

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) P.O. BOX 1214  
 Check if different than previously reported. (ACC)  
SOMERSET KY 42502

2. **FEC IDENTIFICATION NUMBER** C00116632  
**CITY** **STATE** **ZIP CODE** **STATE** **DISTRICT**  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)  
KY 05

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [ ] [ ] [ ] in the State of [ ]  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period 10 01 2007 through 12 31 2007

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 JP Wiles

Signature of Treasurer Electronically Filed by JP Wiles Date 04 15 2008

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

HAL ROGERS FOR CONGRESS

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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)).....	107829.40	256678.31
(b) Total Contribution Refunds (from Line 20(d)).....	5000.00	5008.91
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	102829.40	251669.40
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	74925.62	202966.64
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	74925.62	202966.64
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>1038033.57</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	

**For further information contact:**

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

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
 HAL ROGERS FOR CONGRESS

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

**I. RECEIPTS**

**COLUMN A**  
Total This Period

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

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

47100.00

104300.00

(ii) Unitemized.....

3250.00

5490.00

(iii) TOTAL of contributions

50350.00

109790.00

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

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

57479.40

146888.31

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

107829.40

256678.31

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

0.00

0.00

(add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

0.00

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

3906.13

18115.08

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

111735.53

274793.39

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	74925.62	202966.64
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	5008.91
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	5000.00	5008.91
21. OTHER DISBURSEMENTS.....	1000.00	134100.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	80925.62	342075.55

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1007223.66
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	111735.53
25. SUBTOTAL (add Line 23 and Line 24).....	1118959.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	80925.62
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1038033.57

**CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)**  
**(Millionaires' Amendment)**

<b>Name of Candidate</b>		<b>Candidate ID Number</b>		
Harold D. Rogers		H0KY05015		
<b>Name of Principal Campaign Committee</b>		<b>Committee ID Number</b>		
HAL ROGERS FOR CONGRESS		C C00116632		
<b>Committee Address</b>				
P.O. BOX 1214				
<b>City</b>	<b>State</b>	<b>ZIP</b>		
SOMERSET	KY	42502		
Report Covering Period (check one) <input type="checkbox"/> through June 30, or <input checked="" type="checkbox"/> through December 31 of the year preceding the year of the general election				
	<b>Primary</b>		<b>General</b>	
1. Gross receipts of authorized committees .....	260293.39		14500.00	
2. Aggregate amount of contributions from personal funds of the candidate .....	0.00		0.00	
3. Gross receipts minus the candidate's personal contributions .....	260293.39		14500.00	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 65  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
ACS Good Government Committee  
Mailing Address P.O. Box 219002  
City Dallas State TX Zip Code 75221  
FEC ID number of contributing federal political committee. **C** C00248245  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt: MM / DD / YYYY 10 / 03 / 2007  
Transaction ID: C-1-01Zr02  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
AT&T Inc. Federal PAC  
Mailing Address 175 E. Houston Rm. 7-A-50  
City San Antonio State TX Zip Code 78205  
FEC ID number of contributing federal political committee. **C** C00109017  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00  
Date of Receipt: MM / DD / YYYY 12 / 14 / 2007  
Transaction ID: C-6-005e01  
Amount of Each Receipt this Period 1500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Accenture PAC  
Mailing Address 800 Connecticut Ave., N.W. Suite 600  
City Washington State DC Zip Code 20006  
FEC ID number of contributing federal political committee. **C** C00300707  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt: MM / DD / YYYY 10 / 04 / 2007  
Transaction ID: C-8-01Zb03  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3500.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 7 / 65  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

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

Mailing Address Rural Electrification  
4301 Wilson Blvd.

City Arlington State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 10 / 10 / 2007  
**Transaction ID:** C-11-00560M  
 Amount of Each Receipt this Period 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Air Line Pilots Association PAC

Mailing Address 1625 Massachusetts Ave., N.W.

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 11 / 30 / 2007  
**Transaction ID:** C-14-01Hx07  
 Amount of Each Receipt this Period 2500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Aircraft Owners & Pilots Assoc. PAC

Mailing Address 421 Aviation Way

City Frederick State MD Zip Code 21701

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt 10 / 04 / 2007  
**Transaction ID:** C-17-012z0H  
 Amount of Each Receipt this Period 1000.00

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

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

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

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

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

FOR LINE NUMBER: PAGE 8 / 65  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
American Bankers Assoc.  
Mailing Address BankPAC  
1120 Connecticut Ave. NW  
City Washington State DC Zip Code 20036  
FEC ID number of contributing federal political committee. **C** C00004275  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00  
Date of Receipt: MM / DD / YYYY 12 / 06 / 2007  
Transaction ID: C-23-008Y0L  
Amount of Each Receipt this Period 3000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
American Commercial Lines PAC  
Mailing Address 1701 East Market St.  
City Jeffersonville State IN Zip Code 47130  
FEC ID number of contributing federal political committee. **C** C00418269  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt: MM / DD / YYYY 10 / 18 / 2007  
Transaction ID: C-25-005Q09  
Amount of Each Receipt this Period 2000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
American Hospital Association  
Mailing Address 325 Seventh St., N.W.  
City Washington State DC Zip Code 20004  
FEC ID number of contributing federal political committee. **C** C00106146  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt: MM / DD / YYYY 11 / 27 / 2007  
Transaction ID: C-28-01As04  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6000.00  
**TOTAL** This Period (last page this line number only) ..... ►



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

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

FOR LINE NUMBER: PAGE 9 / 65  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Arcadis U.S., Inc. PAC

Mailing Address 630 Plaza Dr., Suite 100

City State Zip Code  
Highlands Ranch CO 80129

FEC ID number of contributing federal political committee. **C** C00388983

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

**Transaction ID:** C-30-01ak02

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address 700 13th St., NW  
Suite 220

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 7

**Transaction ID:** C-36-01BE07

Amount of Each Receipt this Period  
2500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Balch & Bingham LLP

Mailing Address Federal Political Committee  
1275 Pennsylvania Ave. N.W. 10th F

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00358440

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 7

**Transaction ID:** C-41-01LZ03

Amount of Each Receipt this Period  
1000.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 65  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

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

Mailing Address 10 Burton Hill Blvd.

City Nashville State TN Zip Code 37215

FEC ID number of contributing federal political committee. **C** C00366468

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: 10 / 10 / 2007  
**Transaction ID:** C-70-01JR04  
 Amount of Each Receipt this Period: 5000.00

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

**B.** Full Name (Last, First, Middle Initial)  
CH2M Hill Companies, Ltd. PAC

Mailing Address 9191 S. Jamaica St.

