REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

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FEC MAIL ROOM

2000 OCT 17 A 2:07

1. NAME OF COMMITTEE (in full) (Summary Page)

C00287367 GA/10 052900 N
MR ABRAM J SEROTTA
NORWOOD FOR CONGRESS
P O BOX 455
EVANS GA 30809

2. FEC IDENTIFICATION NUMBER
C00287367

3. IS THIS REPORT AN AMENDMENT?
☐ YES ☒ NO

4. TYPE OF REPORT

- ☐ April 15 Quarterly Report
- ☐ July 15 Quarterly Report
- ☒ October 15 Quarterly Report
- ☐ January 31 Year End Report
- ☐ July 31 Mid-Year Report (Non-election Year Only)
- ☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
- ☐ Thirtieth day report following the General Election on _____ in the State of _____
- ☐ Termination Report

This report contains activity for ☐ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-date
5.	Covering Period 06/29/2000 through 09/30/2000		
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(a))	272,340.25	538,521.72
	(b) Total Contribution Refunds (From Line 20(d))		
	(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	272,340.25	538,521.72
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	100,038.25	236,104.16
	(b) Total Offsets to Operating Expenditures (from Line 14)	1,055.92	1,156.11
	(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	98,982.33	234,948.05
8.	Cash on Hand at Close of Reporting Period (from Line 27)	783,474.02	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

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

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

Type or Print Name of Treasurer
Abram Serotta

Signature of Treasurer

Date Oct 13 2000

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

FEC FORM 3
(Revised 4/87)

Detailed Summary Page

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

Name of Committee (in full)	Report Covering the Period:	
Norwood for Congress	From: 06/29/2000	To: 09/30/2000

I. RECEIPTS	Column A Total This Period	Column B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (Use Schedule A)	162,383.25	
(ii) Unitemized	35,432.00	
(iii) Total of contributions from individual	197,815.25	341,398.13
(b) Political Party Committees		96.85
(c) Other Political Committees (such as PACs)	74,525.00	157,026.74
(d) The Candidate		
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))	272,340.25	538,521.72
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
(b) All Other Loans		
(c) TOTAL LOANS (add 13(a) and (b))		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	1,055.92	1,156.11
15. OTHER RECEIPTS (Dividends, Interest, etc.)	1,401.19	12,281.16
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	274,797.36	551,936.99
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	100,038.25	236,104.16
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)		
21. OTHER DISBURSEMENTS	28,000.00	79,000.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	128,038.25	315,104.16

III. CASH SUMMARY	
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	636,714.91
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	274,797.36
25. SUBTOTAL (add Line 23 and Line 24)	911,512.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 16)	128,038.25
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	783,474.02

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 45

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Symms 1019 Magnolia Drive Augusta,GA 30904-5921 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Fitz/Symms Photography Occupation: Owner Aggregate Year-to-Date -> 1,000.00	09/07/2000	1,000.00
B. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Edwin Joy 6312 Keg Creek Drive Appling,GA 30802- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Medical College of Georgia Occupation: Surgeon Aggregate Year-to-Date -> 100.00	08/15/2000	100.00
C. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Edwin Joy 6312 Keg Creek Drive Appling,GA 30802- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Medical College of Georgia Occupation: Surgeon Aggregate Year-to-Date -> 250.00	08/17/2000	150.00
D. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
James Quarles 3129 Montpelier Augusta,GA 30909- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Self Occupation: Orthodonist Aggregate Year-to-Date -> 150.00	08/17/2000	150.00
E. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Wade Hamner 3020 Vassar Drive Augusta,GA 30909-3430 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	VA Medical Center Occupation: Oral Surgeon Aggregate Year-to-Date -> 50.00	09/25/2000	50.00
F. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Barbara Obermark 4469-B Columbia Road Martinez,GA 30907 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Self Occupation: Orthodontist Aggregate Year-to-Date -> 1,000.00	08/21/2000	1,000.00
G. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Thomas Day 13 Highgate West Augusta,GA 30909-1824 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Augusta Assoc. Of Endodontics Occupation: Endodontist Aggregate Year-to-Date -> 1,000.00	09/21/2000	1,000.00

SUBTOTAL of Receipts This Page (optional)	3,450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Patricia Palmer 3553 Wheeler Road Augusta,GA 30909-6530 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Self Dentist Aggregate Year-to-Date -> 200.00	07/18/2000	200.00
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
David Dickey 3736 Walton Way Ext. Augusta,GA 30907- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Augusta Assoc. Of Endodontics Endodontics Aggregate Year-to-Date -> 1,000.00	09/05/2000	1,000.00
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
William Westbrook PO Box 307 Camilla,GA 31730-0507 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Dentist Aggregate Year-to-Date -> 250.00	08/10/2000	250.00
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Gerald Smith 1301-D East Forsyth St Americus,GA 31709- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Orthodontist Aggregate Year-to-Date -> 200.00	08/28/2000	200.00
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Bill Bass 821 Camellia Road Augusta,GA 30909- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Dentist Aggregate Year-to-Date -> 1,000.00	09/18/2000	1,000.00
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Gordon Austin 819 Dixie Street Carrollton,GA 30117-4415 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Oral Surgeon Aggregate Year-to-Date -> 250.00	08/29/2000	250.00
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Barrett Crozier 13 Briarlecone Way Augusta,GA 30909-4536 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Employed Orthodontist Aggregate Year-to-Date -> 1,000.00	09/21/2000	1,000.00

SUBTOTAL of Receipts This Page (optional)	3,900.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code Hugh Pratt 305 Furys Ferry Road Martinez,GA 30907-3001 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Pratt/Dudley Builders Supply Occupation Chairman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 09/13/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code John Ferguson 600 North Cobb Street PO Box 850 Milledgeville,GA 31061-2348 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Employed Occupation Orthodontist Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 09/21/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code William Sherrill 2510 Willow Ridge Drive Augusta,GA 30909- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Norvell Fixture & Equipment Co Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 08/29/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Glen Owen 1314 Comfort Road Augusta,GA 30909-3096 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Self-Employed Occupation OB/GYN Aggregate Year-to-Date -> 250.00	Date (month, day, year) 07/07/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Glen Owen 1314 Comfort Road Augusta,GA 30909-3096 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-Employed Occupation OB/GYN Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 09/21/2000	Amount of Each Receipt this Period 750.00
F. Full Name, Mailing Address and Zip Code Stacy Story 2231 Cumming Road Augusta,GA 30904-6935 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Anesthesiologist Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Robinson Schilling 3402 Sesangua Drive Augusta,GA 30909-2724 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Physician Aggregate Year-to-Date -> 200.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)	5,200.00
TOTAL This Period (last page this line number only)	

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Melcher 3594 Pebble Beach Drive Augusta,GA 30907-9520 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Tri-County Medical Occupation Physician Aggregate Year-to-Date -> 250.00	07/11/2000	250.00
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carl Hargrove 45 Conifer Circle Augusta,GA 30909-4507 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aarbour, Inc. Occupation President Aggregate Year-to-Date -> 1,000.00	09/18/2000	1,000.00
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wallace McLeod 3234 Skinner Mill Road Augusta,GA 30909-1970 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Eye Physicians & Surgeons Occupation Ophthalmologist Aggregate Year-to-Date -> 1,000.00	09/18/2000	1,000.00
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W. B. Mullins 1402 Walton Way Augusta,GA 30901-2655 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Mullins Path. & Cytology Lab Occupation Physician Aggregate Year-to-Date -> 1,000.00	08/31/2000	1,000.00
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Peacock 506 Regent Place Augusta,GA 30909-3113 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Self Occupation Oral Surgeon Aggregate Year-to-Date -> 1,000.00	09/27/2000	1,000.00
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Henry Diversi 3133 Smokestone Court NE Atlanta,GA 30345-3533 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Self Occupation Dentist Aggregate Year-to-Date -> 1,000.00	09/13/2000	1,000.00
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Hagler 999 Highland Avenue Augusta,GA 30904-4625 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation Retired Aggregate Year-to-Date -> 250.00	09/13/2000	250.00

SUBTOTAL of Receipts This Page (optional)	5,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Otis Crowell 3750 Evans to Lock Road Martinez,GA 30907	Crowell and Co., Inc. Occupation: President	09/13/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
B. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Marion Wier 804 Quail Court Augusta,GA 30909-2722	Brown Radiology Assoc. Occupation: Radiologist	09/14/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Peter Menk Post Office Box 3147 Augusta,GA 30914-	The Menk Company Occupation: Owner	09/13/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
D. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Robert Pollard 5863 Washington Road Appling,GA 30802-9125	Pollard Lumber Company Occupation: President	09/26/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
E. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Clin Plunkett 3069 Skinner Mill Road Augusta,GA 30909-2033	Self Occupation: Mechanical Contractor	08/29/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	
F. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Robert Rafoth 28 Rapids Court North Augusta,SC 29841-	Self Occupation: Oral Surgeon	08/31/2000	850.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	850.00	
G. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Gregory Cook 136 Greenfield Abbey Court Martinez,GA 30907-9049	Augusta Gyn, Inc. Occupation: Physician	09/18/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	6,350.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeffrey Kincaid 1090 Brookeglen Drive Roswell,GA 30075-1372 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	North Georgia Orthodontics Occupation: Orthodontist Aggregate Year-to-Date -> 1,000.00	08/29/2000	1,000.00

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John McNeill 1935 Cedar Rock Thomson,GA 30824 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	McNeill Footwear Occupation: Owner Aggregate Year-to-Date -> 300.00	09/25/2000	300.00

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ed Loftis 2243 Huntington Road Augusta,GA 30904-3437 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Self Occupation: Physician Aggregate Year-to-Date -> 1,000.00	08/31/2000	1,000.00

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harold Nelson 730 Ravenal Rd Augusta,GA 30909-4524 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Columbia Augusta Medical Ctr Occupation: Physician Aggregate Year-to-Date -> 1,000.00	09/18/2000	1,000.00

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Herbert 515 Wheeler Executive Center Augusta,GA 30909- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Herbert Homes Occupation: President Aggregate Year-to-Date -> 1,000.00	09/27/2000	1,000.00

