

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

SECRETARY OF THE SENATE

05 JUL 20 PM 12:15

Office Use Only

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

Craig for US Senate  
PO BOX 2754

ADDRESS (number and street)  
Boise ID 83701

2. FEC IDENTIFICATION NUMBER: C C0115667  
3. IS THIS REPORT NEW OR AMENDED: X NEW (N) OR AMENDED (A)  
CITY STATE ZIP CODE STATE DISTRICT

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports: April 15 (Q1), July 15 (Q2), October 15 (Q3), January 31 (YE)  
(b) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)  
(c) 30-Day Post-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period: 04 01 2005 through 06 30 2005

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: Kaye O'Riordan  
Signature of Treasurer: [Signature] Date: 07 14 2005

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Craig for US Senate

Report Covering the Period: From: M 04 / D 01 / Y 2005 To: M 06 / D 30 / Y 2005

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ...	68115.00	158249.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	4429.00
(c) Net Contributions (other than loans) (subtract Line 8(b) from Line 8(a)) .....	68115.00	153820.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	18050.05	267644.96
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	12782.67
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	18050.05	254862.29
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>		
	108044.17	
<b>9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) .....</b>		
	0.00	
<b>10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D) .....</b>		
	0.00	

**For further information contact:**

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

Toll Free 800-424-9630  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

Craig for US Senate

Report Covering the Period: From: **04** / **01** / **2005** To: **06** / **30** / **2005**

L RECEIPTS	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	54750.00	
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	365.00	
(iii) TOTAL of contributions from individuals .....	55115.00	86999.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	13000.00	71250.00
(d) The Candidate .....	0.00	0.00
(a) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	68115.00	158249.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b> .....	0.00	-125.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate .....	0.00	0.00
(b) All Other Loans .....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)) .....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES</b> (Refunds, Rebates, etc.) .....	0.00	12782.87
<b>15. OTHER RECEIPTS</b> (Dividends, Interest, etc.) .....	229.38	642.02
<b>16. TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) .....	68344.38	171548.69

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES .....	18060.05	267644.96
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	3000.00
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 (such as PACs) .....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	125.00
(b) Political Party Committees .....	0.00	54.00
(c) Other Political Committees (such as PACs) .....	0.00	4250.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)) .....	0.00	4429.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) .....	18060.05	275073.96

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....	55759.84
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3) .....	68344.38
25. SUBTOTAL (add Line 23 and Line 24) .....	124104.22
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) .....	18060.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) .....	106044.17



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

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

FOR LINE NUMBER:  
(check only one)

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

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) **Craig for US Senate** C0115887

Full Name (Last, First, Middle Initial) <b>A. Vince, Clinton</b>			Date of Receipt MM / DD / YYYY <b>05 / 05 / 2005</b>
Mailing Address <b>1666 K Street, NW, Suite 700</b>			Transaction ID: <b>COHHV01</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20006</b>	Amount of Each Receipt this Period <b>2000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			Limit increased Due to opponent's Spending (2 U.S.C. 441 a)(1)(441 a-1)
Name of Employer <b>Sullivan &amp; Worcester</b>	Occupation <b>Attorney</b>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date <b>2000.00</b>		

Full Name (Last, First, Middle Initial) <b>B. Bruce, Sandra</b>			Date of Receipt MM / DD / YYYY <b>06 / 06 / 2005</b>
Mailing Address <b>877 Chardie Court</b>			Transaction ID: <b>COFVM03</b>
City <b>Boise</b>	State <b>ID</b>	Zip Code <b>83702</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			Limit increased Due to opponent's Spending (2 U.S.C. 441 a)(1)(441 a-1)
Name of Employer <b>St. Alphonsus</b>	Occupation <b>CEO</b>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date <b>1000.00</b>		

Full Name (Last, First, Middle Initial) <b>C. Paschke, John</b>			Date of Receipt MM / DD / YYYY <b>05 / 05 / 2005</b>
Mailing Address <b>3534 Crosspoint Avenue</b>			Transaction ID: <b>COHHO01</b>
City <b>Boise</b>	State <b>ID</b>	Zip Code <b>83706</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			Limit increased Due to opponent's Spending (2 U.S.C. 441 a)(1)(441 a-1)
Name of Employer <b>Micron Technology</b>	Occupation <b>Attorney</b>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date <b>500.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>8000.00</b>







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

25020321427  
25020321427  
Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 18  
(check only one)

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

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NAME OF COMMITTEE (in Full) **Craig for US Senate** **CD115667**