City Englewood State CO Zip Code 80112

FEC ID number of contributing federal political committee. **C** C00143305

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 12 / 24 / 2007  
**Transaction ID:** C-74-00X20A  
 Amount of Each Receipt this Period: 1000.00

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

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

Mailing Address 101 Constitution Ave. N.W.  
Suite 500 East

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00109819

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 11 / 27 / 2007  
**Transaction ID:** C-106-005b0H  
 Amount of Each Receipt this Period: 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 65  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Day & Zimmerman, Inc. PAC

Mailing Address 1818 Market St., 22nd Fl.

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00341271

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 11 / 27 / 2007  
**Transaction ID:** C-118-01Gh03  
 Amount of Each Receipt this Period 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Deloitte & Touche Federal PAC

Mailing Address P.O. Box 365

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt 10 / 10 / 2007  
**Transaction ID:** C-125-015Z0A  
 Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 1250 Eye St., N.W. 900

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00030734

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 379.40

Date of Receipt 10 / 30 / 2007  
**Transaction ID:** C-127-005n09  
 Amount of Each Receipt this Period 379.40

In Kind - Reception

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2379.40**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Employees of Northrop Grumman PAC

Mailing Address 520 S. Grand Ave.,  
Suite 700

City State Zip Code  
Los Angeles CA 90071

FEC ID number of contributing  
federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

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

Transaction ID: C-142-012U09

Amount of Each Receipt this Period

1000.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Federal Express PAC

Mailing Address P.O. Box 529

City State Zip Code  
Washington DC 20044

FEC ID number of contributing  
federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

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

Transaction ID: C-145-015A0B

Amount of Each Receipt this Period

2000.00

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

**C.**

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

Mailing Address 1001 Pennsylvania Ave., Ste. 700

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt

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

Transaction ID: C-171-01E00C

Amount of Each Receipt this Period

1000.00

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

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

4000.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.**

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

Mailing Address 1001 Pennsylvania Ave., Ste. 700

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  

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

Transaction ID: C-172-01E00D

Amount of Each Receipt this Period  
1000.00

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

**B.**

Full Name (Last, First, Middle Initial)  
International Council of Shopping

Mailing Address Centers PAC  
1199 N. Fairfax St. 204

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00217638

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  

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

Transaction ID: C-178-00Be0A

Amount of Each Receipt this Period  
3000.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Microsoft Corporation PAC

Mailing Address 16011 N.E. 36th Way

City State Zip Code  
Redmond WA 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

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

Transaction ID: C-220-01Fa07

Amount of Each Receipt this Period  
1000.00

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

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

5000.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
NCPA PAC

Mailing Address 100 Daingerfield Rd.

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

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

Transaction ID: C-228-01Gr02

Amount of Each Receipt this Period

1000.00

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

**B.**

Full Name (Last, First, Middle Initial)  
NCPA PAC

Mailing Address 100 Daingerfield Rd.

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

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

Transaction ID: C-229-01Gr03

Amount of Each Receipt this Period

1000.00

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

**C.**

Full Name (Last, First, Middle Initial)  
NISOURCE Inc., PAC

Mailing Address 200 Civic Center Dr.

City State Zip Code  
Columbus OH 43215

FEC ID number of contributing federal political committee. **C** C00051979

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: C-230-01Y002

Amount of Each Receipt this Period

1000.00

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

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

3000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

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

Mailing Address 1605 King St.

City State Zip Code  
Alexandria, VA 22314

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** C-232-01LW04

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
National Association of Broadcasters PAC

Mailing Address 1771 N Street, N.W.

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 6 / 2 0 0 7

**Transaction ID:** C-234-005U0P

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Oldcastle Materials, Inc. PAC

Mailing Address 101 Constitution Ave., N.W.  
Suite 600W

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00346353

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 7

**Transaction ID:** C-239-01HW05

Amount of Each Receipt this Period  
1000.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 65  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

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

Mailing Address 100 W. Walnut St.

City Pasadena State CA Zip Code 91124

FEC ID number of contributing federal political committee. **C** C00103549

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 4 / 2 0 0 7

**Transaction ID:** C-242-01Lm04

Amount of Each Receipt this Period  
 1000.00

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

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

Mailing Address 1111 N. Fairfax St.

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 0 6 / 2 0 0 7

**Transaction ID:** C-244-01Ma03

Amount of Each Receipt this Period  
 2500.00

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

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

Mailing Address 2001 Pennsylvania Ave. N.W. Ste. 6

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00339085

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 4 / 2 0 0 7

**Transaction ID:** C-246-01JW02

Amount of Each Receipt this Period  
 1000.00

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

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

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



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

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

FOR LINE NUMBER: PAGE 17 / 65  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Rolls-Royce North America PAC  
Mailing Address 14850 Conference Center Dr.  
City Chantilly State VA Zip Code 20151  
FEC ID number of contributing federal political committee. **C** C00296822  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt: MM / DD / YYYY 10 / 04 / 2007  
Transaction ID: C-258-01MI04  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
SI International, Inc. PAC  
Mailing Address 2099 Gaither Road  
3rd Floor  
City Rockville State MD Zip Code 20850  
FEC ID number of contributing federal political committee. **C** C00402669  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00  
Date of Receipt: MM / DD / YYYY 10 / 04 / 2007  
Transaction ID: C-268-01X907  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
SRA International Inc. Fund  
Mailing Address for Better IT in Govt.  
209 Madison St. Ste 500  
City Alexandria State VA Zip Code 22314  
FEC ID number of contributing federal political committee. **C** C00393256  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt: MM / DD / YYYY 10 / 24 / 2007  
Transaction ID: C-269-01Qv04  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 65  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
US Cuba Democracy PAC  
Mailing Address 1200 W.49th St.  
City Hialeah State FL Zip Code 33012  
FEC ID number of contributing federal political committee. **C** C00387720  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 11 / 30 / 2007  
Transaction ID: C-299-01U402  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Union Pacific Fund for Effective Govt.  
Mailing Address 600 13th St., N.W. Ste. 340  
City Washington State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C** C00010470  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 10 / 04 / 2007  
Transaction ID: C-301-006C0N  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
United Technologies Corp.  
Mailing Address Political Action Cmte.  
1401 I St., N.W.  
City Washington State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C** C00035683  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 5000.00  
Date of Receipt 11 / 06 / 2007  
Transaction ID: C-303-01H609  
Amount of Each Receipt this Period 2500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

FOR LINE NUMBER: PAGE 19 / 65  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
UPSPAC - United Parcel Service

Mailing Address 55 Glenlake Parkway N.E.

