-Date ->			

SUBTOTAL of Receipts This Page (optional)	\$4000.00
TOTAL This Period (last page this line number only)	\$48000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

See separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	4
FOR LINE NUMBER		
17		

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

NAME OF COMMITTEE (In Full)

Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Alltel/360 Communications P.O. Box 96019 Charlotte, NC 28296-0019	cell bills Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/13/200	\$406.33
Alltel/360 Communications P.O. Box 96019 Charlotte, NC 28296-0019	Cell Bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/04/200	\$369.78
Alltel/360 Communications P.O. Box 96019 Charlotte, NC 28296-0019	Cell Bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/09/200	\$77.36
Astro Travel and Tours 926 N. Monroe St. Tallahassee, FL 32303-	Andy Ellis Airfare to DC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/13/200	\$205.00
Bethesda Engravers 6405 Beckley St. Baltimore, MD 21224-	Stationary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/09/200	\$344.00
Ms. Jennifer Cannon 168 Duddington Place Washington, DC 20003-	meals and travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/16/200	\$266.95
Andy Ellis 1001 Coala Rd. Apt. 125 A Tallahassee, FL 32304-	Travel expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/12/200	\$217.60

SUBTOTAL of Disbursements This Page (optional)	\$1887.02
TOTAL This period (last page this line number only)	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	2	4
FOR LINE NUMBER		
17		

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

**NAME OF COMMITTEE (In Full)**  
Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Homestead Resort US 220 Mainstreet Hot Springs, VA 24445-	Dem. Retreat  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/03/200	\$610.00
The National Democratic Club 30 Ivy Street, SE Attn: Hank Hemmendinger Washington, DC 20003-	Annual Dues/ Meals  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/14/200	\$244.02
Sonis Enterprises 206 Fleece Flower Dr. Gaithersburg, MD 20878-	T-Shirts  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/14/200	\$584.00
Sutter's Mill Attn: Bob Doyle 442 New Jersey Ave, SE, Ste 250 Washington, DC 20003-	February Fee and Exp  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/13/200	\$1774.38
Sutter's Mill Attn: Bob Doyle 442 New Jersey Ave, SE, Ste 250 Washington, DC 20003-	March Fee and Exp.  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/12/200	\$1778.53
Sutter's Mill Attn: Bob Doyle 442 New Jersey Ave, SE, Ste 250 Washington, DC 20003-	Jan. Fee  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/14/200	\$1796.61
Sylvester Management Corporation P.O. Box 956 Irmo, SC 29063-	FEC Conference  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/14/200	\$530.00

<b>SUBTOTAL</b> of Disbursements This Page (optional)	\$7318.34
<b>TOTAL</b> This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information supplied from such Reports and Statements may not be 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)

Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Windsor Group 501 East Tennessee St., Suite A Tallahassee, FL 32308-	Payroll and Expenses  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/12/200	\$2325.60
The Windsor Group 501 East Tennessee St., Suite A Tallahassee, FL 32308-	Andy Payroll March  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/02/200	\$2000.00
The Windsor Group 501 East Tennessee St., Suite A Tallahassee, FL 32308-	Oct-Nov. Expenses  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/14/200	\$357.65
The Windsor Group 501 East Tennessee St., Suite A Tallahassee, FL 32308-	Andy Ellis Payroll Feb.  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/02/200	\$2000.00
The Windsor Group 501 East Tennessee St., Suite A Tallahassee, FL 32308-	Office Expenses  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/02/200	\$361.35
The Windsor Group 501 East Tennessee St., Suite A Tallahassee, FL 32308-	January Payroll; Dec. Expenses  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/14/200	\$2676.84
Tiger Creek Hunting Preserve Rt. 2, Box 422 Jasper, FL 32052-	Quail Hunt F/R  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/13/200	\$3064.44

SUBTOTAL of Disbursements This Page (optional)

\$12720.68

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information copied from such Reports and Statements may not be 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 copies.

NAME OF COMMITTEE (In Full)

Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
UST Public Affairs  1201 Pennsylvania Ave., N.W. Ste. 300 Washington, DC 20004-	Air fare  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/14/2001	\$1103.49
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	

SUBTOTAL of Disbursements This Page (optional)	\$1103.49
TOTAL This Period (last page this line number only)	\$23028.93

LINE NUMBER 10

(Use separate schedules  
for each numbered line)SCHEDULE D  
(Revised 3/80)DEBTS AND OBLIGATIONS  
Excluding Loans

NAME OF COMMITTEE (In Full)	Outstanding Balance Beginning This Period	Amount BORROWED This Period	Payment This Period	Outstanding Balance at Close of This Period
Boyd For Congress				
Full Name, Mailing Address and Zip Code Planta & Associates, Inc. 1503 Viewmont Dr. Charleston, WV 25302-	\$2000.00			\$2000.00
Nature of DEBT (purpose) Research				

1) SUBTOTAL (This Period This Page (optional))	
2) TOTAL This Period (last page this line number only)	\$2000.00
3) TOTAL OUTSTANDING LOANS (from Schedule D (last page only))	
4) ADD (Must stand only forward to appropriate line of summary page (last page only))	\$2000.00