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Abram Serotta 701 Greene Street , Suite 200 Augusta,GA 30901-2322 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Serotta,Maddocks,Evans & Co. Occupation: CPA Aggregate Year-to-Date -> 1,000.00	09/21/2000	1,000.00

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Daniel Post Office Box 1744 Athens,GA 30603- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Self Occupation: Attorney Aggregate Year-to-Date -> 250.00	08/08/2000	250.00

SUBTOTAL of Receipts This Page (optional)	5,550.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Eubank 6432 Ridge Road Appling,GA 30802-9546	Self Occupation: Real Estate Developer	08/29/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	100.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vinayak Kamath 612 High Hampton Drive Martinez,GA 30907-9125	Cardiothoracic Surgical Assoc. Occupation: Physician	09/05/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harinderjit Singh 3699 Inverness Way Augusta,GA 30907-9027	Southeast Retina Center, P.C. Occupation: Ophthalmogist	09/29/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Allen 5090 Charbleton Drive Stone Mountain,GA 30087-1440	Self Occupation: Oral Surgeon	09/06/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marianne Harris 636 Stevens Crossing Martinez,GA 30907-	Merrill Lynch Occupation: Investment Associate	09/13/2000	600.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	600.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Davis 6427 Merrill Road Columbia,SC 29209-2059	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dwight McLaurin 2200 Rosemont Drive Columbus,GA 31904-7363	Self Employed Occupation: Dentist	09/01/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	100.00	

SUBTOTAL of Receipts This Page (optional)	4,050.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joe Pond 555 Blanchard Road Evans,GA 30809 Receipt For: [ ] Primary [X] General [ ] Other (specify)	A.B. Beverage Occupation Manager Aggregate Year-to-Date -> 1,000.00	09/16/2000	1,000.00
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ildefaro Volcan 3304 Raes Court Augusta,GA 30909-3138 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Summerville Neurosurgery Occupation Neurosurgeon Aggregate Year-to-Date -> 1,000.00	09/29/2000	1,000.00
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
R.C. Barton PO Box 3969 Augusta,GA 30909- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Claussen Concrete Occupation Retired Aggregate Year-to-Date -> 1,000.00	09/29/2000	1,000.00
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Vernon 4395 Deer Run Evans,GA 30809- Receipt For: [X] Primary [ ] General [ ] Other (specify)	Self Occupation Dentist Aggregate Year-to-Date -> 500.00	07/07/2000	500.00
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Richards 1418 Ashwood Drive Evans,GA 30809-8720 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Occupation Physician Aggregate Year-to-Date -> 1,000.00	09/07/2000	1,000.00
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bernard McDermott 4208 Chesapeake St., N.W. Washington,DC 20016-4508 Receipt For: [ ] Primary [X] General [ ] Other (specify)	McDermott, Giannini & Grey Occupation Dentist Aggregate Year-to-Date -> 1,000.00	09/18/2000	1,000.00
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Woodrow Parker 210 Kestwick Drive, West Martinez,GA 30907-1685 Receipt For: [ ] Primary [X] General [ ] Other (specify)	 Occupation Retired Aggregate Year-to-Date -> 1,000.00	08/29/2000	1,000.00

SUBTOTAL of Receipts This Page (optional)	6,500.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Whitlow 1109 Medical Center Drive #5A Augusta,GA 30909-	Self Occupation: Physician	09/27/2000	150.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	150.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Louis Mulherin, Jr. 2123 Ansley Place W Augusta,GA 30904-4427	Mulherin Lumber Co. Occupation: Chairman of the Board	09/27/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Louis Mulherin, III 3220 Lake Forest Drive Augusta,GA 30909-3031	Mulherin Lumber Company Occupation: President	09/27/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald Grady 1211 Buckingham Place Augusta,GA 30909-3809	Mulherin Lumber Company Occupation: Owner	09/27/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Rhoades 4551 Glennwood Drive Evans,GA 30809-	Self Occupation: Physician	09/18/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Guy Hill 692 Sandhill Hickory Lvl Road Carrollton,GA 30116-9739	Hill Aircraft & Leasing Corp. Occupation: President	08/15/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Smith Lanier PO Box 70 West Point,GA 31833-0070	J. Smith Lanier & Co. Occupation: CEO - Insurance Agency	09/19/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	

SUBTOTAL of Receipts This Page (optional)	3,100.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Roger Swingle 580 Westview Drive Athens,GA 30606-4640 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Retired / Physician Aggregate Year-to-Date -> 200.00	07/11/2000	200.00
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Roger Swingle 580 Westview Drive Athens,GA 30606-4640 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired / Physician Aggregate Year-to-Date -> 400.00	09/29/2000	200.00
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Clayton Boardman 15 Highgate West Augusta,GA 30909 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Boardman Petroleum Oil / Chairman of Bd. Aggregate Year-to-Date -> 1,000.00	09/21/2000	1,000.00
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Harold Haering PO Box 695 Labelle,FL 33935-0695 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self / Dentist Aggregate Year-to-Date -> 1,000.00	08/01/2000	1,000.00
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John Stripling Post Office Box 1067 Tucker,GA 30085-1067 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self / Physician Aggregate Year-to-Date -> 300.00	09/28/2000	300.00
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Randall Hatcher 424 Water Oak Lane Augusta,GA 30907-9545 Receipt For: [ ] Primary [X] General [ ] Other (specify)	MAU Inc. / Owner Aggregate Year-to-Date -> 1,000.00	09/27/2000	1,000.00
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Patricia Golgart 3319 Sugar Mill Road Augusta,GA 30907-3628 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired Aggregate Year-to-Date -> 150.00	08/29/2000	150.00

SUBTOTAL of Receipts This Page (optional)	3,850.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bill Beazley 1437 Ashwood Drive Evans,GA 30809-8722	Beazley Homes, Inc. Occupation: Owner	09/14/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Preston Sizemore 2116 Walton Way Augusta,GA 30904-4387	Sizemore Personnel Occupation: Owner	09/21/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Murray Freedman 7 Retreat Road Augusta,GA 30909-1837	Self Occupation: Physician	07/07/2000	1,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ed Noble PO Box 18651 Atlanta,GA 30326-	Self Occupation: Real Estate Developer	08/01/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Huey Bullock 3996 Hammonds Ferry Evans,GA 30809-8025	Brown Radiology Assoc. Occupation: Radiologist	09/28/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Barfield 631 Gary Street Augusta,GA 30906-3509	Self Occupation: Physician	09/13/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Herbert Elliott PO Box 218 Augusta,GA 30903-0218	Elliott Sons Funeral Homes Occupation: Funeral Director	08/29/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	

SUBTOTAL of Receipts This Page (optional)	4,950.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Julian Osbon Post Office Box 1447 Augusta,GA 30903-1447	Osbon & Associates	09/18/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Chairman & CEO	Aggregate Year-to-Date -> 1,000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joe Byrd Rt. 3 Box 320 Evans,GA 30809-	Southern Beverage Packers	09/18/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Chairman	Aggregate Year-to-Date -> 1,000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Susan Conger 3029 Pine Needle Road Augusta,GA 30909-3047	Computer Training Services	09/27/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Consultant	Aggregate Year-to-Date -> 1,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Poston Post Office Box 155 Thomson,GA 30824-0185	Thomson Roofing & Metal Co.	09/27/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Owner	Aggregate Year-to-Date -> 1,000.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Beatty 2007 Brookhaven Circle NE Atlanta,GA 30319-	EPS Settlements	09/27/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Consultant	Aggregate Year-to-Date -> 1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nancy Bobbitt 4572 Waterford Drive Evans,GA 30809	Schering Labs	08/16/2000	583.25
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Representative	Voter List Aggregate Year-to-Date -> 583.25	IN-KIND

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nancy Bobbitt 4572 Waterford Drive Evans,GA 30809	Schering Labs	09/25/2000	25.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Representative	Aggregate Year-to-Date -> 608.25	

SUBTOTAL of Receipts This Page (optional)	5,608.25
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Raymond Lawless 3422 Heather Drive Augusta,GA 30909-	Occupation: Retired	09/12/2000	50.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> 50.00		

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Giangrande 566 Lietz Court Grovetown,GA 30813-	Merrill Lynch Occupation: Financial Consultant	08/21/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> 1,000.00		

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Thiele PO Box 1056 Sandersville,GA 31082-	Thiele Kaolin Co. Occupation: Executive	09/07/2000	700.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> 700.00		

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rao Kondur 3731 Foxfire Road Augusta,GA 30907-	University Anesthesia Assoc. Occupation: Anesthesiologist	09/27/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> 1,000.00		

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lewis Petree 155 Evergreen Lane Winder,GA 30680-1412	Stansell & Petree Family Dent Occupation: Dentist	07/18/2000	500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date -> 500.00		

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Allan Stocks 1330 Interstate Pkwy. Augusta,GA 30909-	Eye Physicians & Surgeons Occupation: Opthalmologist	07/18/2000	1,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date -> 1,000.00		

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Ferris 475 Maitland Avenue Altamonte Springs,FL 32701-5444	Self Occupation: Dentist	07/18/2000	250.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date -> 250.00		