Full Name (Last, First, Middle Initial) <b>A. Boren, Joan</b>		Date of Receipt M M / D D / Y Y Y Y <b>05 / 05 / 2005</b>
Mailing Address <b>1050 North Briar Lane</b>		Transaction ID: <b>COHHH01</b>
City <b>Boise</b>	State ID <b>ID</b>	Zip Code <b>83712</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2000.00</b>
Name of Employer <b>None</b>	Occupation	Limit increased Due to opponent's Spending (2 U.S.C. 441 a(f)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date <b>2000.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Eller, Timothy</b>		Date of Receipt M M / D D / Y Y Y Y <b>05 / 26 / 2005</b>
Mailing Address <b>6556 Hygien Drive</b>		Transaction ID: <b>COHHH01</b>
City <b>Dallas</b>	State <b>TX</b>	Zip Code <b>75240</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2000.00</b>
Name of Employer <b>Centex Corporation</b>	Occupation <b>Management</b>	Limit increased Due to opponent's Spending (2 U.S.C. 441 a(f)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date <b>2000.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Mathews, Kevin</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 / 08 / 2005</b>
Mailing Address <b>2761 Armedia Place</b>		Transaction ID: <b>COHHH01</b>
City <b>Boise</b>	State ID <b>ID</b>	Zip Code <b>83708</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>AKAL Security, Inc.</b>	Occupation <b>site supervisor</b>	Limit increased Due to opponent's Spending (2 U.S.C. 441 a(f)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date <b>500.00</b>	

SUBTOTAL of Receipts This Page (optional)	<b>4500.00</b>
TOTAL This Period (last page this line number only)	<b>18000.00</b>





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

25020321430  
25020321430  
Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full) **Craig for US Senate** C0115887

Full Name (Last, First, Middle Initial) <b>A. Aviles, Dionei</b>			Date of Receipt M M / D D / Y Y Y Y 05 / 26 / 2005
Mailing Address 2103 Lakeside Bend Court			Transaction ID: COHHd01
City Houston	State TX	Zip Code 77077	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			Limit increased Due to opponent's Spending (2 U.S.C. 441 a(1)/441 a-1)
Name of Employer Aviles Engineering Corporation		Occupation President	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Appleton, Steven</b>			Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2005
Mailing Address PO Box 18850			Transaction ID: C0Bgf05
City Boise	State ID	Zip Code 83715	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C			Limit increased Due to opponent's Spending (2 U.S.C. 441 a(1)/441 a-1)
Name of Employer Micron Technology		Occupation CEO	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Sullivan, Kirk</b>			Date of Receipt M M / D D / Y Y Y Y 06 / 06 / 2005
Mailing Address 5206 Sorrento Circle			Transaction ID: C02Jt0C
City Boise	State ID	Zip Code 83704	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C			Limit increased Due to opponent's Spending (2 U.S.C. 441 a(1)/441 a-1)
Name of Employer Veritas Advisors		Occupation Managing Partner	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Election Cycle-to-Date 2000.00	

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	27000.00

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

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

PAGE 0 OF 18

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

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NAME OF COMMITTEE (In Full)  
Craig for US Senate C0115667

Full Name (Last, First, Middle Initial) <b>A. Palmer, C. Robart</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 26 / 2005
Mailing Address 2800 Post Oak Blvd, Suite 5450		Transaction ID: C0G0R02
City Houston	State TX	Zip Code 77056
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Rowan Cos. Inc.	Occupation Executive	Limit increased Due to opponent's Spending (2 U.S.C. 441 a)(441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Summit, Paul</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 25 / 2005
Mailing Address 36 Regent Street		Transaction ID: CDHHD01
City Newton	State MA	Zip Code 02465
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Sullivan & Worcester	Occupation Attorney	Limit increased Due to opponent's Spending (2 U.S.C. 441 a)(441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>C. Egan, Richard</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2005
Mailing Address 2103 Ringtail Ridge		Transaction ID: C0HHP01
City Austin	State TX	Zip Code 78746
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer O'Keefe, Egan and Peterman	Occupation Attorney	Limit increased Due to opponent's Spending (2 U.S.C. 441 a)(441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	29000.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) **Craig for US Senate** CD115867

Full Name (Last, First, Middle Initial) <b>A. Payne, Robert</b>		Date of Receipt M / D / Y Y Y Y 05 / 28 / 2005
Mailing Address 4316 Arcady		Transaction ID: C0Fn102
City Dallas	State TX	Zip Code 75205
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period  250.00
Name of Employer Payne, Vendg	Occupation Attorney	Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date  250.00	

Full Name (Last, First, Middle Initial) <b>B. Channer, David</b>		Date of Receipt M / D / Y Y Y Y 05 / 05 / 2005
Mailing Address 2567 SE 5th Way		Transaction ID: C0HHF01
City Meridian	State ID	Zip Code 83642
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period  1000.00
Name of Employer Micron Technology	Occupation Attorney	Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date  1000.00	

Full Name (Last, First, Middle Initial) <b>C. Reynoldson, Mike</b>		Date of Receipt M / D / Y Y Y Y 05 / 05 / 2005
Mailing Address 2025 Warm Springs Avenue		Transaction ID: C0C740D
City Boise	State ID	Zip Code 83712
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period  250.00
Name of Employer Micron Technology	Occupation Government Relations	Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date  250.00	

SUBTOTAL of Receipts This Page (optional) .....	1500.00
TOTAL This Period (last page this line number only) .....	30500.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full) **Craig for US Senate** C0115867