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2200.00

Date of Receipt: 10 / 30 / 2007  
**Transaction ID:** C-306-005u1J  
 Amount of Each Receipt this Period: 600.00

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

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

Mailing Address P.O. Box 83142

City Gaithersburg State MD Zip Code 20883

FEC ID number of contributing federal political committee. **C** C00369660

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 12 / 14 / 2007  
**Transaction ID:** C-307-01NO05  
 Amount of Each Receipt this Period: 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Washington Group Intl. PAC

Mailing Address 2345 Crystall Dr. Ste. 708

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00097550

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 10 / 04 / 2007  
**Transaction ID:** C-311-01LX09  
 Amount of Each Receipt this Period: 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2600.00

**TOTAL** This Period (last page this line number only) ..... ► 57479.40

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

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

FOR LINE NUMBER: PAGE 20 / 65  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

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

Mailing Address 12501 Brightfield Dr.

City State Zip Code  
Louisville KY 40243

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

Name of Employer Occupation  
PEH Engineers Engineer

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

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

**Transaction ID:** C-35-01bC01

Amount of Each Receipt this Period  
600.00

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

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

Mailing Address 965 N. Harrison St.

City State Zip Code  
Arlington VA 22205

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

Name of Employer Occupation  
Skylet, Inc. President & CEO

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

**Transaction ID:** C-37-01QN02

Amount of Each Receipt this Period  
250.00

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

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

Mailing Address 2982 Hwy 96

City State Zip Code  
Burns TN 37029

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

Name of Employer Occupation  
Corrections Corp. of America Chairman

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

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

**Transaction ID:** C-46-01Bx04

Amount of Each Receipt this Period  
300.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1150.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 21 / 65  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Thomas Beasley

Mailing Address 2982 Hwy 96

City Burns State TN Zip Code 37029

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

Name of Employer Corrections Corp. of America Occupation Chairman

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4300.00

Date of Receipt 10 / 10 / 2007

Transaction ID: C-47-01Bx05

Amount of Each Receipt this Period 2000.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Jordan Bernstein

Mailing Address 6226 Split Creek Lane

City Alexandria State VA Zip Code 22312

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

Name of Employer Cassidy & Assoc. Occupation Vice President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 12 / 26 / 2007

Transaction ID: C-49-01QZ02

Amount of Each Receipt this Period 250.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Alton Blakley

Mailing Address 3425 Woodhaven Dr.

City Somerset State KY Zip Code 42503

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

Name of Employer Alton Blakely Ford Occupation Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 10 / 03 / 2007

Transaction ID: C-50-00A502

Amount of Each Receipt this Period 250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 2500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Nelson L. Bobrowski		Date of Receipt
	Mailing Address P.O. Box 1000 Main St.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 0 / 2 0 0 7
	City	State	Zip Code
	Booneville	KY	41314
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C-52-01QL05
Name of Employer Middlefork Financial Group		Occupation President & CEO	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1300.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Nelson L. Bobrowski		Date of Receipt
	Mailing Address P.O. Box 1000 Main St.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 0 / 2 0 0 7
	City	State	Zip Code
	Booneville	KY	41314
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C-53-01QL06
Name of Employer Middlefork Financial Group		Occupation President & CEO	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 700.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) James Booth		Date of Receipt
	Mailing Address P.O. Box 1387		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 3 / 2 0 0 7
	City	State	Zip Code
	Inez	KY	41224
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C-55-00IW0B
Name of Employer Natrix Energy		Occupation Coal Operator	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1200.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 3200.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 65  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

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

Mailing Address 218 S. Fairfax St.

City State Zip Code  
Alexandria VA 22314

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

Name of Employer: Ritter and Bourjaily, Inc. Occupation: Consultant

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt: 10 / 04 / 2007  
**Transaction ID:** C-57-01NU05  
 Amount of Each Receipt this Period: 250.00

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

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

Mailing Address 218 S. Fairfax St.

City State Zip Code  
Alexandria VA 22314

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

Name of Employer: Ritter and Bourjaily, Inc. Occupation: Consultant

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt: 11 / 06 / 2007  
**Transaction ID:** C-58-01NU06  
 Amount of Each Receipt this Period: 250.00

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

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

Mailing Address P.O. Box 948

City State Zip Code  
Hyden KY 41749

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

Name of Employer: Hyden Citizens Bank Inc. Occupation: Banker

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 10 / 03 / 2007  
**Transaction ID:** C-61-01Fy08  
 Amount of Each Receipt this Period: 1300.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1800.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 65  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

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

Mailing Address P.O. Box 948

City State Zip Code  
Hyden KY 41749

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

Name of Employer Occupation  
Hyden Citizens Bank Inc. Banker

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 7

**Transaction ID:** C-62-01Fy09

Amount of Each Receipt this Period  
700.00

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

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

Mailing Address P.O. Box 103

City State Zip Code  
Pineville KY 40977

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

Name of Employer Occupation  
Retired Retired

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 7

**Transaction ID:** C-63-01Xd03

Amount of Each Receipt this Period  
600.00

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

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

Mailing Address 207 Sycamore Dr.

City State Zip Code  
Barbourville KY 40906

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

Name of Employer Occupation  
Retired Retired

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

**Transaction ID:** C-64-004H0F

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2300.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 65  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.**

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

Mailing Address 1738 Dana St.

City State Zip Code  
Crofton MD 21114

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

Name of Employer  
Cansler, Verosdel & Assoc.

Occupation  
Consultant

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period  
150.00

Transaction ID: C-72-01ac02

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

**B.**

Full Name (Last, First, Middle Initial)  
L. David Cherington

Mailing Address 7807 South Valley Dr.

City State Zip Code  
Fairfax Station VA 22039

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

Name of Employer  
Battelle

Occupation  
Govt. Relations Dir.

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period  
250.00

Transaction ID: C-76-01YX02

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

**C.**

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

Mailing Address 420 Canal Way West

City State Zip Code  
Bethany Beach DE 19930

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

Name of Employer  
The Conaway Group

Occupation  
President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period  
500.00

Transaction ID: C-108-018i05

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **900.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 65  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

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

Mailing Address 605 Deercliff Rd.

City Avon State CT Zip Code 06001

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

Name of Employer United Technologies Occupation Chairman & CEO

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 11 / 06 / 2007  
**Transaction ID:** C-114-01bG01

Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 145 Woodland Dr.

City Somerset State KY Zip Code 42501

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 10 / 03 / 2007  
**Transaction ID:** C-115-003T0F

Amount of Each Receipt this Period 500.00

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

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

Mailing Address 3331 Bridgeberry Ln.