SUBTOTAL of Receipts This Page (optional)	4,500.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Keagle 21 Plantation Hills Drive Evans,GA 30809-	Occupation: Retired	08/08/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	100.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leon Leonard 1712 Hodges Circle Mansfield,GA 30255-2605	Occupation: Retired Dentist	07/07/2000	200.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leon Leonard 1712 Hodges Circle Mansfield,GA 30255-2605	Occupation: Retired Dentist	08/15/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	400.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. Walter Sheffield 4570 Tall Pines Drive Atlanta,GA 30327-	Retired Occupation: Dentist	08/01/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	100.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Wray 3115 Ramsgate Road Augusta,GA 30909-	MCG Occupation: Surgeon	09/07/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marian Conger 2635 Walton Way Augusta,GA 30909-	Occupation: Homemaker	09/07/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Helen Baisden 3227 Ramsgate Road Augusta,GA 30909-	Occupation: Homemaker	09/29/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	3,600.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code Patty Blanton 6017 Washington Road Appling,GA 30802- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer	Date (month, day, year) 09/27/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Homemaker		
	Aggregate Year-to-Date ->	1,000.00	
B. Full Name, Mailing Address and Zip Code David Lewis 1310 Saxon Road Watkinsville,GA 30677- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer U.S. EPA	Date (month, day, year) 08/08/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Research Microbiologist		
	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code David Allen 120 Trinity Place Athens,GA 30606- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer The Urology Clinic	Date (month, day, year) 07/18/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Physician		
	Aggregate Year-to-Date ->	1,000.00	
D. Full Name, Mailing Address and Zip Code William Mulherin 125 King Ave Athens,GA 30606-2953 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Employed	Date (month, day, year) 09/07/2000	Amount of Each Receipt this Period 300.00
	Occupation Doctor		
	Aggregate Year-to-Date ->	300.00	
E. Full Name, Mailing Address and Zip Code Stephen Wilde 455 Jefferson Avenue Rogart,GA 30622-1531 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer NE Ga Gastroenterology Assoc.	Date (month, day, year) 07/10/2000	Amount of Each Receipt this Period 250.00
	Occupation Physician		
	Aggregate Year-to-Date ->	250.00	
F. Full Name, Mailing Address and Zip Code Jack Leather 517 Barrett Lane Augusta,GA 30909-3454 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer MCG	Date (month, day, year) 09/19/2000	Amount of Each Receipt this Period 100.00
	Occupation Dermatologist		
	Aggregate Year-to-Date ->	100.00	
G. Full Name, Mailing Address and Zip Code Hossam Fadel 3503 Lost Tree Court Martinez,GA 30907- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Fadel and Larrow	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 100.00
	Occupation Physician		
	Aggregate Year-to-Date ->	100.00	

SUBTOTAL of Receipts This Page (optional)	3,750.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hossam Fadel 3503 Lost Tree Court Martinez,GA 30907-	Fadel and Larrow Occupation: Physician	09/31/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	300.00	
B. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Hossam Fadel 3503 Lost Tree Court Martinez,GA 30907-	Fadel and Larrow Occupation: Physician	09/13/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
C. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Jeanne Serst 2724 Peachtree Road NW #402 Atlanta,GA 30305-	Occupation: Retired	08/08/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
D. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Ulla Ellefson Post Office Box 5444 Augusta,GA 30906-	Occupation: Homemaker	09/18/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
E. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Steven Goldberg 3714 Pebble Beach Drive Martinez,GA 30907-	Self Occupation: Dentist	08/23/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	
F. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Jerry Long 3118 Robinson Road Missouri City,TX 77459-	Self Occupation: Dentist	09/21/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	
G. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Albert Minish PO Box 8 Commerce,GA 30529-	Self Employed Occupation: Real Estate	08/15/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	3,350.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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

NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Green 3822 Inverness Way Martinez,GA 30907-	University Hospital Occupation Physician	09/14/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	100.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Tarbutton Post Office Box 269 Sandersville,GA 31082-	Sandersville Railroad Company Occupation Vice President	07/07/2000	1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Grady Campbell P O Box 909 Dublin,GA 31040-0909	Retired Occupation Doctor	09/05/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Forrest Lane PO Box 1889 Dublin,GA 31021-	Self Occupation Anesthesiologist	07/26/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Forrest Lane PO Box 1889 Dublin,GA 31021-	Self Occupation Anesthesiologist	08/21/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	400.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Glendon Smalley 710 Arthur Wolfe Road Dublin,GA 31021-	Dublin Eye Associates Occupation Opthalmologist	07/26/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Madison Dixon 623 Oaklawn Drive Swainsboro,GA 30401-	Optometrist Occupation Retired	09/27/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	100.00	

SUBTOTAL of Receipts This Page (optional)	2,300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EM Edington 400 Wingate Drive Clarksville,TN 37043-	Self Occupation: Dentist	07/11/2000	200.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rile Zinney 3552 Carnoustie Drive Martinez,GA 30907-	The Foot and Ankle Group Occupation: Podiatrist	09/18/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Quentin Price 1703 Greystone Road Dublin,GA 31021	Retired Occupation: Physician	08/31/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Hilburn Post Office Box 248 Dublin,GA 31021-6709	Jones, Hilburn & Claxton Occupation: Attorney	07/26/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Payne 100 Plantation Oaks Drive Macon,GA 31220-	Payne Investments Occupation: CEO	08/31/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
McGrath Keen 1620 Bellevue Road Dublin,GA 31021-2929	Farmers & Merchants Bank Occupation: Vice President	08/17/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wayne Christian PO Box 280 Dublin,GA 31040-0280	Deep Creek Associates Occupation: Owner	07/26/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	

SUBTOTAL of Receipts This Page (optional)	3,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jimmy Allgood PO Box 891 Dublin,GA 31040-0891 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Allgood Services Owner Aggregate Year-to-Date -> 500.00	07/26/2000	500.00
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jeff Davis 406 Brentwood Drive Dublin,GA 31021-3833 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Uniroyal Chemical Co. Inc. Sales Manager Aggregate Year-to-Date -> 500.00	07/26/2000	500.00
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Emmett Black PO Box 1718 Dublin,GA 31040 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Self Dentist Aggregate Year-to-Date -> 250.00	08/21/2000	250.00
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Charles Tennant 227 Brookwood Drive Dublin,GA 31021-3801 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	 Retired Aggregate Year-to-Date -> 100.00	08/23/2000	100.00
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Bill Rajczak 111 Lenox Place Martinez,GA 30907- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Westinghouse Savannah River Co Manager Aggregate Year-to-Date -> 100.00	08/29/2000	100.00
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Bill Rajczak 111 Lenox Place Martinez,GA 30907- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Westinghouse Savannah River Co Manager Aggregate Year-to-Date -> 150.00	09/25/2000	50.00
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Claude Graham PO Box 3095 E Dublin,GA 31027- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Graham Brothers Construction Owner Aggregate Year-to-Date -> 1,000.00	08/29/2000	1,000.00

SUBTOTAL of Receipts This Page (optional)	2,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Tim Camp PO Box 4212 Eatonton,GA 31024-	Self Dairy Farmer	07/11/2000	1,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Glenn Yarborough Box 115 Thomson,GA 30824-	Allied Research Corp. President	08/31/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Edwin Douglass 3029 Bransford Road Augusta,GA 30909-3090	Augusta Truck Sales Officer	07/07/2000	300.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	300.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
James O'Quinn 1109 Medical Center Drive Augusta,GA 30909-	Self Physician	09/18/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Robert Knox Post Office Box 539 Thomson,GA 30824	Knox and Swan Attorney	09/18/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Addison Burt 33 Lexington Avenue Washington,GA 30673-	Retired Occupation	08/29/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Lee Smith 9 Somerset Court Augusta,GA 30909-1839	Swiftwind Corporation President	07/18/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	5,550.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jennett Eposton 2821 Hillcrest Avenue Augusta,GA 30909	Merry Land Occupation: Owner	09/27/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cecil Hodges 609 Kinney Street Drawer B Sandersville,GA 31082-	Self Occupation: Tree Farmer	09/28/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Doug Cates 803 Walton Woods Court Augusta,GA 30909-3443	Cherry, Bekaert, and Holland Occupation: CPA	09/13/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Corrine Hallman 105 Windsor Drive Eatonton,GA 31024-	Hallman Wood Products, Inc. Occupation: Lumber Mfg. (owner)	09/01/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	100.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Cutting 752 Westport Road Martinez,GA 30907-9531	U.S. Army Occupation: Retired	07/13/2000	50.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->	50.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Cutting 752 Westport Road Martinez,GA 30907-9531	U.S. Army Occupation: Retired	08/29/2000	50.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	100.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sibley Bryan Box 307 Union Point,GA 30669-0307	Chipman-Union, Inc. Occupation: Executive	08/13/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

SUBTOTAL of Receipts This Page (optional)	1,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sibley Bryan Box 307 Union Point,GA 30669-0307	Chipman-Union, Inc. Occupation: Executive	09/27/2000	750.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Montague Miller 4384 Deer Run Evans,GA 30809-	Club Car, Inc. Occupation: President & CEO	09/28/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
E.G. Meybohm 815 Milledge Road Augusta,GA 30904-	Meybohm Realty Occupation: Real Estate	09/01/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nick Herrington 459 Prince Avenue Swainsboro,GA 30401-	Swainsboro Supply Co., Inc. Occupation: Treasurer	09/27/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	100.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
H.G. Yeomans Yeomans Wood and Timber Post Office Box 656 Swainsboro,GA 30401-	Yeomans Wood and Timber Occupation: timber dealer	09/18/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alton Snider Snider's Motor Co. Post Office Box 488 Louisville,GA 30434-	Sniders Motor Co Occupation: Owner	09/05/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carl Gillis Post Office Box 2006 Dublin,GA 31040	Occupation: Retired	07/26/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	100.00	

SUBTOTAL of Receipts This Page (optional)	3,700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
James Braziel PO Box 1889 Dublin,GA 31040 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Middle Ga Anesthesia Assoc Anesthesiologist Aggregate Year-to-Date -> 200.00	07/26/2000	200.00
B. Full Name, Mailing Address and Zip Code Warren Camp 2284 Hwy 212W Monticello,GA 31064- Receipt For: [X] Primary [ ] General [ ] Other (specify)	Self Dairy Farmer Aggregate Year-to-Date -> 650.00	07/11/2000	650.00
C. Full Name, Mailing Address and Zip Code Warren Camp 2284 Hwy 212W Monticello,GA 31064- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Dairy Farmer Aggregate Year-to-Date -> 1,000.00	07/11/2000	350.00
D. Full Name, Mailing Address and Zip Code Morgan Hall 3758 Evans To Locks Road Augusta,GA 30907- Receipt For: [ ] Primary [X] General [ ] Other (specify)	CFE, Inc. CEO Aggregate Year-to-Date -> 1,000.00	09/19/2000	1,000.00
E. Full Name, Mailing Address and Zip Code Robert Reeves 131 Park Circle Drive Swainsboro,GA 30401-1347 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Reeves & Palmer Attorney Aggregate Year-to-Date -> 1,000.00	09/21/2000	1,000.00
F. Full Name, Mailing Address and Zip Code Henry Terwilliger 594 Grande Creek Road Swainsboro,GA 30401-9355 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Terwilligers Auto Sales Tire Dealer Aggregate Year-to-Date -> 100.00	09/27/2000	100.00
G. Full Name, Mailing Address and Zip Code Don Christian 410 Academy Avenue Dublin,GA 31021- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Christian, Kelly, Chigpen & Co CPA Aggregate Year-to-Date -> 250.00	07/26/2000	250.00