Full Name (Last, First, Middle Initial) <b>A. Arnold, Steve</b>			Date of Receipt M M / D D / Y Y Y Y <b>05 / 05 / 2005</b>
Mailing Address <b>3788 E. Vantage Point</b>			Transaction ID: <b>C0HHG01</b>
City <b>Meridian</b>	State <b>ID</b>	Zip Code <b>83642</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Name of Employer <b>Micron Technology</b>		Occupation <b>Attorney</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Election Cycle-to-Date <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Notopoulos, Alexander</b>			Date of Receipt M M / D D / Y Y Y Y <b>05 / 05 / 2005</b>
Mailing Address <b>98 Shorecliff Road</b>			Transaction ID: <b>C0HHW01</b>
City <b>Newton</b>	State <b>MA</b>	Zip Code <b>02458</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Name of Employer <b>Sullivan &amp; Worcester</b>		Occupation <b>Attorney</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Poppen, Teresa</b>			Date of Receipt M M / D D / Y Y Y Y <b>05 / 05 / 2005</b>
Mailing Address <b>210 Evergreen Drive</b>			Transaction ID: <b>C0HHK01</b>
City <b>Boise</b>	State <b>ID</b>	Zip Code <b>83716</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Name of Employer <b>NONE</b>		Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Election Cycle-to-Date <b>1000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>33000.00</b>





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

25020321435  
25020321435  
Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (in Full) **Craig for US Senate** CD115667

Full Name (Last, First, Middle Initial) <b>A. Barratt, Michael</b>			Date of Receipt MM / DD / YYYY 05 / 28 / 2005	
Mailing Address 1500 Surveyor Boulevard			Transaction ID: <b>C0BNH05</b>	
City Addison	State TX	Zip Code 75001	Amount of Each Receipt this Period , , 1000.00	
FEC ID number of contributing federal political committee. C			MEMO	
Name of Employer Barrett, Burke, Wilson, Castle,		Occupation attorney	Limit increased Due to opponent's Spending (2 U.S.C. 441 a)(1)(441 a-1)	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Election Cycle-to-Date , , 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Perry, Bob</b>			Date of Receipt MM / DD / YYYY 05 / 26 / 2005	
Mailing Address P. O. Box 34153			Transaction ID: <b>COG0k02</b>	
City Houston	State TX	Zip Code 77234	Amount of Each Receipt this Period , , 2000.00	
FEC ID number of contributing federal political committee. C			Limit increased Due to opponent's Spending (2 U.S.C. 441 a)(1)(441 a-1)	
Name of Employer Perry Homes		Occupation Executive		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Election Cycle-to-Date , , 2000.00		

Full Name (Last, First, Middle Initial) <b>C. Curry, William</b>			Date of Receipt MM / DD / YYYY 08 / 22 / 2005	
Mailing Address One Postal Square			Transaction ID: <b>COHHu01</b>	
City Boston	State MA	Zip Code 02108	Amount of Each Receipt this Period , , 1000.00	
FEC ID number of contributing federal political committee. C			Limit increased Due to opponent's Spending (2 U.S.C. 441 a)(1)(441 a-1)	
Name of Employer Sullivan & Worcester		Occupation attorney		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Election Cycle-to-Date , , 1000.00		

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	38500.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) **Craig for US Senate** C0115887

Full Name (Last, First, Middle Initial) <b>A. Nelson, Eric</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2005
Mailing Address 2275 E. Skipperling Lane		Transaction ID: CQHHM01
City Boise	State ID ID	Zip Code 83706
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer self	Occupation Oral Maxillo-facial surgeon	Limit increased Due to opponent's Spending (2 U.S.C. 441 a(1)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Colson, John</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 16 / 2005
Mailing Address 1360 Post Oak Blvd., Suite 2100		Transaction ID: CQHHA01
City Houston	State TX	Zip Code 77056
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2000.00</b>
Name of Employer Quanta Services, Inc.	Occupation Chairman and CEO	Limit increased Due to opponent's Spending (2 U.S.C. 441 a(1)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date <b>2000.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Preston, Arthur</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 26 / 2005
Mailing Address PO Box 7520		Transaction ID: CQHh01
City The Woodlands	State TX	Zip Code 77387
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2000.00</b>
Name of Employer Preston Exploration LLC	Occupation CEO	Limit increased Due to opponent's Spending (2 U.S.C. 441 a(1)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date <b>2000.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	4500.00
TOTAL This Period (last page this line number only) .....	43000.00

25020321437  
25020321437

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (in Full) **Craig for US Senate** CD115667