City Houston State TX Zip Code 77082

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

Name of Employer Public/Private Strategies Occupation Consultant

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2007  
**Transaction ID:** C-122-01bF01

Amount of Each Receipt this Period 250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**HAL ROGERS FOR CONGRESS**

<b>A.</b>	Full Name (Last, First, Middle Initial) Bill Detherage	Date of Receipt MM / DD / YYYY 11 / 30 / 2007
	Mailing Address 458 Village Lane	<b>Transaction ID:</b> C-126-01bH01
	City State Zip Code Hazard KY 41701	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Lewis Coal Sales President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Paul Dole	Date of Receipt MM / DD / YYYY 10 / 03 / 2007
	Mailing Address 600 Engineer St.	<b>Transaction ID:</b> C-129-01780A
	City State Zip Code Corbin KY 40701	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation KCEOC Exec. Director	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Paul Dole	Date of Receipt MM / DD / YYYY 10 / 30 / 2007
	Mailing Address 600 Engineer St.	<b>Transaction ID:</b> C-130-01780B
	City State Zip Code Corbin KY 40701	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation KCEOC Exec. Director	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 65  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

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

Mailing Address 600 Engineer St.

City Corbin State KY Zip Code 40701

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

Name of Employer KCEOC Occupation Exec. Director

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 10 / 30 / 2007

Transaction ID: C-131-01780C

Amount of Each Receipt this Period 700.00

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

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

Mailing Address 94 Silver Maple Lane

City Blackey State KY Zip Code 41804

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

Name of Employer EXCEP Occupation Executive Director

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 10 / 10 / 2007

Transaction ID: C-133-01Rs04

Amount of Each Receipt this Period 1300.00

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

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

Mailing Address 94 Silver Maple Lane

City Blackey State KY Zip Code 41804

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

Name of Employer EXCEP Occupation Executive Director

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 10 / 10 / 2007

Transaction ID: C-134-01Rs05

Amount of Each Receipt this Period 700.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 2700.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 65  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

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

Mailing Address 152 Fidler Dr.

City State Zip Code  
Pikeville KY 41502

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

Name of Employer Occupation  
W. E. Elliott Oil & Gas Natural Gas Producer

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

Date of Receipt  
MM / DD / YYYY  
11 / 06 / 2007

**Transaction ID:** C-140-013A09

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address 1827 Prelude Dr.

City State Zip Code  
Vienna VA 22182

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

Name of Employer Occupation  
Martin Fisher Thompson & Assoc. Consultant

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

Date of Receipt  
MM / DD / YYYY  
10 / 04 / 2007

**Transaction ID:** C-148-01aj03

Amount of Each Receipt this Period  
250.00

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

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

Mailing Address 6126 N. 11th Rd.

City State Zip Code  
Arlington VA 22205

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

Name of Employer Occupation  
Russ Reid Co. Consulting

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

Date of Receipt  
MM / DD / YYYY  
11 / 27 / 2007

**Transaction ID:** C-154-01U303

Amount of Each Receipt this Period  
500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) L. D. Gorman		Date of Receipt
	Mailing Address P.O. Box 1097		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7
	City	State	Zip Code
	Hazard	KY	41701
	FEC ID number of contributing federal political committee. <b>C</b> <input type="text"/>		Transaction ID: C-155-00BS0C
Name of Employer Citizens Bank and Trust		Occupation President	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael W. Hail		Date of Receipt
	Mailing Address P.O. Box 43		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 0 3 / 2 0 0 7
	City	State	Zip Code
	Somerset	KY	42502
	FEC ID number of contributing federal political committee. <b>C</b> <input type="text"/>		Transaction ID: C-163-01Ft02
Name of Employer Morehead State University		Occupation Professor	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 300.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Henry Hinkle		Date of Receipt
	Mailing Address P.O. Box 200		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7
	City	State	Zip Code
	Paris	KY	40362
	FEC ID number of contributing federal political committee. <b>C</b> <input type="text"/>		Transaction ID: C-168-006p01
Name of Employer Hinkle Contracting Corp.		Occupation President	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 3300.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 65  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Bobby Ikerd  
Mailing Address 500 Jarvis Avenue  
City Somerset State KY Zip Code 42501  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ikerd & Bandy Coal Co. Occupation Co-Owner  
Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 500.00  
Date of Receipt 10 / 04 / 2007  
Transaction ID: C-177-001M0B  
Amount of Each Receipt this Period 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
J. Keith Kennedy  
Mailing Address 3220 Juniper Lane  
City Falls Church State VA Zip Code 22044  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Baker Donelson Bearman Caldwell & Ber Occupation Sr. Public Policy Advisor  
Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1250.00  
Date of Receipt 12 / 26 / 2007  
Transaction ID: C-189-01aT03  
Amount of Each Receipt this Period 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Jean M. Kitonis  
Mailing Address 9760 Tico Lane  
City Bristow State VA Zip Code 20136  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Homemaker Occupation Homemaker  
Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 250.00  
Date of Receipt 10 / 04 / 2007  
Transaction ID: C-193-01ZP02  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 65  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Walter P. Kitonis, III

Mailing Address 9760 Tico Lane

City State Zip Code  
Bristow VA 20136

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

Name of Employer Progeny Systems Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 0 4 / 2 0 0 7

**Transaction ID:** C-194-01ZO02

Amount of Each Receipt this Period  
250.00

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

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

Mailing Address 105 Adams Avenue

City State Zip Code  
Alexandria VA 22301

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 0 6 / 2 0 0 7

**Transaction ID:** C-200-01H402

Amount of Each Receipt this Period  
250.00

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

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

Mailing Address 1557 Tates Creek Rd.

City State Zip Code  
Lexington KY 40502

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

Name of Employer Somerset Houseboats Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

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

**Transaction ID:** C-204-01U702

Amount of Each Receipt this Period  
600.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1100.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Gordon Lovins		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7		
	Mailing Address 1334 Hwy 39		Transaction ID: C-207-01Bw08		
	City Somerset	State KY	Zip Code 42503	Amount of Each Receipt this Period 1200.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer Southside Electric & Lighting	Occupation Owner			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1800.00				

<b>B.</b>	Full Name (Last, First, Middle Initial) Andrew Martin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7		
	Mailing Address 11007 Greenock Ct.		Transaction ID: C-210-01O603		
	City Louisville	State KY	Zip Code 40243	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer The Martin Network	Occupation President			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00				

<b>C.</b>	Full Name (Last, First, Middle Initial) David O'B. Martin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7		
	Mailing Address 766 Nimitz Lane		Transaction ID: C-212-01aa02		
	City Hedgesville	State WV	Zip Code 25427	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer Martin, Fisher, Thompson & Assoc.	Occupation Consultant			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 65  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

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

Mailing Address 849 Centrillion Dr.

City State Zip Code  
Mc Lean VA 22102

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

Name of Employer McCann Capitol Advocates Occupation Consultant

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period 250.00

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

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

Mailing Address 339 W. Langdon Rd.

City State Zip Code  
Science Hill KY 42553

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

Name of Employer Byrd Concrete Occupation Construction

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period 600.00

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

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

Mailing Address 1463 A St., N.E.