SUBTOTAL of Receipts This Page (optional)	3,550.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Conway Thomas 3526 Goolsby Road Monticello,GA 31064-	Retired Occupation	09/27/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Myldred Mangum 16 Flat Shoals Church Road Stockbridge,GA 30281-1514	 Occupation Homemaker	08/29/2000	300.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	300.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vann Greer Post Office Box 65 Kingfisher,OK 73750-	Self Occupation Orthodontist	08/10/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frederic Sterritt 2139 US Hwy 206 Belle Mead,NJ 08502-4010	Self Occupation Dentist	09/07/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bon Brush 476 Flowing Wells Road, B-1 Martinez,GA 30907-	Self Occupation Builder	09/07/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Benton 1313 Bimini Place Augusta,GA 30909-2603	US Army Occupation Retired	07/13/2000	100.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->	100.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dave Barbee 2813 Lombardy Court Augusta,GA 30909-	HRP Nursing Services Occupation President	09/27/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	3,150.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Henry Jones Post Office Box 545 Gray,GA 31032-0545	Occupation: Retired	09/29/2000	50.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 50.00		
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jackie Sorset 3046 Westwood Road Augusta,GA 30909-	Mayac Publications, Inc. Occupation: Owner	09/01/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 1,000.00		
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeremy Coghlan 214 Simmons Place Augusta,GA 30907-	Hagler Engineering Occupation: Station Manager	09/25/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 100.00		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eric Jones 2088 North Hwy 441 Dublin,GA 31040-	Jones, Hilburn & Claxton Occupation: Attorney	08/10/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 100.00		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kevin Taylor 107 Ovid Drive Dublin,GA 31021-	Self Occupation: Physician	08/03/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 500.00		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ernest Jones PO Box 927 Dublin,GA 31040-	Self Occupation: CPA	07/26/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 500.00		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen Gooden 3539 Stevens Way Augusta,GA 30907-	Augusta Surgical Group Occupation: Physician	09/13/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 1,000.00		

SUBTOTAL of Receipts This Page (optional)	3,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Danny Hoffa 213 Wellington Drive Dublin,GA 31021-	Self	09/21/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Pathologist	Aggregate Year-to-Date ->	1,000.00

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Billy Collins 1011 Thomson Hwy Lincolnton,GA 30817-	AARP/SCSEP	07/13/2000	100.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Occupation: Director	Aggregate Year-to-Date ->	100.00

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Billy Collins 1011 Thomson Hwy Lincolnton,GA 30817-	AARP/SCSEP	08/10/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Director	Aggregate Year-to-Date ->	200.00

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Billy Collins 1011 Thomson Hwy Lincolnton,GA 30817-	AARP/SCSEP	09/07/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Director	Aggregate Year-to-Date ->	300.00

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Busby 225 Old Belair Road Grovetown,GA 30813-	Busby's, Inc.	09/07/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Owner	Aggregate Year-to-Date ->	1,000.00

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Minton Hester Post Office Box 16099 Dublin,GA 31040-6099	KFC	09/27/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Owner	Aggregate Year-to-Date ->	1,000.00

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence Thompson 184 Kenan Drive NW Milledgeville,GA 31061-	T&S Hardwoods	09/27/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Owner	Aggregate Year-to-Date ->	1,000.00

SUBTOTAL of Receipts This Page (optional)	4,300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Marianne Orlet 3510 Turnberry Lane Augusta,GA 30907-	Homemaker	09/29/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
B. Mario Fiori 607 Medinah Drive Martinez,GA 30907-	Compass Assoc., Inc / Consultant	08/08/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	
C. Mario Fiori 607 Medinah Drive Martinez,GA 30907-	Compass Assoc., Inc / Consultant	09/07/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	400.00	
D. Judith Hankinson 200 Oak Lane Waynesboro,GA 30830-	Name of Employer / Homemaker	09/18/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
E. James Reynierson 116 Davis Road Martinez,GA 30907-	Self / Dentist	08/21/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	
F. Keith Blevins 1934 Byrnes Road North Augusta,SC 29841-	Self / Dentist	08/23/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	
G. John Skandalakis 35 Collier Rd. NW Ste. 315 Atlanta,GA 30309-	Self / Physician	08/08/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	4,100.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Logan Nalley 3643 Walton Way Ext. Auguste,GA 30909-	Self Dentist	08/17/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Logan Nalley 3643 Walton Way Ext. Auguste,GA 30909-	Self Dentist	09/18/2000	750.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Clifford Adams P. O. Drawer 6249 Elberton,GA 30635-	Alston & Bird Attorney	09/21/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Dean Graham 2074 Buckeye Road Dublin,GA 31021-	Graham Brothers Construction Secretary	08/29/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Bert Carp Williams and Jensen 1155 21st Street, NW, Suite 300 Washington,DC 20036-3308	Williams and Jensen Attorney	09/27/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Deanne Fullerton 3498 Stallings Island Road Martinez,GA 30907-	 Homemaker	08/29/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Carolyn Pratt 305 Fury's Ferry Road Martinez,GA 30907-	 Homemaker	09/13/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	5,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeff Annis 1323 Glenn Avenue Augusta,GA 30904-	Advanced Services for Pest Con	08/31/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: President	Aggregate Year-to-Date -> 1,000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gwen Young 209 Berckman Road Augusta,GA 30909-	Self	09/29/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Real Estate Broker	Aggregate Year-to-Date -> 1,000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wayne Brown 618 Brae Burn Drive Martinez,GA 30907-9128	Border Masters	09/18/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Owner	Aggregate Year-to-Date -> 1,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis Rediker 1451 Spring Falls Circle Dayton,OH 45440-5007	Standard Register	08/31/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: CEO	Aggregate Year-to-Date -> 500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leslie Smith 309 East Paces Ferry Rd, NE, Suite 711 Atlanta,GA 30305-		07/11/2000	100.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Occupation: Homemaker	Aggregate Year-to-Date -> 100.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leslie Smith 309 East Paces Ferry Rd, NE, Suite 711 Atlanta,GA 30305-		07/20/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Homemaker	Aggregate Year-to-Date -> 200.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Duehring 888 Deerwood Circle Evans,GA 30809-	YubaRiver, Inc.	08/10/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: President	Aggregate Year-to-Date -> 1,000.00	

SUBTOTAL of Receipts This Page (optional)	4,700.00
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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel O'Neill 1030 Liberty Chapel Lane Greensboro,GA 30642-	Occupation: Retired	09/05/2000	50.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	50.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel O'Neill 1030 Liberty Chapel Lane Greensboro,GA 30642-	Occupation: Retired	09/27/2000	100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	150.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tom Werner 844 Vivian Court Evans,GA 30809-	Pinewood Construction Co Occupation: Builder	09/07/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marshall Reinig 4275 Owens Road, No. 1227 Evans,GA 30809-	Occupation: Retired	09/21/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pat Machalinski 2464 Massachusetts Avenue, Suite 410 Cambridge,MA 02140-	Self Occupation: Endodontist	08/29/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Derosier Post Office Box 747 Marblehead,MA 01945-0747	Self Occupation: Dentist	09/15/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Katharine Condoy 2710 Wellington Drive Augusta,GA 30909-	Occupation: Homemaker	08/10/2000	100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	100.00	

SUBTOTAL of Receipts This Page (optional)	3,750.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nancy Story 2231 Cumming Road Augusta,GA 30904-	Occupation: Homemaker	09/07/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 250.00		

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marlon Guthrie 2043 Stagecoach Road Thomson,GA 30824-4743	Savannah Site & Highway Contra Occupation: Owner	09/27/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 250.00		

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Amy Sprague 3559 Bellcrive Circle Augusta,GA 30907-	Self Occupation: Physician	08/03/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 1,000.00		

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alan Baum 7710 Beechnut Street, Suite 100 Houston,TX 77074-3106	Texas Eye Institute Occupation: Physician	09/21/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 500.00		

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Wood 109 Cedar Creek Drive Dublin,GA 31021-	Fairview Park Hospital Occupation: CEO	08/21/2000	400.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 400.00		

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ruth Embry 530 New Phoenix Road Eatonton,GA 31024-	Occupation: Homemaker	08/29/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 100.00		

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alan Brosious 4144 Bent Tree Lane Augusta,GA 30907-	CVS Holdings Occupation: CFO	09/21/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 1,000.00		

SUBTOTAL of Receipts This Page (optional)	3,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Cindy Guthrie 2043 Stagecoach Road Thomson,GA 30824-4743 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Savannah Site & Highway Contra Office Manager Aggregate Year-to-Date -> 750.00	09/27/2000	750.00
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Clave Mobley Post Office Box 583 Waynesboro,GA 30830- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Farmer Aggregate Year-to-Date -> 1,000.00	08/10/2000	1,000.00
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Karen Roche 105 Woodridge Road Dublin,GA 31021- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Roche Farm & Garden Manager Aggregate Year-to-Date -> 500.00	08/21/2000	500.00
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Cindy Bounds 1016 Spring Street Washington,GA 30673- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Bounds Farms Homemaker/Partner Aggregate Year-to-Date -> 1,000.00	09/18/2000	1,000.00
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Henry Hopkins Post Office Box 486 Waynesboro,GA 30830- Receipt For: [ ] Primary [X] General [ ] Other (specify)	 Retired Aggregate Year-to-Date -> 200.00	08/31/2000	200.00
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Deanna Clepper 3546 West Lake Drive Martinez,GA 30907- Receipt For: [ ] Primary [X] General [ ] Other (specify)	West Augusta Dental Assoc. Payroll Clerk Aggregate Year-to-Date -> 1,000.00	09/19/2000	1,000.00
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Robert Hubbert 18042 Blue Ridge Drive Santa Ana,CA 92705-2004 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Dentist Aggregate Year-to-Date -> 200.00	07/26/2000	200.00

