

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
Michael Burgess for Congress

ADDRESS (number and street) PO Box 2334
 Check if different than previously reported. (ACC)
Denton TX 76202 2334

2. **FEC IDENTIFICATION NUMBER** C00372532
CITY STATE ZIP CODE STATE DISTRICT
TX 26
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 [] [] [] in the State of []
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [] [] [] in the State of []

5. Covering Period 07 01 2005 through 09 30 2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Robert Sherman
Signature of Treasurer Electronically Filed by Robert Sherman Date 01 30 2007

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

Michael Burgess for Congress

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	5

	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)).....	82742.00	298948.35
(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)).....	82742.00	298948.35
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	50193.07	217847.17
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	48.60
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	50193.07	217798.57
8. Cash on Hand at Close of Reporting Period (from Line 27).....	172656.55	
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).....	0.00	

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 02/2003)

Write or Type Committee Name
Michael Burgess for Congress

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	5

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).....

22025.00

86938.35

(ii) Unitemized.....

3717.00

7912.00

(iii) TOTAL of contributions

25742.00

94850.35

from individuals..... ▶

0.00

98.00

(b) Political Party Committees.....

57000.00

204000.00

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

82742.00

298948.35

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

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

0.00

0.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

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

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

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

0.00

48.60

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)..... ▶

82742.00

298996.95

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	50193.07	217847.17
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.....	8000.00	55300.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	58193.07	273147.17

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	148107.62
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	82742.00
25. SUBTOTAL (add Line 23 and Line 24).....	230849.62
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	58193.07
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	172656.55

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 61
	<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Louis Barnett

Mailing Address P.O. Box 11739

City State Zip Code
Ft. Worth TX 76110

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

Name of Employer Retired Occupation Chemical Engineer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 05 / 2005

Transaction ID: A-C5510

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)
Susan R. Bailey

Mailing Address 6800 Bellaire Court

City State Zip Code
Fort Worth TX 76132

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

Name of Employer Self-employed Occupation Allergist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 08 / 2005

Transaction ID: A-C5509

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Mr. Phil Diebel

Mailing Address 3113 Triple Crown Court

City State Zip Code
Denton TX 76210-8525

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

Name of Employer University of North Texas Occupation Vice President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 08 / 2005

Transaction ID: A-C5511

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)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 61
	<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Bob Gates

Mailing Address 4226 I -35 North

City State Zip Code
Denton TX 76207

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

Name of Employer Lynx Oil Company Occupation Business Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 12 / 2005

Transaction ID: A-C5516

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Wallace Downey

Mailing Address 1353 Woodbrook Lane

City State Zip Code
Southlake TX 76092-4842

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

Name of Employer Downey Publishing Occupation Chief Executive Officer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 12 / 2005

Transaction ID: A-C5514

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Mrs. Marlene McBride

Mailing Address 2500 Deer Run Road

City State Zip Code
Aubrey TX 76227-4012

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

Name of Employer Self-employed Occupation Registered Nurse

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 12 / 2005

Transaction ID: A-C5515

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **1250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 61
	<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Gary Strong

Mailing Address 801 Seventh Ave.

City State Zip Code
Fort Worth TX 76104

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

Name of Employer Occupation
Cook Childrens Medical Ce- Physician
nter

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 12 / 2005

Transaction ID: A-C5518

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)
James Toal

Mailing Address 341 Nursery Lane

City State Zip Code
Fort Worth TX 76114

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

Name of Employer Occupation
Gideon Toal, Inc. City Planner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 12 / 2005

Transaction ID: A-C5519

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Mrs. Virginia Tigue

Mailing Address 4415 Meandering Way

City State Zip Code
Colleyville TX 76034-4513

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

Name of Employer Occupation
Tigue Properties Realtor

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

300.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2005

Transaction ID: A-C5517

Amount of Each Receipt this Period
250.00

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 61
	<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Hon. Michael Compton

Mailing Address 2860 Fm 3092

City State Zip Code
Gainesville TX 76240-7778

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

Name of Employer Cooke County, TX Occupation Sheriff

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 20 / 2005

Transaction ID: A-C5530

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)
Dr. Eric Coligado

Mailing Address 350 Westpark Way Suite 121

City State Zip Code
Euless TX 76040-3732

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

Name of Employer Self-employed Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 25 / 2005