City State Zip Code  
Washington DC 20002

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

Name of Employer Cornerstone Government Affairs Occupation Vice President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period 500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1350.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**HAL ROGERS FOR CONGRESS**

**A.**

Full Name (Last, First, Middle Initial)  
Michael Miller

Mailing Address 29 State Dr.

City State Zip Code  
**Jackson KY 41339**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
City of Jackson Mayor

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 7

**Transaction ID:** C-221-01ZG02

Amount of Each Receipt this Period  
250.00

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

**B.**

Full Name (Last, First, Middle Initial)  
L. Ray Moncrief

Mailing Address 321 Canyon Dr.

City State Zip Code  
**London KY 40741**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Kentucky Highland Investment Corp. Chief Operating Ofcr.

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 7

**Transaction ID:** C-224-01C409

Amount of Each Receipt this Period  
2000.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Paul D. Nesbitt

Mailing Address 227 N. Upper St.

City State Zip Code  
**Lexington KY 40507**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Nesbitt Engineering President

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 7

**Transaction ID:** C-236-01XO03

Amount of Each Receipt this Period  
2000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 4250.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**HAL ROGERS FOR CONGRESS**

**A.**

Full Name (Last, First, Middle Initial)  
Syamala Reddy

Mailing Address 1016 Kentucky Blvd.

City State Zip Code  
**Hazard KY 41701**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Self Employed Physician

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 18 / 2007

**Transaction ID:** C-251-00L303

Amount of Each Receipt this Period  
300.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Gary Reece

Mailing Address P.O. Box 8, 615 Hwy. 578 S.

City State Zip Code  
**Annville, KY 40402**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Kentucky Transportation Cabinet District Representative

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 03 / 2007

**Transaction ID:** C-253-00500H

Amount of Each Receipt this Period  
1300.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Gary Reece

Mailing Address P.O. Box 8, 615 Hwy. 578 S.

City State Zip Code  
**Annville, KY 40402**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Kentucky Transportation Cabinet District Representative

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 03 / 2007

**Transaction ID:** C-254-00500I

Amount of Each Receipt this Period  
700.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 2300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) James W. Robinette		Date of Receipt
	Mailing Address 350 McWhorter St.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7
	City	State	Zip Code
	London	KY	40741
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C-256-01JX04
Name of Employer Dairy Queen		Occupation Owner	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 300.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Glen A. Ross		Date of Receipt
	Mailing Address 426 Locust Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 0 3 / 2 0 0 7
	City	State	Zip Code
	Lancaster	KY	40444
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C-260-01OB05
Name of Employer Mayes Sudderth & Etheridge Eng.		Occupation President	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1600.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) James Sawyer		Date of Receipt
	Mailing Address 906 Valley View Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7
	City	State	Zip Code
	Monticello	KY	42633
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C-272-019m08
Name of Employer Self Employed		Occupation Optometrist	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1150.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 65  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

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

Mailing Address P.O. Box 346

City State Zip Code  
Beattyville KY 41311

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

Name of Employer Occupation  
Self Employed Pharmacist

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

Date of Receipt  
MM / DD / YYYY  
10 / 10 / 2007

Transaction ID: C-280-01HD03

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address P.O. Box 2229

City State Zip Code  
Pikeville KY 41502

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

Name of Employer Occupation  
Asthma & Allergy Center Proprietor

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

Date of Receipt  
MM / DD / YYYY  
11 / 27 / 2007

Transaction ID: C-281-00OS0B

Amount of Each Receipt this Period  
2000.00

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

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

Mailing Address 1760 Chandler Lane

City State Zip Code  
Lexington KY 40504

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

Name of Employer Occupation  
Roll Call Strategies Consultant

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

Date of Receipt  
MM / DD / YYYY  
10 / 03 / 2007

Transaction ID: C-283-00dl04

Amount of Each Receipt this Period  
2000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**HAL ROGERS FOR CONGRESS**

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

Mailing Address 385 Austin Clay Dr.

City State Zip Code  
Barbourville KY 40906

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

Name of Employer Occupation  
M & D General Contractors President

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

Date of Receipt  
MM / DD / YYYY  
10 / 03 / 2007

**Transaction ID:** C-284-01b901

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address 311 N. Arnold Ave.

City State Zip Code  
Prestonsburg KY 41653

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

Name of Employer Occupation  
Retired Retired

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

Date of Receipt  
MM / DD / YYYY  
10 / 03 / 2007

**Transaction ID:** C-285-00Ik0C

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address P. O. Box 369

City State Zip Code  
Whitley City KY 42653

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

Name of Employer Occupation  
Stephens Properties President

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

Date of Receipt  
MM / DD / YYYY  
10 / 10 / 2007

**Transaction ID:** C-287-01Bc09

Amount of Each Receipt this Period  
1000.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 65  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Rick D. Storm

Mailing Address 203 Eastern Ave.

City State Zip Code  
Carlisle KY 40311

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

Name of Employer Storm Security Occupation Self Employed

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 7

Transaction ID: C-289-01F604

Amount of Each Receipt this Period  
250.00

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

**B.**

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

Mailing Address 11035 Clara Barton Dr.

City State Zip Code  
Fairfax Station VA 22039

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

Name of Employer Martin Fisher Thompson & Assoc. Occupation Consultant

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 7

Transaction ID: C-294-01af02

Amount of Each Receipt this Period  
250.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Johnnie Turner

Mailing Address P.O. Box 351

City State Zip Code  
Harlan KY 40831

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: C-297-00R808

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **750.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Brian Tynan		Date of Receipt
	Mailing Address 1105 Westmoreland Rd.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Alexandria	VA	22308
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Martin Hamberger and Assoc.		Occupation Consultant	<b>Transaction ID:</b> C-298-01bE01
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 250.00	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Cy Waddle		Date of Receipt
	Mailing Address 780 Jarvis Ave.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Somerset	KY	42501
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Retired		Occupation Retired	<b>Transaction ID:</b> C-308-004u0D
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 500.00	<input type="text"/> 500.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Eric Weddle		Date of Receipt
	Mailing Address 4285 Slate Branch Rd.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Somerset	KY	42503
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Weddle Enterprises, Inc.		Occupation Vice President	<b>Transaction ID:</b> C-312-01X103
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 600.00	<input type="text"/> 600.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1350.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 47100.00

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 65  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Citizens National Bank

Mailing Address 44 Public Square

City Somerset, State KY Zip Code 42501

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 18115.08

Date of Receipt 11 / 28 / 2007  
**Transaction ID: C-99-00ar36**  
Amount of Each Receipt this Period 1035.62

