

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO BOX 386
 Check if different than previously reported. (ACC)
GLOUCESTER VA 23061

2. **FEC IDENTIFICATION NUMBER** C00440354
CITY **STATE** **ZIP CODE**
STATE DISTRICT VA 01
3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 11 17 2007 in the State of VA
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 10 01 2007 through 11 21 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Roland M. Santos

Signature of Treasurer Electronically Filed by Roland M. Santos Date 01 09 2008

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

CATESBY JONES FOR CONGRESS

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	1

D	D
2	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	20549.00	20549.00
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	20549.00	20549.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	51142.75	51142.75
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	51142.75	51142.75
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6.25	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	30600.00	

For further information contact:

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
CATESBY JONES FOR CONGRESS

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	1

D	D
2	1

Y	Y	Y	Y
2	0	0	7

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

17450.00

17450.00

(ii) Unitemized.....

2099.00

2099.00

(iii) TOTAL of contributions

19549.00

19549.00

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

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

1000.00

1000.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

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

20549.00

20549.00

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

0.00

0.00

13. LOANS

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

30600.00

30600.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

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

30600.00

30600.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

0.00

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

51149.00

51149.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	51142.75	51142.75
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	51142.75	51142.75

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	51149.00
25. SUBTOTAL (add Line 23 and Line 24).....	51149.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	51142.75
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6.25

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)
CATESBY JONES FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Lewis L. Avery		Date of Receipt
	Mailing Address 1519 Bolling Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7
	City	State	Zip Code
	Norfolk	VA	23508
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4119
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2007		Election Cycle-to-Date ▼	<input type="text"/> 300.00
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input checked="" type="checkbox"/> Other (specify) ▼ Convention			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Mary Elizabeth Clay Blee		Date of Receipt
	Mailing Address 788 Cynthuana Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 3 0 / 2 0 0 7
	City	State	Zip Code
	Paris	KY	40361
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4136
Name of Employer Housewife		Occupation Housewife	Amount of Each Receipt this Period
Receipt For: 2007		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input checked="" type="checkbox"/> Other (specify) ▼ Convention			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Wesley C. Boatwright		Date of Receipt
	Mailing Address 4623 Reservoir Road NW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 3 0 / 2 0 0 7
	City	State	Zip Code
	Washington	DC	20007
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4140
Name of Employer Self employed		Occupation Real estate agent	Amount of Each Receipt this Period
Receipt For: 2007		Election Cycle-to-Date ▼	<input type="text"/> 500.00
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input checked="" type="checkbox"/> Other (specify) ▼ Convention			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1800.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CATESBY JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
 Amelia F. Clay

Mailing Address 616 Cynthiana Road

City Paris State KY Zip Code 40361

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

Name of Employer Retired Occupation Retired

Receipt For: 2007
 Primary General
 Other (specify) Convention

Election Cycle-to-Date 250.00

Date of Receipt 11 / 15 / 2007
Transaction ID: SA11AI.4172
 Amount of Each Receipt this Period 250.00

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

B. Full Name (Last, First, Middle Initial)
 Catesby W. Clay

Mailing Address 636 Cynthuama Road

City Paris State KY Zip Code 40361

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

Name of Employer Self employed Occupation Farmer

Receipt For: 2007
 Primary General
 Other (specify) Convention

Election Cycle-to-Date 300.00

Date of Receipt 11 / 15 / 2007
Transaction ID: SA11AI.4170
 Amount of Each Receipt this Period 300.00

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

C. Full Name (Last, First, Middle Initial)
 Daniel G. Hanks

Mailing Address 3715 Bridgewater Drive

City Williamsburg State VA Zip Code 20188

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

Name of Employer Self employed Occupation Consultant

Receipt For: 2007
 Primary General
 Other (specify) Convention

Election Cycle-to-Date 300.00

Date of Receipt 10 / 31 / 2007
Transaction ID: SA11AI.4134
 Amount of Each Receipt this Period 300.00