Transaction ID: A-C5528

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Mac Churchill

Mailing Address 325 N. Bailey

City State Zip Code
Fort Worth TX 76107

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

Name of Employer Mac Churchill Acura Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 27 / 2005

Transaction ID: A-C5524

Amount of Each Receipt this Period
250.00

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 61
	<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Newton Galusha

Mailing Address 3920 Treemont Circle

City State Zip Code
Colleyville TX 76034

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

Name of Employer Occupation
NETIMA, LLP Physician

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 27 / 2005

Transaction ID: A-C5523

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)
Hon. Alicia McGlinchey

Mailing Address 3825 Welwyn Way Drive

City State Zip Code
Bedford TX 76021-2507

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

Name of Employer Occupation
Retired Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 27 / 2005

Transaction ID: A-C5525

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Mr. David Boston

Mailing Address 2501 Spring Mountain Road

City State Zip Code
Aubrey TX 76227-7070

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

Name of Employer Occupation
FEMA Administration

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 28 / 2005

Transaction ID: A-C5547

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Richard Burgess

Mailing Address 4426 Warschun Road

City State Zip Code
Aubrey TX 76227-4101

FEC ID number of contributing federal political committee. C

Name of Employer ProPath Assoc. Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
07 / 28 / 2005

Transaction ID: A-C5550

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)
Mr. Rick Freeman

Mailing Address 11673 Fm 2153

City State Zip Code
Sanger TX 76266-6942

FEC ID number of contributing federal political committee. C

Name of Employer Southwest Airlines Occupation Pilot

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
07 / 28 / 2005

Transaction ID: A-C5548

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Dr. Mark Messing

Mailing Address 1505 Coventry Lane

City State Zip Code
Southlake TX 76092-4211

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
07 / 28 / 2005

Transaction ID: A-C5546

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) 1000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 61 (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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial) Rita Norton Mailing Address 1666 K Street, NW Suite 500 City State Zip Code Washington DC 20006 FEC ID number of contributing federal political committee. C Name of Employer Occupation AmerisourceBergen Vice President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2005 Transaction ID: A-C5544 Amount of Each Receipt this Period 500.00 <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) Stephen Witort Mailing Address 1425 K Street, NW Suite 300 City State Zip Code Washington DC 20005 FEC ID number of contributing federal political committee. C Name of Employer Occupation 3M Company Director, Gov't Affairs Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2005 Transaction ID: A-C5545 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
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C. Full Name (Last, First, Middle Initial) Robert Eggleston Mailing Address PO Box 1096 City State Zip Code Gainesville TX 76241-1096 FEC ID number of contributing federal political committee. C Name of Employer Occupation Cooke Cty. Republican HQ Volunteer Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt M M / D D / Y Y Y Y 08 / 03 / 2005 Transaction ID: A-C5556 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
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SUBTOTAL of Receipts This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 61
	<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Lynn Davis

Mailing Address 2904 Pennsylvania Drive

City State Zip Code
Denton TX 76205-8308

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

Name of Employer self-employed Occupation self-employed

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 2 / 2 0 0 5

Transaction ID: A-C5574

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Thomas Krampitz

Mailing Address 3420 Potomac Avenue

City State Zip Code
Dallas TX 75205-2228

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

Name of Employer Texas Motor Speedway Occupation General Counsel

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 2 / 2 0 0 5

Transaction ID: A-C5568

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Jimmy C Payton

Mailing Address 302 Oak Lane

City State Zip Code
Euless TX 76039-2306

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 2 / 2 0 0 5

Transaction ID: A-C5569

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)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 61
	<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Robert Sherman

Mailing Address 32 Timbergreen Circle

City State Zip Code
Denton TX 76205-8577

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

Name of Employer Occupation
Self-employed Business Owner- Publisher

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 2 / 2 0 0 5

Transaction ID: A-C5577

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Laurie B Werner

Mailing Address 3500 Arborlawn Drive

City State Zip Code
Fort Worth TX 76109-2532

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 2 / 2 0 0 5

Transaction ID: A-C5567

Amount of Each Receipt this Period
500.00

political contribution

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

C. Full Name (Last, First, Middle Initial)
Steve Allen

Mailing Address 6011 Morriss Road Suite 100

City State Zip Code
Flower Mound TX 75028-3779

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

Name of Employer Occupation
state farm agent

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 5

Transaction ID: A-C5613

Amount of Each Receipt this Period
250.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 61
	<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
James N. Austin, Jr.