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

**B.**

Full Name (Last, First, Middle Initial)  
Citizens National Bank

Mailing Address 44 Public Square

City Somerset, State KY Zip Code 42501

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 18115.08

Date of Receipt 11 / 30 / 2007  
**Transaction ID: C-100-00ar37**  
Amount of Each Receipt this Period 260.18

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

**C.**

Full Name (Last, First, Middle Initial)  
Citizens National Bank

Mailing Address 44 Public Square

City Somerset, State KY Zip Code 42501

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 18115.08

Date of Receipt 10 / 29 / 2007  
**Transaction ID: C-101-00ar38**  
Amount of Each Receipt this Period 1035.62

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2331.42

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 65  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Citizens National Bank  
Mailing Address 44 Public Square

City Somerset State KY Zip Code 42501

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 18115.08

Date of Receipt: 10 / 31 / 2007  
**Transaction ID:** C-102-00ar39  
 Amount of Each Receipt this Period: 271.01

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

**B.** Full Name (Last, First, Middle Initial)  
Citizens National Bank  
Mailing Address 44 Public Square

City Somerset State KY Zip Code 42501

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 18115.08

Date of Receipt: 12 / 28 / 2007  
**Transaction ID:** C-103-00ar3A  
 Amount of Each Receipt this Period: 1035.62

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

**C.** Full Name (Last, First, Middle Initial)  
Citizens National Bank  
Mailing Address 44 Public Square

City Somerset State KY Zip Code 42501

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 18115.08

Date of Receipt: 12 / 31 / 2007  
**Transaction ID:** C-104-00ar3B  
 Amount of Each Receipt this Period: 268.08

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1574.71

**TOTAL** This Period (last page this line number only) ..... ► 3906.13

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) A Better Idea Corp. Mailing Address 5335 Castroville Rd. City San Antonio State TX Zip Code 78227 Purpose of Disbursement Mementoes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D4-01bJ01 Date of Disbursement 10 / 17 / 2007 Amount of Each Disbursement this Period 4119.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) AT&T Mobility Mailing Address P.O. Box 31488 City Tampa State FL Zip Code 33631 Purpose of Disbursement Cellular Phone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D15-01U90V Date of Disbursement 10 / 11 / 2007 Amount of Each Disbursement this Period 120.44 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) AT&T Mobility Mailing Address P.O. Box 31488 City Tampa State FL Zip Code 33631 Purpose of Disbursement Cell Phone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D16-01U90W Date of Disbursement 12 / 04 / 2007 Amount of Each Disbursement this Period 240.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

4480.87

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
America Online Service

Transaction ID: D29-01Ms0z  
Date of Disbursement

Mailing Address 75 Rockefeller Plaza

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

City State Zip Code  
New York NY 10019

Amount of Each Disbursement this Period

25.90
-------

Purpose of Disbursement  
Internet Service  
Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
America Online Service

Transaction ID: D30-01Ms10  
Date of Disbursement

Mailing Address 75 Rockefeller Plaza

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

City State Zip Code  
New York NY 10019

Amount of Each Disbursement this Period

25.90
-------

Purpose of Disbursement  
Internet Service  
Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

C.

Full Name (Last, First, Middle Initial)  
America Online Service

Transaction ID: D31-01Ms11  
Date of Disbursement

Mailing Address 75 Rockefeller Plaza

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

City State Zip Code  
New York NY 10019

Amount of Each Disbursement this Period

25.90
-------

Purpose of Disbursement  
Internet Service  
Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

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

77.70
-------

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

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# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<b>A.</b> Full Name (Last, First, Middle Initial) Bob's Bar-B-Q Mailing Address 301 Kati St. City Pikeville State KY Zip Code 41501 Purpose of Disbursement Fundraiser Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D42-01bM01 Date of Disbursement 10 / 17 / 2007 Amount of Each Disbursement this Period 3221.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Cantrell/Cutter Printing, Inc. Mailing Address 499 So. Capitol St. S.W., Suite 101 City Washington, State DC Zip Code 20003 Purpose of Disbursement Printing Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D44-00aL07 Date of Disbursement 10 / 17 / 2007 Amount of Each Disbursement this Period 1822.07 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Capitol Hill Club Mailing Address 300 First Street SE City Washington, State DC Zip Code 20003 Purpose of Disbursement Food Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D46-00Zi0s Date of Disbursement 11 / 19 / 2007 Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5094.06</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Carriage House Motor Hotel <hr/> Mailing Address 105 Second St. <hr/> City Paintsville State KY Zip Code 41240 <hr/> Purpose of Disbursement Lodging Candidate Name _____ <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D49-00cV0A Date of Disbursement 10 / 29 / 2007 <hr/> Amount of Each Disbursement this Period 189.49 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Carriage House Motor Hotel <hr/> Mailing Address 105 Second St. <hr/> City Paintsville State KY Zip Code 41240 <hr/> Purpose of Disbursement Lodging Candidate Name _____ <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D50-00cV0B Date of Disbursement 11 / 14 / 2007 <hr/> Amount of Each Disbursement this Period 256.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Delta Airlines <hr/> Mailing Address Hartsfield Atlanta International Airport <hr/> City Atlanta State GA Zip Code 30320 <hr/> Purpose of Disbursement Ticket Fee Candidate Name _____ <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D68-00ah1L Date of Disbursement 12 / 18 / 2007 <hr/> Amount of Each Disbursement this Period 20.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

466.47

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Delta Airlines	Transaction ID: D69-00ah1M Date of Disbursement 12 / 18 / 2007
	Mailing Address Hartsfield Atlanta International Airport	Amount of Each Disbursement this Period 424.80
	City Atlanta	State GA
	Zip Code 30320	
	Purpose of Disbursement Travel	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Distilled Spirits Pac	Transaction ID: D70-005n01 Date of Disbursement 10 / 30 / 2007
	Mailing Address 1250 Eye St., N.W. 900	Amount of Each Disbursement this Period 379.40
	City Washington	State DC
	Zip Code 20005	
	Purpose of Disbursement * In-Kind->In Kind - Reception	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Dudley Golf Sales	Transaction ID: D73-01SQ05 Date of Disbursement 10 / 17 / 2007
	Mailing Address P.O. Box 157	Amount of Each Disbursement this Period 6620.40
	City Bronston	State KY
	Zip Code 42518	
	Purpose of Disbursement Golf Fundraiser	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7424.60
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Federal Express Corp.

Transaction ID: D88-00ZV2E  
Date of Disbursement

Mailing Address P.O. Box 727

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

City State Zip Code  
Memphis, TN 38194

Amount of Each Disbursement this Period

45.38
-------

Purpose of Disbursement  
Shipping

--

Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Federal Express Corp.

Transaction ID: D89-00ZV2F  
Date of Disbursement

Mailing Address P.O. Box 727

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

City State Zip Code  
Memphis, TN 38194

Amount of Each Disbursement this Period

21.09
-------

Purpose of Disbursement  
Shipping

--

Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Federal Express Corp.