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

SUBTOTAL of Receipts This Page (optional) **850.00**

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
CATESBY JONES FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Adrienne Ryder-Cook Joseph		Date of Receipt
	Mailing Address P O Box 1878		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 3 0 / 2 0 0 7
	City	State	Zip Code
	Gloucester	VA	23061
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.4106
Name of Employer Self employed		Occupation Realtor	Amount of Each Receipt this Period
Receipt For: 2007		Election Cycle-to-Date ▼	<input type="text"/> 2000.00
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input checked="" type="checkbox"/> Other (specify) ▼ Convention			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Alice Clark Krebs		Date of Receipt
	Mailing Address 213 Warehams Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 3 0 / 2 0 0 7
	City	State	Zip Code
	Williamsburg	VA	23185
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.4160
Name of Employer Housewife		Occupation Housewife	Amount of Each Receipt this Period
Receipt For: 2007		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input checked="" type="checkbox"/> Other (specify) ▼ Convention			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Timothy M. Murphy		Date of Receipt
	Mailing Address 128 Edward Wakefield		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7
	City	State	Zip Code
	Williamsburg	VA	23185
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.4123
Name of Employer Self employed		Occupation Lawyer	Amount of Each Receipt this Period
Receipt For: 2007		Election Cycle-to-Date ▼	<input type="text"/> 250.00
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input checked="" type="checkbox"/> Other (specify) ▼ Convention			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3250.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
CATESBY JONES FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) C.T. Peterson		Date of Receipt
	Mailing Address 11010 NW 30th Street Suite 104		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 3 1 / 2 0 0 7
	City	State	Zip Code
	Doral	FL	33172
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4115
Name of Employer Housewife		Occupation Housewife	Amount of Each Receipt this Period
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention		Election Cycle-to-Date ▼	<input type="text"/> 2000.00
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	

B.	Full Name (Last, First, Middle Initial) Sterrett C. Peterson		Date of Receipt
	Mailing Address 805 South Fairway Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 3 0 / 2 0 0 7
	City	State	Zip Code
	Glensdale	PA	19038
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4130
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	

C.	Full Name (Last, First, Middle Initial) Roland M. Santos		Date of Receipt
	Mailing Address 52 East Market Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 3 0 / 2 0 0 7
	City	State	Zip Code
	Harrisonburg	VA	22801
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4155
Name of Employer Self employed		Occupation Lawyer	Amount of Each Receipt this Period
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention		Election Cycle-to-Date ▼	<input type="text"/> 450.00
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	

SUBTOTAL of Receipts This Page (optional)	3450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 22
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CATESBY JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Parks D. Shackelford

Mailing Address 300 North Monroe Street

City Arlington State VA Zip Code 22207

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

Name of Employer Florida Crystals Occupation Vice President

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2007
Transaction ID: SA11AI.4128
 Amount of Each Receipt this Period 250.00

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

B. Full Name (Last, First, Middle Initial)
Virginia L. Shore

Mailing Address 2344 California Street NW

City Washington State DC Zip Code 20008

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

Name of Employer Housewife Occupation Housewife

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2007
Transaction ID: SA11AI.4152
 Amount of Each Receipt this Period 300.00

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

C. Full Name (Last, First, Middle Initial)
Shawn Smeallie

Mailing Address 1310 Bishop Lane

City Alexandria State VA Zip Code 22302

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

Name of Employer American Continental Group Occupation Lobbyist

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 500.00

Date of Receipt 10 / 30 / 2007
Transaction ID: SA11AI.4142
 Amount of Each Receipt this Period 500.00

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

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 22
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CATESBY JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Devin S. Standard

Mailing Address 2532 Dallas Creek Court

City Ft. Collins State CO Zip Code 80528

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

Name of Employer Smith & Wesson Occupation VP of Development

Receipt For: 2007
 Primary General
 Other (specify) Convention

Election Cycle-to-Date **250.00**

Date of Receipt **10 / 30 / 2007**

Transaction ID: SA11AI.4162

Amount of Each Receipt this Period **250.00**

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

B. Full Name (Last, First, Middle Initial)
Mary Montague Stephens

Mailing Address 116 Longwood Drive

City Newport News State VA Zip Code 23506

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

Name of Employer Retired Occupation Retired

Receipt For: 2007
 Primary General
 Other (specify) Convention

Election Cycle-to-Date **1000.00**

Date of Receipt **10 / 30 / 2007**

Transaction ID: SA11AI.4121

Amount of Each Receipt this Period **1000.00**

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

C. Full Name (Last, First, Middle Initial)
Ann F. Stifel

Mailing Address 166 Purton Lane

City Gloucester State VA Zip Code 23061

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

Name of Employer Retired Occupation Retired

Receipt For: 2007
 Primary General
 Other (specify) Convention

Election Cycle-to-Date **500.00**

Date of Receipt **11 / 01 / 2007**

Transaction ID: SA11AI.4164

Amount of Each Receipt this Period **500.00**

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

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

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 22
(check only one)

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

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NAME OF COMMITTEE (In Full)
CATESBY JONES FOR CONGRESS

A.