Mailing Address 2017 Teakwood Trace

City State Zip Code
Fort Worth TX 76112-5430

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

Name of Employer Occupation
Austin Co. Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2005

Transaction ID: A-C5601

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)
Mrs. Sue Bancroft

Mailing Address 9121 David Fort Road

City State Zip Code
Argyle TX 76226-2954

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2005

Transaction ID: A-C5614

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Dr. David Beyer

Mailing Address 4201 Camp Bowie Boulevard

City State Zip Code
Fort Worth TX 76107-3928

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

Name of Employer Occupation
Blvd. Clinic Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2005

Transaction ID: A-C5615

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)	▶	1050.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 61
	<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Richard Drummond

Mailing Address 5008 Bentwood Court

City State Zip Code
Fort Worth TX 76132-1171

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

Name of Employer Occupation
Drummond Group, Inc. President & CEO

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2005

Transaction ID: A-C5617

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address 3800 S Potter Shop Road

City State Zip Code
Crossroads TX 76227-2587

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

Name of Employer Occupation
Self-employed Dentist

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2005

Transaction ID: A-C5628

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Ray Nichols

Mailing Address 1002 S Denton Street

City State Zip Code
Gainesville TX 76240-5611

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

Name of Employer Occupation
GNB Financial Banker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

550.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2005

Transaction ID: A-I5693

Amount of Each Receipt this Period
450.00

Inkind: Catering expense

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

SUBTOTAL of Receipts This Page (optional)	▶	2700.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 61
	<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Sarah Webb

Mailing Address 1302 Cliffwood Road

City State Zip Code
Euless TX 76040-6402

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

Name of Employer Self-Employed Occupation
Physician

Receipt For: 2006 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 0 5

Transaction ID: A-C5600

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)
Mrs. Elaine Emery

Mailing Address 2200 N Garden Ridge Boulevard

City State Zip Code
Lewisville TX 75077-1771

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

Name of Employer Self-Employed Occupation
Consultant

Receipt For: 2006 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

225.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 0 5

Transaction ID: A-C5623

Amount of Each Receipt this Period
125.00

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

C. Full Name (Last, First, Middle Initial)
Stan Morton

Mailing Address 43 Wellington Oaks Circle

City State Zip Code
Denton TX 76210

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

Name of Employer Denton Community Hospital Occupation
CEO

Receipt For: 2006 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 0 5

Transaction ID: A-C5619

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	625.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 61
	<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Fred Patterson

Mailing Address 2900 Santa Monica Drive

City State Zip Code
Denton TX 76205-8518

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

Name of Employer Retired Occupation Publisher Emeritus

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 3 0 / 2 0 0 5

Transaction ID: A-C5620

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)
Mr. James C. Penn

Mailing Address 860 West Airport Freeway Suite 601

City State Zip Code
Hurst TX 76054

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

Name of Employer Whitley Penn Occupation CPA

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 3 0 / 2 0 0 5

Transaction ID: A-C5625

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
James B. Goldsworthy

Mailing Address 113 E California Street

City State Zip Code
Gainesville TX 76240-4001

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

Name of Employer State Farm Insurance Occupation Agent

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 0 7 / 2 0 0 5

Transaction ID: A-C5657

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 61
	<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Ben Hatcher

Mailing Address 200 County Road 2130

City State Zip Code
Gainesville TX 76240-6339

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

Name of Employer Occupation
First State Bank President

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2005

Transaction ID: A-C5653

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Dr. Alfred Hurley

Mailing Address 828 Skylark Drive

City State Zip Code
Denton TX 76205-8012

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

Name of Employer Occupation
University of North Texas Professor of History

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2005

Transaction ID: A-C5640

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Mr. Bryan Kammerdiener

Mailing Address 2052 E Spring Creek Road

City State Zip Code
Gainesville TX 76240-8317

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

Name of Employer Occupation
Self-employed Dairy Farmer/Business Owner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2005