Transaction ID: D90-00ZV2G  
Date of Disbursement

Mailing Address P.O. Box 727

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

City State Zip Code  
Memphis, TN 38194

Amount of Each Disbursement this Period

75.43
-------

Purpose of Disbursement  
Shipping

--

Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

141.90
--------

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

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# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<b>A.</b> Full Name (Last, First, Middle Initial) Flowers by Olivia Mailing Address 300 E. Main St. City Hazard State KY Zip Code 41701 Purpose of Disbursement Constituent Flowers Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D94-01QJ08 Date of Disbursement 10 / 17 / 2007
	Amount of Each Disbursement this Period 106.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>B.</b> Full Name (Last, First, Middle Initial) Flowers by Olivia Mailing Address 300 E. Main St. City Hazard State KY Zip Code 41701 Purpose of Disbursement Constituent Flowers Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D95-01QJ09 Date of Disbursement 11 / 19 / 2007
	Amount of Each Disbursement this Period 53.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>C.</b> Full Name (Last, First, Middle Initial) Flowers of Somerset Mailing Address 499 U.S. Highway 27 South City Somerset, State KY Zip Code 42501 Purpose of Disbursement Constituent Flowers Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D104-00Zg1D Date of Disbursement 11 / 14 / 2007
	Amount of Each Disbursement this Period 111.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	270.30
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)  
HAL ROGERS FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Harbor View Restaurant

Mailing Address 451 Lee's Ford Dock Rd.

City State Zip Code  
Nancy KY 42544

Purpose of Disbursement  
Food

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D110-01Rn08  
Date of Disbursement

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

Amount of Each Disbursement this Period

109.53
--------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
Hertz Rent A Car

Mailing Address Hwy. 75, S. Airportway

City State ID Zip Code  
Hailey ID 83333

Purpose of Disbursement  
Rental Car

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D113-01Jw02  
Date of Disbursement

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

Amount of Each Disbursement this Period

1017.81
---------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
Jann's Catering, Inc.

Mailing Address P.O. Box 429

City State Zip Code  
Nancy KY 42544

Purpose of Disbursement  
Fundraiser Catering

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D118-01J03  
Date of Disbursement

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

Amount of Each Disbursement this Period

1575.00
---------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

2702.34
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**TOTAL** This Period (last page this line number only) ..... ►

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# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Eugene Jones</p> <p>Mailing Address 418 Extine St.</p> <p>City Somerset State KY Zip Code 42501</p> <p>Purpose of Disbursement Reception Help</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D123-00vS07</p> <p>Date of Disbursement 12 / 20 / 2007</p> <p>Amount of Each Disbursement this Period 200.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Kentucky State Treasurer</p> <p>Mailing Address Capitol Annex</p> <p>City Frankfort State KY Zip Code 40601</p> <p>Purpose of Disbursement Filing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D127-00bR0B</p> <p>Date of Disbursement 12 / 18 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kentucky Utilities</p> <p>Mailing Address 306 N. Main St.</p> <p>City Somerset State KY Zip Code 42501</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D139-00vh1v</p> <p>Date of Disbursement 10 / 17 / 2007</p> <p>Amount of Each Disbursement this Period 15.11</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><b>715.11</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kentucky Utilities</p> <p>Mailing Address 306 N. Main St.</p> <p>City Somerset State KY Zip Code 42501</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D140-00vh1w</p> <p>Date of Disbursement 11 / 19 / 2007</p> <p>Amount of Each Disbursement this Period 13.48</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Kentucky Utilities</p> <p>Mailing Address 306 N. Main St.</p> <p>City Somerset State KY Zip Code 42501</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D141-00vh1x</p> <p>Date of Disbursement 12 / 18 / 2007</p> <p>Amount of Each Disbursement this Period 15.30</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kirby Stephens Design, Inc.</p> <p>Mailing Address 219 E. Mt. Vernon St.</p> <p>City Somerset State KY Zip Code 42501</p> <p>Purpose of Disbursement Holiday Card Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D144-01660F</p> <p>Date of Disbursement 12 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 9088.35</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

9117.13

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Lifeline Realty</p> <p>Mailing Address P. O. Box 938</p> <p>City Somerset State KY Zip Code 42501</p> <p>Purpose of Disbursement Rent Nov/Dec</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D151-019T0w</p> <p>Date of Disbursement 11 / 19 / 2007</p> <p>Amount of Each Disbursement this Period 700.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) M &amp; W Printing Company</p> <p>Mailing Address P.O. Box 834</p> <p>City Somerset, State KY Zip Code 42501</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D154-00ZW0g</p> <p>Date of Disbursement 10 / 17 / 2007</p> <p>Amount of Each Disbursement this Period 824.68</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mail Solutions</p> <p>Mailing Address 127 Monticello St. Ste. 8</p> <p>City Somerset State KY Zip Code 42501</p> <p>Purpose of Disbursement Mailing Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D157-01K50E</p> <p>Date of Disbursement 11 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 6700.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

8224.68

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Mail Solutions <hr/> Mailing Address 127 Monticello St. Ste. 8 <hr/> City Somerset State KY Zip Code 42501 <hr/> Purpose of Disbursement Mailing Service Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D158-01K50F Date of Disbursement 12 / 18 / 2007 <hr/> Amount of Each Disbursement this Period 3023.66 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Market Inn <hr/> Mailing Address 200 E St. S.W. <hr/> City Washington State DC Zip Code 20024 <hr/> Purpose of Disbursement Food Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D161-00ab0a Date of Disbursement 12 / 07 / 2007 <hr/> Amount of Each Disbursement this Period 104.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) George Mills <hr/> Mailing Address 201 Ohio St. <hr/> City Somerset State KY Zip Code 42501 <hr/> Purpose of Disbursement Reception Help Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D169-01KR04 Date of Disbursement 12 / 20 / 2007 <hr/> Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