Full Name (Last, First, Middle Initial) <b>A. Hunt, Ray</b>			Date of Receipt MM / DD / YYYY <b>06 / 06 / 2005</b>
Mailing Address <b>1445 Ross Avenue, Suite 1500</b>			Transaction ID: <b>C0G1b02</b>
City <b>Dallas</b>	State <b>TX</b>	Zip Code <b>75202</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			Limit increased Due to opponent's Spending (2 U.S.C. 441 a(j)(4) 1 a-1)
Name of Employer <b>Hunt Consolidated, Inc.</b>		Occupation <b>Chairman</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		Election Cycle-to-Date ▼ <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Witte, Franz</b>			Date of Receipt MM / DD / YYYY <b>06 / 06 / 2005</b>
Mailing Address <b>9776 Mill Creek Lane</b>			Transaction ID: <b>C0HHj01</b>
City <b>Star</b>	State <b>ID</b>	Zip Code <b>83669</b>	Amount of Each Receipt this Period <b>2000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			Limit increased Due to opponent's Spending (2 U.S.C. 441 a(j)(4) 1 a-1)
Name of Employer <b>self</b>		Occupation <b>small business owner</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		Election Cycle-to-Date ▼ <b>2000.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Westergard, David</b>			Date of Receipt MM / DD / YYYY <b>05 / 05 / 2005</b>
Mailing Address <b>2932 E. Wilderrest Lane</b>			Transaction ID: <b>C0Gdw02</b>
City <b>Bolsa</b>	State <b>ID</b>	Zip Code <b>83706</b>	Amount of Each Receipt this Period <b>2000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			Limit increased Due to opponent's Spending (2 U.S.C. 441 a(j)(4) 1 a-1)
Name of Employer <b>Micron Technology</b>		Occupation <b>Attorney</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		Election Cycle-to-Date ▼ <b>2000.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>5000.00</b>
TOTAL This Period (last page this line number only) .....	<b>48000.00</b>

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

25020321438  
25020321438  
Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (in Full) **Craig for US Senate** C0115687

Full Name (Last, First, Middle Initial) <b>A. Westergard, Sarah</b>		Date of Receipt MM / DD / YYYY 05 / 05 / 2005
Mailing Address 9990 Highlander Road		Transaction ID: COHHN01
City Boise	State ID ID	Zip Code 83709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer retired	Occupation	Limit increased Due to opponent's Spending (2 U.S.C. 441 a)(4)441 a-1
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Martin, James</b>		Date of Receipt MM / DD / YYYY 05 / 05 / 2005
Mailing Address 1974 S. Wilde Creek Way		Transaction ID: COHHL01
City Boise	State ID ID	Zip Code 83709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Moffatt, Thomas	Occupation Attorney	Limit increased Due to opponent's Spending (2 U.S.C. 441 a)(4)441 a-1
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. Hertneky, Dianne</b>		Date of Receipt MM / DD / YYYY 06 / 22 / 2005
Mailing Address 169 Claybrook Road		Transaction ID: COHHs01
City Dover	State ID MA	Zip Code 02030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Sullivan & Worcester	Occupation Administrator	Limit increased Due to opponent's Spending (2 U.S.C. 441 a)(4)441 a-1
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional)	1750.00
TOTAL This Period (last page this line number only)	49750.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full) **Craig for US Senate** C0115857

Full Name (Last, First, Middle Initial) <b>A. Lutton, Kalhi</b>			Date of Receipt M M / D D / Y Y Y Y <b>05 / 05 / 2005</b>
Mailing Address <b>1004 Del Norte</b>			Transaction ID: <b>C0HHJ01</b>
City <b>Menlo Park</b>	State <b>CA</b>	Zip Code <b>94025</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			Limit increased Due to opponent's Spending (2 U.S.C. 441 a(j)/441 a-1)
Name of Employer <b>Fish &amp; Richardson</b>		Occupation <b>Attorney</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Trotter, Jack</b>			Date of Receipt M M / D D / Y Y Y Y <b>06 / 06 / 2005</b>
Mailing Address <b>109 North Post Oak Lane, Suite 425</b>			Transaction ID: <b>C0HHm01</b>
City <b>Houston</b>	State <b>TX</b>	Zip Code <b>77024</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			Limit increased Due to opponent's Spending (2 U.S.C. 441 a(j)/441 a-1)
Name of Employer <b>self</b>		Occupation <b>stock broker</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Flournoy, Charles</b>			Date of Receipt M M / D D / Y Y Y Y <b>05 / 26 / 2005</b>
Mailing Address <b>7 Rains Way</b>			Transaction ID: <b>C0HHg01</b>
City <b>Houston</b>	State <b>TX</b>	Zip Code <b>77007</b>	Amount of Each Receipt this Period <b>2000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			Limit increased Due to opponent's Spending (2 U.S.C. 441 a(j)/441 a-1)
Name of Employer <b>John L. Wortham &amp; Son</b>		Occupation <b>Attorney</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Election Cycle-to-Date <b>2000.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>4000.00</b>
TOTAL This Period (last page this line number only) .....	<b>53750.00</b>

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

25020321440  
25020321440

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (in Full)

Craig for US Senate

C0115667

Full Name (Last, First, Middle Initial)

A. Frizell, Ann

Mailing Address

333 East 56th Street

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 05 / 2005

Transaction ID: C0HHI01

Amount of Each Receipt this Period

500.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a)(4)41 a-1

Full Name (Last, First, Middle Initial)

B. Fitzgerald, David

Mailing Address

2229 22nd Avenue East

City

Seattle

State

WA

Zip Code

98112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sullivan and Worcester

Occupation  
Attorney

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 05 / 2005

Transaction ID: C0HHS01

Amount of Each Receipt this Period

500.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a)(4)41 a-1

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

1000.00

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

54750.00



25020321442  
25020321442

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (in Full) **Craig for US Senate**      C0115867