SUBTOTAL of Receipts This Page (optional)	4,650.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Morris 211 Earlwood Drive Dublin,GA 31021-	Middle Ga Anesthesia Assoc	07/26/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Anesthesiologist		
	Aggregate Year-to-Date ->	200.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carlos Hamilton 3713 Chevy Chase Houston,TX 77019-	Self	09/21/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Physician		
	Aggregate Year-to-Date ->	250.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Cox 1141 Timothy Road Greensboro,GA 30642-	Self	09/05/2000	100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Dentist		
	Aggregate Year-to-Date ->	100.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Veazey 108 Milledge Road Augusta,GA 30904-	University Surgical Associates	09/27/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Physician		
	Aggregate Year-to-Date ->	1,000.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Allen Forman Post Office Box 1099 Thomson,GA 30824-	Self	08/21/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Horse Trainer		
	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lee Martin 819 Honeysuckle Road, NW Gainesville,GA 30501-	Self	09/18/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Radiologist		
	Aggregate Year-to-Date ->	1,000.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harvey Sanders 2 Huntington Place Waynesboro,GA 30830-	Medical Specialists Inc.	09/19/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Physician		
	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	4,550.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Pamela Barrett 412 Scotts Way Augusta,GA 30909-	Barrett Turbine Engine Co. Bookkeeper	09/18/2000	750.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	750.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Walter Edwards 2876 Wingate Atlanta,GA 30305-	Self Orthopedic Surgeon	08/15/2000	100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	100.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Charles Meyer 818 Aumond Place, East Augusta,GA 30909-	MCG Physician	08/23/2000	150.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	150.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Charles Meyer 818 Aumond Place, East Augusta,GA 30909-	MCG Physician	09/25/2000	25.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	175.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Judson Hickey 2315 S Central Avenue Augusta,GA 30904	Self Periodontist	08/15/2000	150.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	150.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John Jopling 1014 Northwood Road Augusta,GA 30909	Self Dentist	08/21/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mark Rotterbush 2311 N Patterson St Valdosta,GA 31602	Self Dentist	09/22/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	

SUBTOTAL of Receipts This Page (optional)	1,575.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
James Chappois 3280 Howell Mill Road, Suite 229 Atlanta,GA 30327 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Orthopedic Surgeon Aggregate Year-to-Date -> 100.00	08/08/2000	100.00
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Preston DeLaPerriere P.O. Box 1889 Dublin,GA 31021 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Anesthesiologist Aggregate Year-to-Date -> 200.00	07/26/2000	200.00
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Preston DeLaPerriere P.O. Box 1889 Dublin,GA 31021 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Anesthesiologist Aggregate Year-to-Date -> 300.00	08/21/2000	100.00
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Roy Rowland 103 Woodridge Road Dublin,GA 31021 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Physician Aggregate Year-to-Date -> 500.00	08/03/2000	500.00
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Robert McNamara 830 Foxwood Circle Lafayette Hill,PA 19444- Receipt For: [X] Primary [ ] General [ ] Other (specify)	Temple University Hospital Physician Aggregate Year-to-Date -> 100.00	07/11/2000	100.00
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John Lee 1044 Thackery Lane Naperville,IL 60564- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Physician Aggregate Year-to-Date -> 200.00	09/12/2000	100.00
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Raymond McDonald 534 Jackson River Forest,IL 60305- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Physician Aggregate Year-to-Date -> 100.00	07/20/2000	100.00

SUBTOTAL of Receipts This Page (optional)	1,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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

NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Converse Bright 5804 Barfield Ln. Hahira,GA 31632-	Self Occupation: Attorney	07/07/2000	250.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Johnson 130 Amanda Drive Oak Ridge,TN 37830-	Self Occupation: Dentist	09/19/2000	100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	100.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Riley Lunn Cornerstone Office Suite 106 5323 Brainerd Rd. Chattanooga,TN 37411-	Self Occupation: Dentist	07/11/2000	200.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Holifield 110 30th Avenue South Nashville,TN 37212-	Self Occupation: Dentist	07/11/2000	200.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douglas Torrance 899 Ladder Trail Signal Mountain,TN 37377-	Self Occupation: Dentist	07/11/2000	200.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William McLees 1801 Knox Street Dublin,GA 31021-	Retired Occupation: Dentist	07/26/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Walker 206 Wellington Drive Dublin,GA 31021-	Self Occupation: Businessman	07/26/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	1,950.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jacqueline Reese 1205 King Edward Dublin,GA 31021-	Self Occupation Anesthesiologist	07/26/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kelly Roberts 8 Creekwood Drive Dublin,GA 31021-	Self Occupation Urologist	07/26/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Sharkey 15 Dutchtown road Richmond Hill,GA 31324-	Self Occupation Dermatologist	07/26/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mike Belote Post Office Box 678 Dublin,GA 31040-	Self Occupation timber dealer	07/26/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Giordan 565 North 161st Avenue Goodyear,AZ 85338-2304	Self Occupation Dentist	07/26/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Howard Zuckerman 430 South Main Street Lombard,IL 60148-	Self Occupation Dentist	07/26/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Templeton 3226 North Miller Road, Suite 1 Scottsdale,AZ 85251-	Self Occupation Dentist	07/26/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	

SUBTOTAL of Receipts This Page (optional)	2,300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dana Scafaru 13450 West Camino Del Sol No.5 Sun City West,AZ 85375-4435 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Self Occupation: Dentist	07/26/2000 Aggregate Year-to-Date -> 200.00	200.00
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joyce Bassett 4921 East Bell Road, No. 206 Scottsdale,AZ 85254- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Self Occupation: Dentist	07/26/2000 Aggregate Year-to-Date -> 200.00	200.00
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leo Beare Post Office Box 5057 Peoria,AZ 85385-5057 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Self Occupation: Dentist	07/26/2000 Aggregate Year-to-Date -> 200.00	200.00
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Howard Woodard 720 Lord Dexter Road Dudley,GA 31022- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Georgia College Occupation: Professor	06/03/2000 Aggregate Year-to-Date -> 500.00	500.00
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Pryhofer 1005 Buckingham Circle Atlanta,GA 30327- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Butler, Wooten, et al Occupation: Attorney	09/06/2000 Aggregate Year-to-Date -> 1,000.00	1,000.00
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Randall Ozment 221 Earlwood Drive Dublin,GA 31021- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Self Occupation: Physician	08/08/2000 Aggregate Year-to-Date -> 500.00	500.00
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nelson Irvine 1000 Tallan Building Two Union Square Chattanooga,TN 37402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Chambliss, Bahner & Stopher Occupation: Attorney	08/23/2000 Aggregate Year-to-Date -> 250.00	250.00

SUBTOTAL of Receipts This Page (optional)	2,650.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carroll Shanks 6614 Woodview Drive Knoxville,TN 37920-	Self Occupation: Dentist	08/10/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	
B. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Pablo Santamaria 340 Champion Drive Dublin,GA 31021-	Middle GA Urology Associates Occupation: Urologist	08/22/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Josh Lewis 135 Cliftwood Drive Atlanta,GA 30328-	Georgia Land Surveyors Occupation: Owner	08/23/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
D. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Elizabeth Clark-Price 295 Broadmeadow Cove Roswell,GA 30075-	Self Occupation: Physician	08/23/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	
E. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
James Bond Post Office Box 274 Valdosta,GA 31603-	Griffin Corp. Occupation: Executive	09/12/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	
F. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
John Gillion 813 Kenwood Place W Augusta,GA 30909-	Baird & Company Occupation: CPA	09/13/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	
G. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Donald Huizenga 18020 Wildwood Spring Pky Spring Lake,MI 49456-	Kurdziel Industries Occupation: President / CEO	09/14/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	4,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gail Perry 20 Tall Pine Circle Augusta,GA 30909-	E & A Vending Occupation: Manager	09/19/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
B. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Thomas Inglesby 200 East Julian Street, Suite 600 Savannah,GA 31401-	Inglesby Financial Group Occupation: Insurance Broker	09/21/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	
C. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Charles Bailey 12727 Kimberley Lane, Ste 300 Houston,TX 77024-4050	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	
D. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Edwin Pitts 7710 Beechnut, Suite 100 Houston,TX 77074-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	
E. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
William Docker 7710 Beechnut, Suite 100 Houston,TX 77074-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	
F. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
J.B. Askew 1611 South Boulevard Houston,TX 77006-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	
G. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Donald Butts 800 Peakwood, Suite 2-C Houston,TX 77090-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

SUBTOTAL of Receipts This Page (optional)	2,750.00
TOTAL This Period (last page this line number only)	

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Neblett 6560 FAnnin, Suite 1748 Houston,TX 77030-2714	Self Occupation: Neurosurgeon	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Grady Hallman Post Office Box 20345 Houston,TX 77225-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Denton Cooley 6624 Fannin, Suite 2700 Houston,TX 77030-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Ratsner 9601 Jones Road, Suite 228 Houston,TX 77065-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Duncan 402 Little John Lane Houston,TX 77024-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Dunstan 2323 Dunstan Road Houston,TX 77005-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Wessels 6539 Vanderbilt Street Houston,TX 77005-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

SUBTOTAL of Receipts This Page (optional)	1,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Livesay 3670 Inwood Drive Houston, TX 77019-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
T.M. Hughes 11914 Williamsburg Houston, TX 77024-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jessie Leak 2304 Avalon Houston, TX 77019-	MD Anderson Cancer Ctr Occupation: Anesthesiologist	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Fleming 5865 Shady River Drive Houston, TX 77056-1014	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven Perak 12039 Circle Drive E Houston, TX 77071-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ralph Norton 810 Peakwood, No. 200 Houston, TX 77090-2922	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Ott 3689 Inwood Drive Houston, TX 77019-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

SUBTOTAL of Receipts This Page (optional)	1,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Handel 1213 Hermann Drive, Ste. 675 Houston,TX 77004-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Morrow 2514 Encino Lane Sugar Land,TX 77478-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Sailes Post Office Box 131599 The Woodlands,TX 77393-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kayron Dube 5814 Buffalo Speedway Houston,TX 77005-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lewis Foxhall 3706 Harper Houston,TX 77005-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Teasdale 215 Cove Creek Houston,TX 77042-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joel Cunningham 2907 Four Winds Drive Missouri City,TX 77459-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