Full Name (Last, First, Middle Initial) Arnold Stifel		Date of Receipt MM / DD / YYYY 10 / 30 / 2007
Mailing Address The Rook 15005 Dover Road		Transaction ID: SA11AI.4150
City Glyndon	State MD	Zip Code 21071
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer Norco Energy	Occupation Commodities Broker	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 2300.00	

B.

Full Name (Last, First, Middle Initial) Richard T. Williams		Date of Receipt MM / DD / YYYY 10 / 30 / 2007
Mailing Address P O Box 1852		Transaction ID: SA11AI.4132
City Middleburg	State VA	Zip Code 20118
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self employed	Occupation Contractor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 500.00	

C.

Full Name (Last, First, Middle Initial) Curtin Winsor, Jr.		Date of Receipt MM / DD / YYYY 10 / 30 / 2007
Mailing Address 1183 Kirby Road		Transaction ID: SA11AI.4138
City McLean	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self employed	Occupation Business/Retired Ambassador	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	3300.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 12 / 22
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CATESBY JONES FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Curtin Winsor, III

Mailing Address 1453 Kirby Road

City State Zip Code
McLean VA 22101

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

Name of Employer Occupation
Bank of Georgetown Banker

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼
2000.00

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

Transaction ID: SA11AI.4146

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	17450.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 22
(check only one)

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

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NAME OF COMMITTEE (In Full)
CATESBY JONES FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)

Mailing Address 1050 CONNECTICUT AVE NW SUITE 1200

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00359075

Name of Employer Occupation

Receipt For: 2007
 Primary General
 Other (specify) ▼
Convention

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2007

Transaction ID: SA11C.4126

Amount of Each Receipt this Period
1000.00

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

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

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

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

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NAME OF COMMITTEE (In Full)
CATESBY JONES FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
CATESBY BAYTOP JONES

Mailing Address PO BOX 386

City State Zip Code
GLOUCESTER VA 23061

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

Name of Employer Occupation

Receipt For: 2007
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **30000.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

Transaction ID: SA13A.4100

Amount of Each Receipt this Period
30000.00

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

B.

Full Name (Last, First, Middle Initial)
CATESBY BAYTOP JONES

Mailing Address PO BOX 386

City State Zip Code
GLOUCESTER VA 23061

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

Name of Employer Occupation

Receipt For: 2007
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **30600.00**

Date of Receipt

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

Transaction ID: SA13A.4177

Amount of Each Receipt this Period
600.00

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

SUBTOTAL of Receipts This Page (optional)	30600.00
TOTAL This Period (last page this line number only)	30600.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CATESBY JONES FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) 1st District Republicans Mailing Address 115 East Grace City Richmond State VA Zip Code 23219 Purpose of Disbursement Candidate Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention	Transaction ID: SB17.4178 Date of Disbursement 11 / 09 / 2007 Amount of Each Disbursement this Period 543.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) 1st District Republicans Mailing Address 115 East Grace City Richmond State VA Zip Code 23219 Purpose of Disbursement Convention Room Rental Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention	Transaction ID: SB17.4180 Date of Disbursement 11 / 09 / 2007 Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Randy Brown Mailing Address 3917 Dale Road City Medesa State CA Zip Code 39556 Purpose of Disbursement Strategic planning consultant fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention	Transaction ID: SB17.4181 Date of Disbursement 11 / 11 / 2007 Amount of Each Disbursement this Period 4162.23 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	4905.63
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CATESBY JONES FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Cheese Shop

Transaction ID: SB17.4189
Date of Disbursement

Mailing Address Merchant's Sqaure

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

City Williamsburg State VA Zip Code 23185

Amount of Each Disbursement this Period

351.87

Purpose of Disbursement
Catering

Category/ Type

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

Candidate Name

Office Sought: House Senate President

Disbursement For: 2007 Primary General Other (specify) ▼

State: District:

Convention

B.

Full Name (Last, First, Middle Initial)
Nicholas Dudley

Transaction ID: SB17.4199
Date of Disbursement

Mailing Address 614 Percival Street NW

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

City Olympia State WA Zip Code 98502

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Website design

Category/ Type

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

Candidate Name

Office Sought: House Senate President

Disbursement For: 2007 Primary General Other (specify) ▼

State: District:

Convention

C.