Full Name (Last, First, Middle Initial) <b>A. Duke Energy Corporation PAC</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 28 / 2005
Mailing Address 422 South Church Street, POB5D, Attn: Beverly K. Marshall		Transaction ID: CQFD904
City	State	Zip Code
Charlotte	NC	28202
FEC ID number of contributing federal political committee. <b>C 00083535</b>		Amount of Each Receipt this Period  2000.00
Name of Employer	Occupation	Limit increased Due to opponent's Spending (2 U.S.C. 441 a)(j)(441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼  2000.00	

Full Name (Last, First, Middle Initial) <b>B. Steel River Boley Jones &amp; Gray</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2005
Mailing Address Federal Political Action Committee, 999 Main St. Suite 1015		Transaction ID: C0EoC02
City	State	Zip Code
Boise	ID	83702
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period  2000.00
Name of Employer	Occupation	Limit increased Due to opponent's Spending (2 U.S.C. 441 a)(j)(441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼  2000.00	

Full Name (Last, First, Middle Initial) <b>C. Verizon Communications Good Govt Club</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2005
Mailing Address 1717 Arch Street 47-S		Transaction ID: CDFG004
City	State	Zip Code
Philadelphia	PA	19103
FEC ID number of contributing federal political committee. <b>C 00186288</b>		Amount of Each Receipt this Period  1000.00
Name of Employer	Occupation	Limit increased Due to opponent's Spending (2 U.S.C. 441 a)(j)(441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼  1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	8000.00



25020321443  
25020321443

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Craig for US Senate

C0115667

Full Name (Last, First, Middle Initial)

**A. Build PAC of National Assoc.**

Mailing Address

of Home Builders, 1201 15th Street N.W.

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C 00000801

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

06 / 22 / 2006

Transaction ID: C02mE0E

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)(4) a-1

Full Name (Last, First, Middle Initial)

**B. Burlington Resources**

Mailing Address

101 Constitution Ave, NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C 00004880

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

05 / 28 / 2005

Transaction ID: C02mGDE

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)(4) a-1

Full Name (Last, First, Middle Initial)

**C. American Hospital Association PAC**

Mailing Address

Attn: Lisa Kidder Hrobsky, 325 Seventh Street NW

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

C 00106146

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

06 / 22 / 2005

Transaction ID: C0EJP0A

Amount of Each Receipt this Period

2000.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)(4) a-1

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

4000.00

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

12000.00

25020321444  
25020321444

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) **Craig for US Senate** C0115687

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

Date of Receipt

MM / DD / YYYY  
04 / 25 / 2005

Mailing Address  
**Political Involvement Comm., PO Box 52025**

Transaction ID: C02rN08

City State Zip Code  
**Phoenix AZ 85072**

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. **C 00048579**

1000.00

Name of Employer Occupation

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(f)/441 a-1)

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	13000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input checked="" type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) **Craig for US Senate** C0115667

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo Bank</b>			Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2005
Mailing Address 877 W. Main Street			Transaction ID: C0Fik0s
City Boise	State ID	Zip Code 83702	Amount of Each Receipt this Period  70.85
FEC ID number of contributing federal political committee. <b>C</b>			Limit Increased Due to opponent's Spending (2 U.S.C. 441 a(1)/441 a-1)
Name of Employer		Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date  642.02		

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo Bank</b>			Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2005
Mailing Address 877 W. Main Street			Transaction ID: C0Fik0t
City Boise	State ID	Zip Code 83702	Amount of Each Receipt this Period  78.22
FEC ID number of contributing federal political committee. <b>C</b>			Limit Increased Due to opponent's Spending (2 U.S.C. 441 a(1)/441 a-1)
Name of Employer		Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date  642.02		

Full Name (Last, First, Middle Initial) <b>C. Wells Fargo Bank</b>			Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2005
Mailing Address 877 W. Main Street			Transaction ID: C0Fik0u
City Boise	State ID	Zip Code 83702	Amount of Each Receipt this Period  80.31
FEC ID number of contributing federal political committee. <b>C</b>			Limit Increased Due to opponent's Spending (2 U.S.C. 441 a(1)/441 a-1)
Name of Employer		Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date  642.02		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	229.38
<b>TOTAL</b> This Period (last page this line number only) .....	229.38

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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20c     21

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NAME OF COMMITTEE (In Full)

Craig for US Senate

C0115667

Full Name (Last, First, Middle Initial) <b>A. Ada County Republican Party</b>			Transaction ID: D0Cc508 Date of Disbursement MM / DD / YYYY 06 / 09 / 2005		
Mailing Address P.O. Box 1572			Amount of Each Disbursement this Period  250.00		
City Boise	State ID	Zip Code 83701			
Purpose of Disbursement advertising		Category/ Type	Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
Candidate Name					
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
State:	District:				
Full Name (Last, First, Middle Initial) <b>B. Idaho State Tax Commission</b>			Transaction ID: D0BGz0a Date of Disbursement MM / DD / YYYY 04 / 15 / 2005		
Mailing Address State of Idaho, P.O. Box 66			Amount of Each Disbursement this Period  30.00		
City Boise	State ID	Zip Code 83707			
Purpose of Disbursement state income tax		Category/ Type	Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
Candidate Name					
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
State:	District:				
Full Name (Last, First, Middle Initial) <b>C. Veritas Advisors</b>			Transaction ID: D0Fks17 Date of Disbursement MM / DD / YYYY 04 / 17 / 2005		
Mailing Address P.O. Box 2601			Amount of Each Disbursement this Period  2132.53		
City Boise	State ID	Zip Code 83701			
Purpose of Disbursement fundraising consultant		Category/ Type	Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
Candidate Name					
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
State:	District:				
SUBTOTAL of Disbursements This Page (optional) .....			2412.53		
TOTAL This Period (last page this line number only) .....			2412.53		