SUBTOTAL of Receipts This Page (optional)	1,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Shelly Rodriguez 14222 Golf View Trail Houston,TX 77059-6406	Self Occupation: Physician	09/21/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Johnson 42 Grants Lake Circle Sugar Land,TX 77479-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ken Ford 101 Broad Oaks Circle Houston,TX 77056-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Kelly 165 Capetown Montgomery,TX 77356-	Self Occupation: Physician	09/21/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Johnston 2798 Pete Shaw Road Marietta,GA 30066-	MEAG Power Occupation: President	09/27/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fred Speahrer 1641 Snug Harbor Drive Greensboro,GA 30642-	Retired Occupation:	09/29/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elan Property 5148 Buckhead Trail Knoxville,TN 37919-	Self Occupation: Dentist	07/11/2000	200.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	

SUBTOTAL of Receipts This Page (optional)	3,200.00
TOTAL This Period (Last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lorethe Thiele Post Office Box 1056 Sandersville,GA 31082-	Occupation Homemaker	09/07/2000	300.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	300.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	162,383.25

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SunTrust Bank Good Government Group Attn: Mr. William Bowdoin, Jr. Post Office Box 4418 Atlanta,GA 30302-	Occupation	09/27/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Build Political Action Committee Attn: Mr. Sean Bressett 1201 15th Street, NW Washington,DC 20005-	Occupation	08/29/2000	4,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	4,000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Orkin PAC Attn: Mr. Tom Diedeich 2170 Piedmont Road NE Atlanta,GA 30324-	Occupation	09/22/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AGL Resources PAC Attn: Mr. Roy Robinson Post Office Box 4569 Atlanta,GA 30302-4569	Atlanta Gas Light Company	09/27/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Natl. Chicken Council PAC Attn: Ms. Mary Colville 1015 15th St. NW Ste 930 Washington,DC 20005-2605	Occupation	09/19/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pfizer PAC Attn: Mr. Ken Bowler 325 7th Street, NW, Suite 1200 Washington,DC 20004-	Occupation	06/29/2000	500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Optometric Assn. PAC Attn: Mr. Alan Peterson 1505 Prince Street, Ste 300 Alexandria,VA 22314-	Occupation	09/27/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	7,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Florida Sugar Cane League PAC Mr. Dalton Yancey, Exec. Vice President 1301 Pennsylvania Ave NW Ste 401 Washington,DC 20004-3009	Occupation	06/29/2000	500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dealers Election Action Cmte. Attn: Mr. Greg Knopp 412 First St SE Washington,DC 20003-	Occupation	09/27/2000	5,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	5,000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SSC Telecommunications - EmPAC Attn: Mr. Rodney A. Smith 1401 I Street, NW Washington,DC 20005-	Occupation	07/07/2000	1,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Action Comm. for Rural Electrification Attn: Mr. Bob Dawson 4301 Wilson Blvd Arlington,VA 22203-	Occupation	08/08/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Action Comm. for Rural Electrification Attn: Mr. Bob Dawson 4301 Wilson Blvd Arlington,VA 22203-	Occupation	09/19/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,500.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Amer. Assn. of Nurse Anesthatists Attn: Mr. David Hebert 422 First Street, SE, #12 Washington,DC 20003-	Occupation	07/11/2000	500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Crystal Sugar PAC Attn: Mr. Kevin Price 101 N Third St Moorhead,MN 56560-	Occupation	09/19/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	9,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(c)

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

NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Dental PAC Attn: Mr. Frank McLaughlin 1111 14th St NW 11th Floor Washington,DC 20005-	Occupation	09/21/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Assn. for the Advancement of Psychology Attn: Mr. Doug Walter Washington,DC 20002-	Occupation	09/29/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bechtel Group, Inc. PAC Attn: Mr. Dan Kennedy 1015 15th St NW Ste 700 Washington,DC 20005-	Occupation	06/29/2000	500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BellSouth Federal PAC Attn: Dan Marroon 1133 21st St NW Ste 900 Washington,DC 20036-	Occupation	09/28/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
The Orthopaedic PAC Attn: David Lovett 317 Massachusetts Ave NE Ste 100 Washington,DC 20002-5707	Occupation	07/07/2000	500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ConAgra Inc. GGA Attn: Brent Baglien 1627 I St., NW Suite 950 Washington,DC 20006-	Occupation	07/10/2000	500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Credit Union Legislative Action Council Attn: John McKechnie 805 15th St NW Ste 300 Washington,DC 20005-	Occupation	09/29/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	5,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Deloitte & Touche Fed. PAC Attn: Mr. Wade Williams 555 12th Street NW, 5th Floor Washington,DC 20004-	Occupation	07/07/2000	1,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eli Lilly And Company PAC Attn: Mr. Rich Buckley 555 12th Street - Ste 650 Washington,DC 20004-	Occupation	09/29/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ernst & Young PAC Attn: Ms. K.C. Tominovich 1225 Connecticut Ave Ste 600 Washington,DC 20036-	Occupation	07/11/2000	1,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Morrison Knudsen PAC Attn: Charles W. Simpson 555 13th St NW Ste 410 W Tower Washington,DC 20004-	Occupation	07/20/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Beer Wholesalers Assoc. PAC Attn: Mr. Ron Sarasin 1100 South Washington Street Alexandria,VA 22314-4457	Occupation	07/13/2000	4,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	4,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Beer Wholesalers Assoc. PAC Attn: Mr. Ron Sarasin 1100 South Washington Street Alexandria,VA 22314-4457	Occupation	08/29/2000	5,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	9,000.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Natl. Cable Television Assn. PAC Attn: Henry Plaster 1724 Massachusetts Ave NE Washington,DC 20036-	Occupation	09/13/2000	4,457.82
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	4,457.82	

SUBTOTAL of Receipts This Page (optional)	16,457.82
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Natl. Cable Television Assn. PAC Attn: Henry Plaster 1724 Massachusetts Ave NE Washington,DC 20036-	Occupation	09/13/2000 Event Catering	542.18
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	5,000.00	IN-KIND

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Oral & Maxillofacial Surgery PAC Attn: Ms. Joan Kurcher 1201 Pennsylvania Avenue, NW Washington,DC 20004-	Occupation	09/08/2000	2,500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	2,500.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Realtors PAC Attn: John Sebree 700 11th St, NW Washington,DC 20001-	Occupation	07/18/2000	3,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	3,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Realtors PAC Attn: John Sebree 700 11th St, NW Washington,DC 20001-	Occupation	07/18/2000	1,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	4,000.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Southeastern Lumber Manuf. PAC Attn: Ms. Debbie Burns PO Box 1788 Forest Park,GA 30051-	Occupation	08/23/2000	3,500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	3,500.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
US Team PAC Attn: Todd Walker 1331 F Street NW, Suite 450 Washington,DC 20004-	Occupation	07/07/2000	500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
US Team PAC Attn: Todd Walker 1331 F Street NW, Suite 450 Washington,DC 20004-	Occupation	09/29/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	11,542.18
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and Zip Code Natl. Community Pharmacists Assn. Attn: John M. Rector, Esq. 205 Daingerfield Rd Alexandria,VA 22314-		09/13/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation		
	Aggregate Year-to-Date ->	500.00	
B. Full Name, Mailing Address and Zip Code Amer. Veterinary Medical Assoc. PAC Attn: Dr. Pamela Abney 1101 Vermont Ave NW Ste 710 Washington,DC 20005-		07/11/2000	1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code American Assn. of Orthodontists PAC Attn: Mr. Jim Drinan 401 North Lindbergh Boulevard Saint Louis,MO 63141-		08/29/2000	5,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation		
	Aggregate Year-to-Date ->	5,000.00	
D. Full Name, Mailing Address and Zip Code American Dietetic Association PAC Attn: Todd Ketch 1225 Eye St NW #1250 Washington,DC 20005-		06/29/2000	1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	
E. Full Name, Mailing Address and Zip Code General Dynamics Attn: Ms. Diane Mossler 3190 Fairview Park Drive Falls Church,VA 22042-		09/05/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation		
	Aggregate Year-to-Date ->	500.00	
F. Full Name, Mailing Address and Zip Code Edison Electric PAC Attn: Ms. Hannah Spillman-Simone 701 Pennsylvania Ave. Washington,DC 20004-		09/19/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	
G. Full Name, Mailing Address and Zip Code Employees of Entergy Operations, Inc. Attn: Henry Brown 1776 Eye Street, NW Washington,DC 20006-		07/07/2000	500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Occupation		
	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	9,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Time Warner PAC Attn: Mr. Timothy Boggs 800 Connecticut Ave, NW, Ste 800 Washington,DC 20006-	Occupation	06/29/2000	1,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Automotive Aftermarket PAC Attn: Tyler Wilson 4600 East West Hwy, Suite 300 Bethesda,MD 20814-3415	Occupation	09/07/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Columbia/HCA OGF Attn: Jimmy Frist PO Box 550 Nashville,TN 37202-0550	Occupation	09/14/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Natl. Assn. for Uniformed Services PAC Attn: Colonel Charles Partridge 5535 Hempstead Way Springfield,VA 22151-	Occupation	09/19/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Reliant Energy PAC Attn: Mr. Chris Giblin 1050 17th Street, NW, Suite 1250 Washington,DC 20036-	Occupation	09/21/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Marine Manuf. Assn. PAC Attn: Mr. Nick Blackistone 1819 L Street NW, Suite 700 Washington,DC 20007-	Occupation	09/27/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AFLAC Incorporated PAC Attn: Mr. David Pringle 1932 Wynnton Rd., 16th Floor Columbus,GA 31999-	Occupation	09/13/2000	5,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	5,000.00	