3328.26

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Pine Mtn. State Park	Transaction ID: D181-00eI07 Date of Disbursement 10 / 17 / 2007
	Mailing Address 1050 State Park Rd.	Amount of Each Disbursement this Period 9329.73
	City Pineville State KY Zip Code 40977	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Golf Fundraiser	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Harold Rogers	Transaction ID: D188-00zf0n Date of Disbursement 11 / 14 / 2007
	Mailing Address 309 College Street	Amount of Each Disbursement this Period 813.60
	City Somerset, State KY Zip Code 42501	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimburse Mementoes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Harold Rogers	Transaction ID: D189-00zf0o Date of Disbursement 12 / 20 / 2007
	Mailing Address 309 College Street	Amount of Each Disbursement this Period 556.07
	City Somerset, State KY Zip Code 42501	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimburse Mementoes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>10699.40</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Tracy Rogers</p> <p>Mailing Address 434 Hidden Loop Dr.</p> <p>City Somerset State KY Zip Code 42503</p> <p>Purpose of Disbursement Database Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D201-01GG1P</p> <p>Date of Disbursement 10 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Tracy Rogers</p> <p>Mailing Address 434 Hidden Loop Dr.</p> <p>City Somerset State KY Zip Code 42503</p> <p>Purpose of Disbursement Database Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D202-01GG1Q</p> <p>Date of Disbursement 11 / 19 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Tracy Rogers</p> <p>Mailing Address 434 Hidden Loop Dr.</p> <p>City Somerset State KY Zip Code 42503</p> <p>Purpose of Disbursement Database Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D203-01GG1R</p> <p>Date of Disbursement 12 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Ruth's Chris Steak House  Mailing Address 2231 Crystal Dr. 11th Floor  City Arlington State VA Zip Code 22202  Purpose of Disbursement Food Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D206-00wN09 Date of Disbursement 10 / 17 / 2007  Amount of Each Disbursement this Period 239.24  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Sams Insurance Agency  Mailing Address P.O. Box 758  City Somerset, State KY Zip Code 42501  Purpose of Disbursement Policy Renewal Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D208-00aF00 Date of Disbursement 12 / 18 / 2007  Amount of Each Disbursement this Period 316.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Spacecenter Storage  Mailing Address P.O. Box 385  City Somerset State KY Zip Code 42502  Purpose of Disbursement Storage Unit Rental Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D213-01AI0D Date of Disbursement 12 / 18 / 2007  Amount of Each Disbursement this Period 576.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

1131.24

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Stone Crest Golf Course</p> <p>Mailing Address 918 Club House Dr.</p> <p>City Prestonsburg State KY Zip Code 41653</p> <p>Purpose of Disbursement Golf Fundraiser</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D214-01K309</p> <p>Date of Disbursement 10 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 4363.44</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sun Valley Company</p> <p>Mailing Address P.O. Box 10</p> <p>City Sun Valley State ID Zip Code 83353</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D217-017w0J</p> <p>Date of Disbursement 10 / 17 / 2007</p> <p>Amount of Each Disbursement this Period 1229.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Congressional Club</p> <p>Mailing Address 2001 New Hampshire Ave., N.W.</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Dues</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D226-00aC0A</p> <p>Date of Disbursement 11 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 150.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

5743.25

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 60 / 65

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) The Levatino Group	Transaction ID: D237-01a10A Date of Disbursement
	Mailing Address 2501 Wisconsin Ave., N.W. Suite 304	<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
	City Washington State DC Zip Code 20007	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Fee	<input type="text" value="7399.69"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) The Levatino Group	Transaction ID: D238-01a10B Date of Disbursement
	Mailing Address 2501 Wisconsin Ave., N.W. Suite 304	<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
	City Washington State DC Zip Code 20007	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Fee	<input type="text" value="1774.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) U.S. Postmaster	Transaction ID: D247-00Zu1U Date of Disbursement
	Mailing Address 119 N. Maple st.	<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2007"/>
	City Somerset, State KY Zip Code 42501	Amount of Each Disbursement this Period
	Purpose of Disbursement Annual Box Fee	<input type="text" value="68.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9241.69"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) U.S. Postmaster  Mailing Address 119 N. Maple st.  City Somerset, State KY Zip Code 42501  Purpose of Disbursement Return Mail Acct. Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D248-00Zu1V Date of Disbursement 12 / 05 / 2007  Amount of Each Disbursement this Period 1000.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) USAirways  Mailing Address Ronald Reagan Washington National Airport  City Alexandria State VA Zip Code 22302  Purpose of Disbursement Airline Ticket Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D257-00a71B Date of Disbursement 10 / 17 / 2007  Amount of Each Disbursement this Period 50.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) USAirways  Mailing Address Ronald Reagan Washington National Airport  City Alexandria State VA Zip Code 22302  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D258-00a71C Date of Disbursement 10 / 17 / 2007  Amount of Each Disbursement this Period 533.60  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

1583.60

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) USAirways</p> <p>Mailing Address Ronald Reagan Washington National Airport</p> <p>City Alexandria State VA Zip Code 22302</p> <p>Purpose of Disbursement Ticket Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D259-00a71D</p> <p>Date of Disbursement 11 / 14 / 2007</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) USAirways</p> <p>Mailing Address Ronald Reagan Washington National Airport</p> <p>City Alexandria State VA Zip Code 22302</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D260-00a71E</p> <p>Date of Disbursement 11 / 14 / 2007</p> <p>Amount of Each Disbursement this Period 307.40</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Windstream</p> <p>Mailing Address P.O. Box 625</p> <p>City Matthews State NC Zip Code 28106</p> <p>Purpose of Disbursement Telephone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D274-01Zi0F</p> <p>Date of Disbursement 11 / 14 / 2007</p> <p>Amount of Each Disbursement this Period 111.26</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

428.66

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Windstream

Transaction ID: D275-01Zi0G

Date of Disbursement

Mailing Address P.O. Box 625

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

City State Zip Code  
Matthews NC 28106

Amount of Each Disbursement this Period

109.02

Purpose of Disbursement  
Telephone Service

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

109.02

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

73980.28

**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 64 / 65

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
HAL ROGERS FOR CONGRESS

<b>A.</b> Full Name (Last, First, Middle Initial) American Bankers Assoc.  Mailing Address BankPAC 1120 Connecticut Ave. NW  City Washington State DC Zip Code 20036  Purpose of Disbursement Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D37-008Y01 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 7
	Amount of Each Disbursement this Period 3000.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) American Bankers Assoc.  Mailing Address BankPAC 1120 Connecticut Ave. NW  City Washington State DC Zip Code 20036  Purpose of Disbursement Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D38-008Y02 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 7
	Amount of Each Disbursement this Period 2000.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

5000.00

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

5000.00



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**HAL ROGERS FOR CONGRESS**

A.

Full Name (Last, First, Middle Initial)  
 The Center for Rural

Transaction ID: D222-017m06

Date of Disbursement

Mailing Address      Development  
    2292 S. Hwy. 27,

<sup>M</sup> 1	<sup>M</sup> 2	/	<sup>D</sup> 0	<sup>D</sup> 4	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 7
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City    State      Zip Code  
 Somerset    KY              42501

Amount of Each Disbursement this Period

1000.00
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Purpose of Disbursement  
 Contribution

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Candidate Name

Category/  
 Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary       General  
 Other (specify) ▼

State:                          District:

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

<b>1000.00</b>
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**TOTAL** This Period (last page this line number only) ..... ►

<b>1000.00</b>
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