25020321447  
25020321447

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 2 OF 11

17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (in Full)  
Craig for US Senate CD115667

Full Name (Last, First, Middle Initial) <b>A. Veritas Advisors</b>			Transaction ID: D0Fks19 Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2005		
Mailing Address P.O. Box 2801			Amount of Each Disbursement this Period  3523.84		
City Boise	State ID	Zip Code 83701			
Purpose of Disbursement fundraising consultant		Candidate Name	Category/ Type		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼				

Full Name (Last, First, Middle Initial) <b>B. Veritas Advisors</b>			Transaction ID: D0Fks1B Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2005		
Mailing Address P.O. Box 2801			Amount of Each Disbursement this Period  2178.86		
City Boise	State ID	Zip Code 83701			
Purpose of Disbursement fundraising consultant		Candidate Name	Category/ Type		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼				

Full Name (Last, First, Middle Initial) <b>C. Lockaway Storage</b>			Transaction ID: D0BH11S Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2005		
Mailing Address 5246 Chinden Blvd			Amount of Each Disbursement this Period  73.00		
City Garden City	State ID	Zip Code 83714			
Purpose of Disbursement storage		Candidate Name	Category/ Type		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼				

SUBTOTAL of Disbursements This Page (optional) .....	5773.70
TOTAL This Period (last page this line number only) .....	8186.23

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

25020321448  
25020321448

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (in Full)

Craig for US Senate

C0115667

Full Name (Last, First, Middle Initial)

**A. Wells Fargo Credit Card Services**

Mailing Address

P.O. Box 29491

City  
Phoenix

State  
AZ

Zip Code  
85038

Purpose of Disbursement  
bank fees

Candidate Name

Category/  
Type

Office Sought:

Disbursement For:

Primary     General  
 Other (specify): ▼

State:

District:

Transaction ID: D0FnC0q

Date of Disbursement:

M M / D D / Y Y Y Y  
04 / 17 / 2005

Amount of Each Disbursement this Period

104.58

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. Wells Fargo Credit Card Services**

Mailing Address

P.O. Box 29491

City  
Phoenix

State  
AZ

Zip Code  
85038

Purpose of Disbursement  
credit card Payment

Candidate Name

Category/  
Type

Office Sought:

Disbursement For:

Primary     General  
 Other (specify): ▼

State:

District:

Transaction ID: D0FnC0r

Date of Disbursement:

M M / D D / Y Y Y Y  
05 / 10 / 2005

Amount of Each Disbursement this Period

414.80

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address

P. O. Box 819618, DFW Airport

City  
Dallas

State  
TX

Zip Code  
75261

Purpose of Disbursement  
travel

Candidate Name

Category/  
Type

Office Sought:

Disbursement For:

Primary     General  
 Other (specify): ▼

State:

District:

Transaction ID: D0ChC0C

Date of Disbursement:

M M / D D / Y Y Y Y  
05 / 10 / 2005

Amount of Each Disbursement this Period

167.80

**MEMO**  
**Credit Card Item**

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

519.48

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

8705.71

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (in Full)

Craig for US Senate

C0115687

Full Name (Last, First, Middle Initial)

**A. US Senate Gift Shop**

Mailing Address

Dirksen Senate Office Building, SDB-01

City State Zip Code  
Washington DC 20510

Purpose of Disbursement  
constituent gifts

Candidate Name

Category/  
Type

Office Sought:   
State:  District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D08eX0G

Date of Disbursement

M M / D D / Y Y Y Y  
05 / 10 / 2005

Amount of Each Disbursement this Period

237.00

NEMO

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. The Rainmakers**

Mailing Address

10582 Canterbury Road

City State Zip Code  
Fairfax Station VA 22039

Purpose of Disbursement  
Fundraising consultant

Candidate Name

Category/  
Type

Office Sought:   
State:  District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D0HHw02

Date of Disbursement

M M / D D / Y Y Y Y  
08 / 28 / 2005

Amount of Each Disbursement this Period

5819.52

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. US Senate Restaurant**

Mailing Address

Senate Office Building, First and C Streets, N.E.

City State Zip Code  
Washington DC 20510

Purpose of Disbursement  
meetings expense

Candidate Name

Category/  
Type

Office Sought:   
State:  District:

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D08Gy1B

Date of Disbursement

M M / D D / Y Y Y Y  
04 / 17 / 2005

Amount of Each Disbursement this Period

59.94

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

5879.46

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

14585.17

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 11

17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (In Full)

Craig for US Senate

C0115667

Full Name (Last, First, Middle Initial)

**A. US Senate Restaurant**

Mailing Address

Senate Office Building, First and C Streets, N.E.