SUBTOTAL of Receipts This Page (optional)	9,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Radiology Advocacy Alliance PAC Attn: Dr. Harvey L. Neiman 1891 Preston White Drive Reston,VA 20191-4397	Occupation	07/26/2000	2,500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	2,500.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Natl. Assn. Of Insurance and Financial Advisors PAC Post Office Box 12012 Falls Church,VA 22042-	Occupation	07/11/2000	500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bank Of America PAC 600 Peachtree Street, NE Atlanta,GA 30308-2214	Occupation	08/01/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Committee To Elect George DeLoach 3546 Georgia Hwy 88 Hephzibah,GA 30815-	Occupation	09/25/2000	25.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	25.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Natl. Apartment Assn PAC 201 North Union Street, Suite 200 Alexandria,VA 22314-	Occupation	09/27/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wachovia GA Employee Attn: Mr. Mack Chandler 191 Peachtree Street, NE Atlanta,GA 30303-1757	Occupation	09/27/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	5,525.00
TOTAL This Period (last page this line number only)	74,525.00

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 14

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
BellSouth PO Box 740144 Atlanta,GA 30374-0144 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	DEPOSIT REFUND	08/08/2000	223.66
	Aggregate Year-to-Date ->		223.66
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
TN Dental Assn. Post Office Box 120166 Nashville,TN 37212- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	REIMBURSE TRAVEL EXPENSE	07/11/2000	793.00
	Aggregate Year-to-Date ->		793.00
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Georgia's Best PAC Post Office Box 1956 Evans,GA 30809- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	REIMBURSE SUPPLIES	07/06/2000	39.26
	Aggregate Year-to-Date ->		39.26
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	1,055.92
TOTAL This Period (last page this line number only)	1,055.92

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 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)
Norwood for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Georgia Bank and Trust 3550 Wheeler Road Augusta,GA 30909-	INTEREST PAID	07/13/2000	1,016.40
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		2,807.55
B. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Merrill Lynch Investment Account 4121 Wilson Boulevard Arlington,VA 22203-	DIVIDEND	07/31/2000	82.38
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->		3,720.65
C. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Merrill Lynch Investment Account 4121 Wilson Boulevard Arlington,VA 22203-	DIVIDEND	08/31/2000	109.64
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->		3,830.29
D. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Merrill Lynch Investment Account 4121 Wilson Boulevard Arlington,VA 22203-	DIVIDEND	09/29/2000	192.77
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->		4,023.06
E. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
		/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
		/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
		/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	1,401.19
TOTAL This Period (last page this line number only)	1,401.19

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AT&T Post Office Box 78522 Phoenix, AZ 85062-8522	Phone Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	18.40
Full Name, Mailing Address and Zip Code AT&T Post Office Box 78522 Phoenix, AZ 85062-8522	Purpose of Disbursement Phone Service Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/01/2000	Amount of Each Disbursement This Period 2.59
Full Name, Mailing Address and Zip Code AT&T Post Office Box 78522 Phoenix, AZ 85062-8522	Purpose of Disbursement Phone Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/13/2000	Amount of Each Disbursement This Period 14.72
Full Name, Mailing Address and Zip Code AT&T Post Office Box 78522 Phoenix, AZ 85062-8522	Purpose of Disbursement Phone Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/27/2000	Amount of Each Disbursement This Period 18.40
Full Name, Mailing Address and Zip Code AT&T Post Office Box 78522 Phoenix, AZ 85062-8522	Purpose of Disbursement Phone Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/20/2000	Amount of Each Disbursement This Period 18.61
Full Name, Mailing Address and Zip Code AT&T Post Office Box 78522 Phoenix, AZ 85062-8522	Purpose of Disbursement Phone Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/26/2000	Amount of Each Disbursement This Period 142.94
Full Name, Mailing Address and Zip Code AT&T Post Office Box 78522 Phoenix, AZ 85062-8522	Purpose of Disbursement Phone Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/13/2000	Amount of Each Disbursement This Period 18.70

SUBTOTAL of Disbursements This Page (optional)	234.36
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AT&T Post Office Box 78522 Phoenix, AZ 85062-8522	Phone Services Disbursement for: ☐ Primary ☐ Genera ☐ Other (specify)	08/24/2000	14.72
AT&T Post Office Box 78522 Phoenix, AZ 85062-8522	Phone Services Disbursement for: ☐ Primary ☐ Genera ☐ Other (specify)	06/29/2000	44.39
Acad. Of General Dentristry 211 East Chicago Avenue Chicago, IL 60611-	List Disbursement for: ☐ Primary ☐ Genera ☐ Other (specify)	09/26/2000	300.00
American Legion 224 D Street, SE Washington, DC 20003-1921	Event Deposit Disbursement for: ☐ Primary ☐ Genera ☐ Other (specify)	07/20/2000	350.00
Aristotle Publishing 205 Pennsylvania Avenue SE Washington, DC 20003	Software Support Disbursement for: ☐ Primary ☐ Genera ☐ Other (specify)	07/07/2000	3,210.00
Aristotle Publishing 205 Pennsylvania Avenue SE Washington, DC 20003-	e-cont Disbursement for: ☐ Primary ☐ Genera ☐ Other (specify)	09/14/2000	22.00
Aristotle Publishing 205 Pennsylvania Avenue SE Washington, DC 20003-	e- cont Disbursement for: ☐ Primary ☐ Genera ☐ Other (specify)	09/14/2000	7.00

SUBTOTAL of Disbursements This Page (optional)	3,948.12
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Aristotle Publishing 205 Pennsylvania Avenue SE Washington, DC 20003-	Voter File Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	06/10/2000	4,815.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bank of America Visa Post Office Box 5270 Carol Stream, IL 60197-	Car Rental Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/22/2000	202.83
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bank of America Visa Post Office Box 5270 Carol Stream, IL 60197-	Hotel Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/22/2000	304.50
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BellAtlantic Post Office Box 646 Baltimore, MD 21265-0646	Phone Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/20/2000	61.21
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BellSouth PO Box 740144 Atlanta, GA 30374-0144	Phone Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	06/29/2000	105.63
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BellSouth PO Box 740144 Atlanta, GA 30374-0144	Deposit Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/17/2000	240.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BellSouth PO Box 740144 Atlanta, GA 30374-0144	Deposit Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/17/2000	340.00

SUBTOTAL of Disbursements This Page (optional)	6,369.17
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BellSouth PO Box 740144 Atlanta, GA 30374-0144	Phone Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/13/2000	109.15
BellSouth PO Box 740144 Atlanta, GA 30374-0144	Phone Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	105.63
BellSouth PO Box 740144 Atlanta, GA 30374-0144	Phone Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/20/2000	106.26
BellSouth PO Box 740144 Atlanta, GA 30374-0144	Phone Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/27/2000	105.63
Blanchard and Calhoun Commerical Ms. Pam Bragg 699 Broad Street Augusta, GA 30901-	Lease Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/02/2000	560.00
Blanchard and Calhoun Commerical Ms. Pam Bragg 699 Broad Street Augusta, GA 30901-	Lease Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/07/2000	560.00
Blanchard and Calhoun Commerical Ms. Pam Bragg 699 Broad Street Augusta, GA 30901-	Lease Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/11/2000	560.00

SUBTOTAL of Disbursements This Page (optional)	2,106.69
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Nancy Bobbitt 1572 Waterford Drive Evans, GA 30809	Voter list Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/16/2000	583.25 IN KIND
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
COMCAST P.O. Box 740523 Atlanta, GA 30374-0523	Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/11/2000	32.85
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
COMCAST P.O. Box 740523 Atlanta, GA 30374-0523	Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/01/2000	70.66
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Campaign Graphics, Corp. 1009 SW 17th Street Ocala, FL 34474-3529	Yard Signs Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/11/2000	4,065.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Capitol Hill Club 300 First Street South East Washington, DC 20515-	Event Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/12/2000	1,563.87
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Capitol Hill Club 300 First Street South East Washington, DC 20515-	Meals Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	34.84
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express Corporation Box 1140 Memphis, TN 38101-1140	Shipping Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/13/2000	72.95

SUBTOTAL of Disbursements This Page (optional)	6,423.32
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express Corporation Box 1140 Memphis, TN 38101-1140	Shipping Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/20/2000	49.66
Federal Express Corporation Box 1140 Memphis, TN 38101-1140	Shipping Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	06/29/2000	53.82
Federal Express Corporation Box 1140 Memphis, TN 38101-1140	Shipping Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	53.77
Federal Express Corporation Box 1140 Memphis, TN 38101-1140	Shipping Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/27/2000	80.74
Franklin's Printing 3830 Washington Road Augusta, GA 30907-	Printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/27/2000	650.36
Franklin's Printing 3830 Washington Road Augusta, GA 30907-	Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/13/2000	38.52
Franklin's Printing 3830 Washington Road Augusta, GA 30907-	Printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/27/2000	667.03

SUBTOTAL of Disbursements This Page (optional)	1,601.50
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Franklin's Printing 3830 Washington Road Augusta, GA 30907-	Printing and Business Cards Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	696.82
Georgia Dept. of Revenue P.O. Box 740387 Atlanta, GA 30374-	Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/27/2000	177.70
Georgia Republican Party 5600 Roswell Road NE Suite E-200 Atlanta, GA 30342-	Deposit Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	06/29/2000	100.00
Hall Marketing PO Box 211142 Augusta, GA 30917-	Media Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/08/2000	600.00
Hall Marketing PO Box 211142 Augusta, GA 30917-	Media Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/28/2000	300.00
Internal Revenue Service Internal Revenue Service Center Atlanta, GA 39901-	Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/15/2000	650.08
Internal Revenue Service Internal Revenue Service Center Atlanta, GA 39901-	Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/13/2000	720.52

SUBTOTAL of Disbursements This Page (optional)	3,245.12
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Internal Revenue Service Internal Revenue Service Center Atlanta, GA 39901-	Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/13/2000	377.20
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
KMC Telecom, Inc. Post Office Box 932037 Atlanta, GA 31193-2037	Phone Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/11/2000	246.05
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
KMC Telecom, Inc. Post Office Box 932037 Atlanta, GA 31193-2037	Phone Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/01/2000	293.63
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
KMC Telecom, Inc. Post Office Box 932037 Atlanta, GA 31193-2037	Phone Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	06/29/2000	249.62
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kelly Killian 4018 Dowling Drive Martinez, GA 30907-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	06/29/2000	506.67
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kelly Killian 4018 Dowling Drive Martinez, GA 30907-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/15/2000	506.67
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kelly Killian 4018 Dowling Drive Martinez, GA 30907-	Reimburse Mileage & Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/30/2000	215.47