Full Name (Last, First, Middle Initial)
Nicholas Dudley

Transaction ID: SB17.4185
Date of Disbursement

Mailing Address 614 Percival Street NW

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

City Olympia State WA Zip Code 98502

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
Video presentation

Category/ Type

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

Candidate Name

Office Sought: House Senate President

Disbursement For: 2007 Primary General Other (specify) ▼

State: District:

Convention

SUBTOTAL of Disbursements This Page (optional)

1051.87

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 22

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

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NAME OF COMMITTEE (In Full)
CATESBY JONES FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Adam Holloway Mailing Address House of Commons SWLA Oaa City London England State Zip Code Purpose of Disbursement Convention Speaker Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention	Transaction ID: SB17.4207 Date of Disbursement 11 / 14 / 2007 Amount of Each Disbursement this Period 2248.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Political Compliance Services Inc. Mailing Address P O Box 373 City Fairfax Station State VA Zip Code 22039 Purpose of Disbursement Consultant:Compliance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention	Transaction ID: SB17.4183 Date of Disbursement 11 / 12 / 2007 Amount of Each Disbursement this Period 2240.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Republican Party of Virginia Mailing Address 115 East Grace Street City Richmond State VA Zip Code 23219 Purpose of Disbursement Candidate Registration Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention	Transaction ID: SB17.4195 Date of Disbursement 11 / 02 / 2007 Amount of Each Disbursement this Period 3304.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

7792.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 18 / 22

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

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NAME OF COMMITTEE (In Full)
CATESBY JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Sir Speedy Printing of Williamsburg Mailing Address 240 McLaws Circle City Williamsburg State VA Zip Code 23185 Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention	Transaction ID: SB17.4197 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 7
	Amount of Each Disbursement this Period 2924.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial) Sullivan & Associates PLLC Mailing Address 601 Pennsylvania Avenue NW Suite 900 City Washington State DC Zip Code 20004 Purpose of Disbursement Legal fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention	Transaction ID: SB17.4193 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 7
	Amount of Each Disbursement this Period 4000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial) The Stewart Group Mailing Address P O Box 26508 City Raleigh State NC Zip Code 27011 Purpose of Disbursement Strategic planning consultant fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention	Transaction ID: SB17.4191 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 7
	Amount of Each Disbursement this Period 15000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	21924.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CATESBY JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) The Stewart Group Mailing Address P O Box 26508 City Raleigh State NC Zip Code 27011 Purpose of Disbursement Strategic planning consultant fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention	Transaction ID: SB17.4200 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 7 Amount of Each Disbursement this Period 15000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/Type
B. Full Name (Last, First, Middle Initial) Tidewater Emblems Ltd. Mailing Address P O Box 23454 City Virginia Beach State VA Zip Code 23454 Purpose of Disbursement Decals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention	Transaction ID: SB17.4187 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 7 Amount of Each Disbursement this Period 390.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/Type

SUBTOTAL of Disbursements This Page (optional) ►

15390.00

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

51063.50

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 20 / 22
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
CATESBY JONES FOR CONGRESS

Transaction ID: SC/10.4100

LOAN SOURCE Full Name (Last, First, Middle Initial) CATESBY BAYTOP JONES	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention
Mailing Address PO BOX 386	
City GLOUCESTER State VA ZIP Code 23061	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	0.00	30000.00

TERMS

Date Incurred M M D D Y Y Y Y 1 0 3 0 2 0 0 7	Date Due ON DEMAND	Interest Rate 5% % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	-----------------------	-----------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	30000.00
TOTALS This Period (last page in this line only)00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 21 / 22
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
CATESBY JONES FOR CONGRESS

Transaction ID: SC/10.4177

LOAN SOURCE Full Name (Last, First, Middle Initial) CATESBY BAYTOP JONES	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention
Mailing Address PO BOX 386	
City GLOUCESTER State VA ZIP Code 23061	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
600.00	0.00	600.00

TERMS

Date Incurred M M 1 1 D D 1 4 Y Y Y Y 2 0 0 7	Date Due ON DEMAND	Interest Rate 5% % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	-----------------------	-----------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	600.00
TOTALS This Period (last page in this line only)	30600.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Image# 28930026558

Form/Schedule: **F3A**
Transaction ID:

This amendment is filed in response to the Commission's letter dated January 28, 2008. The purpose fields in question have been amended to reflect the Commission's concerns.