City State Zip Code  
Washington DC 20510

Purpose of Disbursement  
meetings expense

Candidate Name

Category/  
Type

Office Sought:

Disbursement For:

Primary     General

Other (specify): ▼

State:

District:

Transaction ID: D0BGy1B

Date of Disbursement

M M / D D / Y Y Y Y  
05 / 10 / 2005

Amount of Each Disbursement this Period

59.94

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. US Senate Restaurant**

Mailing Address

Senate Office Building, First and C Streets, N.E.

City State Zip Code  
Washington DC 20510

Purpose of Disbursement  
meetings expense

Candidate Name

Category/  
Type

Office Sought:

Disbursement For:

Primary     General

Other (specify): ▼

State:

District:

Transaction ID: D0BGy1A

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 09 / 2005

Amount of Each Disbursement this Period

277.50

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. US Senate Restaurant**

Mailing Address

Senate Office Building, First and C Streets, N.E.

City State Zip Code  
Washington DC 20510

Purpose of Disbursement  
meetings expense

Candidate Name

Category/  
Type

Office Sought:

Disbursement For:

Primary     General

Other (specify): ▼

State:

District:

Transaction ID: D0BGy1B

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 28 / 2005

Amount of Each Disbursement this Period

60.98

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

398.40

TOTAL This Period (last page this line number only)

14983.57



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

17  
20a       18  
20b       19a  
20c       21

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NAME OF COMMITTEE (in Full)

Craig for US Senate

C0115667

Full Name (Last, First, Middle Initial) <b>A. Mr. Larry E. Craig</b>			Transaction ID: D00VN4F Date of Disbursement MM / DD / YYYY 04 / 17 / 2005		
Mailing Address PO Box 2754			Amount of Each Disbursement this Period  644.80		
City Boise	State ID ID	Zip Code 83701			
Purpose of Disbursement travel		Category/ Type	Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
Candidate Name Senator					
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
State: ID	District:				
Full Name (Last, First, Middle Initial) <b>B. Mr. Larry E. Craig</b>			Transaction ID: D00VN4G Date of Disbursement MM / DD / YYYY 04 / 17 / 2005		
Mailing Address PO Box 2754			Amount of Each Disbursement this Period  162.00		
City Boise	State ID ID	Zip Code 83701			
Purpose of Disbursement non travel reimbursement		Category/ Type	Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
Candidate Name Senator					
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
State: ID	District:				
Full Name (Last, First, Middle Initial) <b>C. T-Mobile</b>			Transaction ID: D0G1JQA Date of Disbursement MM / DD / YYYY 04 / 17 / 2005		
Mailing Address PO Box 742596			Amount of Each Disbursement this Period  25.00		
City Cincinnati	State ID OH	Zip Code 45274			
Purpose of Disbursement long distance		Category/ Type	MEMO		
Candidate Name					
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
State:	District:				
SUBTOTAL of Disbursements This Page (optional) .....			806.80		
TOTAL This Period (last page this line number only) .....			16790.37		

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full)  
**Craig for US Senate** C0115887

Full Name (Last, First, Middle Initial) <b>A. Mr. Larry E. Craig</b>			Transaction ID: D00VN4H Date of Disbursement 05 / 10 / 2005		
Mailing Address PO Box 2754			Amount of Each Disbursement this Period  350.94		
City Boise	State ID	Zip Code 83701			
Purpose of Disbursement travel		Candidate Name Senator	Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
Office Sought: [ ] [ ] [ ]					
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Category/Type			
State: ID	District:				

Full Name (Last, First, Middle Initial) <b>B. Mr. Larry E. Craig</b>			Transaction ID: D00VN4I Date of Disbursement 05 / 10 / 2005		
Mailing Address PO Box 2754			Amount of Each Disbursement this Period  64.97		
City Boise	State ID	Zip Code 83701			
Purpose of Disbursement non travel reimbursement		Candidate Name Senator	Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
Office Sought: [ ] [ ] [ ]					
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Category/Type			
State: ID	District:				

Full Name (Last, First, Middle Initial) <b>C. US Postmaster</b>			Transaction ID: D02sw2Q Date of Disbursement 05 / 10 / 2005		
Mailing Address 770 S. 13th St.			Amount of Each Disbursement this Period  38.52		
City Boise	State ID	Zip Code 83701			
Purpose of Disbursement postage		Candidate Name	MEMO		
Office Sought: [ ] [ ] [ ]					
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Category/Type	Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
State:	District:				

SUBTOTAL of Disbursements This Page (optional) .....	415.91
TOTAL This Period (last page this line number only) .....	16208.28



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

25020321454  
25020321454  
Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 11

17  
20a  18  
20b  19a  
20c  21

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NAME OF COMMITTEE (In Full) **Craig for US Senate** C0115867