SUBTOTAL of Disbursements This Page (optional)	2,396.31
TOTAL This Period (last page this line number only)	

SCHEDULE B ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kelly Killian 4018 Dowling Drive Martinez, GA 30907-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/29/2000	506.67
Kelly Killian 4018 Dowling Drive Martinez, GA 30907-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/13/2000	506.67
Kelly Killian 4018 Dowling Drive Martinez, GA 30907-	Payroll Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	08/30/2000	506.67
Kelly Killian 4018 Dowling Drive Martinez, GA 30907-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/13/2000	506.67
Kelly Killian 4018 Dowling Drive Martinez, GA 30907-	Reimburse Mileage and Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/29/2000	174.02
Kelly Killian 4018 Dowling Drive Martinez, GA 30907-	Payroll Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	07/27/2000	506.67
Brian Laserna 2422 Washington Rd. Augusta, GA 30909-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/13/2000	105.46

SUBTOTAL of Disbursements This Page (optional)	2,812.61
TOTAL This Period (Last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Brian Laserna 2422 Washington Rd. Augusta, GA 30904-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/27/2000	105.44
Brian Laserna 2422 Washington Rd. Augusta, GA 30904-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/13/2000	105.44
Brian Laserna 2422 Washington Rd. Augusta, GA 30904-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	06/29/2000	105.44
Brian Laserna 2422 Washington Rd. Augusta, GA 30904-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/30/2000	105.44
Brian Laserna 2422 Washington Rd. Augusta, GA 30904-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/15/2000	105.44
Brian Laserna 2422 Washington Rd. Augusta, GA 30904-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/29/2000	105.44
Legion Insurance Company Carraway, Cohen & Channel Post Office Box 15087 Augusta, GA 30919-	Workers Comp Ins Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	06/29/2000	213.00

SUBTOTAL of Disbursements This Page (optional)	845.64
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Laura Loftis 2140 Cumming Rd. Augusta, GA 30904-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/30/2000	947.58
Laura Loftis 2140 Cumming Rd. Augusta, GA 30904-	Reimburse Mileage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/30/2000	90.11
Laura Loftis 2140 Cumming Rd. Augusta, GA 30904-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/29/2000	947.58
Laura Loftis 2140 Cumming Rd. Augusta, GA 30904-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/27/2000	728.87
MAK Direct Inc. 7759 Trevino Lane Falls Church, VA 22043-	Phone Survey Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/13/2000	27,604.84
Master Mailing Svc. 1238 Fenwick Street PO Box 10023 Augusta, GA 30903-2623	Mail Processing Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/16/2000	1,380.99
Master Mailing Svc. 1238 Fenwick Street PO Box 10023 Augusta, GA 30903-2623	Mail Processing Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/13/2000	1,390.21

SUBTOTAL of Disbursements This Page (optional)	33,090.18
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Master Mailing Svc. 1238 Fenwick Street PO Box 10023 Augusta, GA 30903-2623	Mail Processing Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/23/2000	2,280.02
Full Name, Mailing Address and Zip Code Master Mailing Svc. 1238 Fenwick Street PO Box 10023 Augusta, GA 30903-2623	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/18/2000	Amount of Each Disbursement This Period 419.35
Full Name, Mailing Address and Zip Code Master Mailing Svc. 1238 Fenwick Street PO Box 10023 Augusta, GA 30903-2623	Purpose of Disbursement Mail Processing Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/25/2000	Amount of Each Disbursement This Period 1,436.65
Full Name, Mailing Address and Zip Code Mr. Alex McKagen 4307 Hardy Road Martinez, GA 30907-	Purpose of Disbursement Repairs Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/15/2000	Amount of Each Disbursement This Period 220.00
Full Name, Mailing Address and Zip Code NRCC 320 1st St SE Washington, DC 20003-1838	Purpose of Disbursement Conference Fee Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/20/2000	Amount of Each Disbursement This Period 175.00
Full Name, Mailing Address and Zip Code Natl. Cable Television Assn. PAC Attn: Henry Plaster 1724 Massachusetts Ave NW Washington, DC 20036-	Purpose of Disbursement Event Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/13/2000	Amount of Each Disbursement This Period 542.18 IN KIND
Full Name, Mailing Address and Zip Code NetWorks 615 Jefferson Topeka, KS 66607-	Purpose of Disbursement Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/24/2000	Amount of Each Disbursement This Period 50.00

SUBTOTAL of Disbursements This Page (optional)	5,123.20
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NetWorks 616 Jefferson Topeka, KS 66607-	Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/13/2000	50.00
Full Name, Mailing Address and Zip Code NetWorks 616 Jefferson Topeka, KS 66607-	Purpose of Disbursement Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/27/2000	Amount of Each Disbursement This Period 50.00
Full Name, Mailing Address and Zip Code NetWorks 616 Jefferson Topeka, KS 66607-	Purpose of Disbursement Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/27/2000	Amount of Each Disbursement This Period 50.00
Full Name, Mailing Address and Zip Code Charlie Norwood 3914 Mullikin Road Evans, GA 30809-9521	Purpose of Disbursement Reimburse Mileage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/13/2000	Amount of Each Disbursement This Period 120.93
Full Name, Mailing Address and Zip Code Dan O'Connor 142 Amherst Place NW Atlanta, GA 30327-	Purpose of Disbursement Consulting Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 250.00
Full Name, Mailing Address and Zip Code OfficeMax 596 Bobby Jones Expressway Augusta, GA 30907-	Purpose of Disbursement Event Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/29/2000	Amount of Each Disbursement This Period 36.73
Full Name, Mailing Address and Zip Code OfficeMax 596 Bobby Jones Expressway Augusta, GA 30907-	Purpose of Disbursement Event Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/27/2000	Amount of Each Disbursement This Period 96.28

SUBTOTAL of Disbursements This Page (optional)	653.94
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
OfficeMax 596 Bobby Jones Expressway Augusta, GA 30907-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/11/2000	59.46
Full Name, Mailing Address and Zip Code Tanya Reading 563 Live Oak Court Martinez, GA 30907-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	06/29/2000	150.97
Full Name, Mailing Address and Zip Code Tanya Reading 563 Live Oak Court Martinez, GA 30907-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/13/2000	150.97
Full Name, Mailing Address and Zip Code Savannah Rapids Pavillion PO Box 498 Evans, GA 30809-0498	Purpose of Disbursement Room Deposit Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/17/2000	200.00
Full Name, Mailing Address and Zip Code Savannah Rapids Pavillion PO Box 498 Evans, GA 30809-0498	Purpose of Disbursement Event Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/05/2000	585.00
Full Name, Mailing Address and Zip Code Sonny's BBQ 2201 Veteran's Boulevard Dublin, GA 31021-	Purpose of Disbursement Event Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/22/2000	1,606.01
Full Name, Mailing Address and Zip Code Strategic Perception, Inc. 2185 Broadview Terrace Los Angeles, CA 90068-	Purpose of Disbursement Media Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/27/2000	3,227.07

SUBTOTAL of Disbursements This Page (optional)	5,979.49
TOTAL This Period (last page this line number only)	

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

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SunTrust Bank 2901 Washington Road Augusta, GA 30909-	Airfares, Hotel and Equipment Repai Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/19/2000	4,059.56
SunTrust Bank 2901 Washington Road Augusta, GA 30909-	Airfares, Lodging, Meals, Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/18/2000	3,160.49
SunTrust Bank 2901 Washington Road Augusta, GA 30909-	Airfares, Flowers Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/17/2000	1,026.37
The Stoneridge Group Attn: Jay Williams 250 Kaolin Court Alpharetta, GA 30022-	Consulting Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/11/2000	350.00
The Terrence Group 201 North Union Street, Ste 410 Alexandria, VA 22314-	Research Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/27/2000	7,049.00
TonerCharge 106 Sweetwater Road North Augusta, SC 29841-9004	Cartridges Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	196.78
TonerCharge 106 Sweetwater Road North Augusta, SC 29841-9004	Repairs Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/13/2000	70.50

SUBTOTAL of Disbursements This Page (optional)	15,912.40
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Travelers Commercial Insurance P. O. Box 42527 Philadelphia, PA 19107-2527	Insurance Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	06/29/2000	333.00
United States Postal Service 125 Commercial Bl. Martinez, GA 30907-	Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/11/2000	1,190.00
United States Postal Service 125 Commercial Bl. Martinez, GA 30907-	Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/18/2000	990.00
United States Postal Service 125 Commercial Bl. Martinez, GA 30907-	Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/10/2000	660.00
United States Postal Service 125 Commercial Bl. Martinez, GA 30907-	Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	60.00
Wilmot Printing 1221-A Flowing Wells Road Augusta, GA 30909-	Printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/27/2000	2,014.28
Wilmot Printing 1221-A Flowing Wells Road Augusta, GA 30909-	Printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	06/29/2000	689.19

SUBTOTAL of Disbursements This Page (optional)	5,936.47
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 17

NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wilmot Printing 1221-A Flowing Wells Road Augusta, GA 30909-	Printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/11/2000	2,014.28
Wilmot Printing 1221-A Flowing Wells Road Augusta, GA 30909-	Printing and Invitations Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/13/2000	674.74
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	

SUBTOTAL of Disbursements This Page (optional)	2,689.02
TOTAL This Period (last page this line number only)	99,070.13

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
Norwood for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Russ Francis For Congress Post Office Box 1226 Kailua, HI 96734-	Excess Campaign Funds Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	09/14/2000	1,000.00
Mattingly for Senate 443 East Paces Ferry Road Atlanta, GA 30305-	Excess Campaign Funds Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	09/13/2000	1,000.00
NRCC 320 1st St SE Washington, DC 20003-1839	Excess Contribution Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	08/29/2000	25,000.00
Sunny Warren for US Congress Post Office Box 2033 Norcross, GA 30071-	Excess Campaign Funds Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	09/13/2000	1,000.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	28,000.00
TOTAL This Period (last page this line number only)	28,000.00

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
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☐	Received from the House office of Records and Registration	Date of Receipt
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D.G.
PREPARER

10-22-00
DATE PREPARED

(6/2000)