Full Name (Last, First, Middle Initial) <b>A. Mr. Larry E. Craig</b>			Transaction ID: D00VN4L Date of Disbursement: MM / DD / YYYY <b>06 / 28 / 2005</b>		
Mailing Address <b>PO Box 2754</b>			Amount of Each Disbursement this Period  <b>22.06</b>		
City <b>Boise</b>	State ID <b>ID</b>	Zip Code <b>83701</b>			
Purpose of Disbursement <b>travel</b>		Candidate Name <b>Senator</b>	Category/ Type		
Office Sought: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53			
State: ID	District:				

Full Name (Last, First, Middle Initial) <b>B. Mr. Larry E. Craig</b>			Transaction ID: D00VN4M Date of Disbursement: MM / DD / YYYY <b>06 / 28 / 2005</b>		
Mailing Address <b>PO Box 2754</b>			Amount of Each Disbursement this Period  <b>540.77</b>		
City <b>Boise</b>	State ID <b>ID</b>	Zip Code <b>83701</b>			
Purpose of Disbursement <b>non travel reimbursement</b>		Candidate Name <b>Senator</b>	Category/ Type		
Office Sought: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53			
State: ID	District:				

Full Name (Last, First, Middle Initial) <b>C. Costco Wholesale</b>			Transaction ID: D0Gf90A Date of Disbursement: MM / DD / YYYY <b>06 / 28 / 2005</b>		
Mailing Address <b>2051 S. Cole Road</b>			Amount of Each Disbursement this Period  <b>55.00</b>		
City <b>Boise</b>	State ID <b>ID</b>	Zip Code <b>83709</b>			
Purpose of Disbursement <b>office supplies</b>		Candidate Name	Category/ Type  <b>MEMO</b>		
Office Sought: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>562.83</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>17736.91</b>

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full)  
**Craig for US Senate** C0115887

Full Name (Last, First, Middle Initial) <b>A. Craft Warehouse</b>		Transaction ID: <b>D0GfDZ</b>
Mailing Address <b>1180 N. Eagle Road</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 28 2005</b>
City <b>Meridian</b>	State ID <b>ID</b>	Zip Code <b>83842</b>
Purpose of Disbursement <b>constituent gifts</b>		Amount of Each Disbursement this Period <b>307.88</b>
Candidate Name		<b>MEMO</b>
Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State: <input type="checkbox"/>	District: <input type="checkbox"/>	
		Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.63

Full Name (Last, First, Middle Initial) <b>B. T-Mobile</b>		Transaction ID: <b>D0GfJ0C</b>
Mailing Address <b>PO Box 742586</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 28 2005</b>
City <b>Cincinnati</b>	State ID <b>OH</b>	Zip Code <b>45274</b>
Purpose of Disbursement <b>long distance</b>		Amount of Each Disbursement this Period <b>3.60</b>
Candidate Name		<b>MEMO</b>
Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State: <input type="checkbox"/>	District: <input type="checkbox"/>	
		Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.63

Full Name (Last, First, Middle Initial) <b>C. US Postmaster</b>		Transaction ID: <b>D02sw2R</b>
Mailing Address <b>770 S. 13th St.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 28 2005</b>
City <b>Boise</b>	State ID <b>ID</b>	Zip Code <b>83701</b>
Purpose of Disbursement <b>postage</b>		Amount of Each Disbursement this Period <b>38.29</b>
Candidate Name		<b>MEMO</b>
Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State: <input type="checkbox"/>	District: <input type="checkbox"/>	
		Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.63

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>17736.91</b>

25020321456  
25020321456

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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17  
20a     18  
20b     19a  
20c     21

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NAME OF COMMITTEE (in Full)

Craig for US Senate

C0115667

Full Name (Last, First, Middle Initial)

**A. US Postmaster**

Mailing Address

770 S. 13th St.

City  
Boise

State  
ID

Zip Code  
83701

Purpose of Disbursement  
po box rent

Candidate Name

Category/  
Type

Office Sought:

State:  
District:

Disbursement For:

Primary     General  
 Other (specify): ▼

State:

District:

Transaction ID: D02sw2S

Date of Disbursement:

MM / DD / YYYY  
06 / 28 / 2005

Amount of Each Disbursement this Period

126.00

MEMO

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. Canyon County Republicans**

Mailing Address

19105 Evening Drive

City  
Caldwell

State  
ID

Zip Code  
83607

Purpose of Disbursement  
advertising

Candidate Name

Category/  
Type

Office Sought:

State:  
District:

Disbursement For:

Primary     General  
 Other (specify): ▼

State:

District:

Transaction ID: D0Egx06

Date of Disbursement:

MM / DD / YYYY  
06 / 09 / 2005

Amount of Each Disbursement this Period

100.00

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

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

100.00

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

17836.91



# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_

Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_

Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_

**07-15-05**

Postmark

USPS PRIORITY MAIL \_\_\_\_\_

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_

Postmark

**OVERNIGHT DELIVERY SERVICE:**

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS \_\_\_\_\_

UPS \_\_\_\_\_

DHL \_\_\_\_\_

AIRBORNE EXPRESS \_\_\_\_\_

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX \_\_\_\_\_

Date of Receipt

OTHER \_\_\_\_\_

Date of Receipt or Postmark

PREPARER

**RJ**

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