Transaction ID: A-C5635

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) ► **1250.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 61
	<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Glenn Loch

Mailing Address PO Box 159

City State Zip Code
Gainesville TX 76241-0159

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2005

Transaction ID: A-C5637

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Marcia M. Merritt

Mailing Address 1915 Williamsburg Row

City State Zip Code
Denton TX 76209-2271

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2005

Transaction ID: A-C5641

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Mr. Jerry Mohelnitzky

Mailing Address 109 W El Paseo Street

City State Zip Code
Denton TX 76205-8591

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2005

Transaction ID: A-C5638

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) ► **1250.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 61
	<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Frank Morris

Mailing Address 2815 FM 30920

City State Zip Code
Gainesville TX 76240

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

Name of Employer Occupation
First State Bank Banker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2005

Transaction ID: A-C5642

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Ray Nichols

Mailing Address 1002 S Denton Street

City State Zip Code
Gainesville TX 76240-5611

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

Name of Employer Occupation
GNB Financial Banker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

550.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2005

Transaction ID: A-C5645

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Betty Perieto

Mailing Address 232 Medford Court East

City State Zip Code
Fort Worth TX 76109

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2005

Transaction ID: A-C5654

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) ▶ **900.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 61
	<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Ray Roberts

Mailing Address 2136 Chinn Road

City State Zip Code
Denton TX 76207-5106

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

Name of Employer Occupation
Basic Capital Management Aviation Director

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 12 / 2005

Transaction ID: A-C5687

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)
Mrs. Sharon Conyers

Mailing Address 6664 Orchard Drive

City State Zip Code
Flower Mound TX 75022-5850

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2005

Transaction ID: A-C5680

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Mrs. Eleanor Swan

Mailing Address 1800 Stonegate Drive

City State Zip Code
Denton TX 76205-5448

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

Name of Employer Occupation
Self-employed Business Owner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2005

Transaction ID: A-C5679

Amount of Each Receipt this Period
250.00

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 61
	<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Harry Crumpacker

Mailing Address 3701 Crownhill Drive

City State Zip Code
Plano TX 75093-7952

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

Name of Employer Occupation
The Morrison Milling Co. CEO

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 18 / 2005

Transaction ID: A-C5674

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)
Mr. Robert Widmer, Jr.

Mailing Address 8949 David Fort Road

City State Zip Code
Argyle TX 76226-2950

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

Name of Employer Occupation
Self-employed Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2100.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2005

Transaction ID: A-C5690

Amount of Each Receipt this Period
1850.00

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

C. Full Name (Last, First, Middle Initial)
Mrs. Terry Widmer

Mailing Address 8949 David Fort Road

City State Zip Code
Argyle TX 76226-2950

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

Name of Employer Occupation
Self-employed Registered Nurse

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2005

Transaction ID: A-C5692

Amount of Each Receipt this Period
150.00

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

SUBTOTAL of Receipts This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	22025.00

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

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

FOR LINE NUMBER: PAGE 23 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Cisco Systems E-PAC

Mailing Address 20 Park Road
Suite E

City State Zip Code
Burlingame CA 94010-4443

FEC ID number of contributing federal political committee. **C** C00362707

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 08 / 2005

Transaction ID: A-C5506

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Realtors Political Action Committee (RPAC)

Mailing Address 700 11th Street NW

City State Zip Code
Washington DC 20001-4507

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 08 / 2005

Transaction ID: A-C5512

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)
Recording Industry Association of America PAC

Mailing Address 1330 Connecticut Avenue
Suite 300

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00009357

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 20 / 2005

Transaction ID: A-C5531

Amount of Each Receipt this Period
1000.00

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

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

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

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

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

FOR LINE NUMBER: PAGE 24 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
OB-GYNS for Women's Health PAC

Mailing Address 409 12th Street, SW

City State Zip Code
Washington DC 20024

FEC ID number of contributing federal political committee. **C** C00364158

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 22 / 2005

Transaction ID: A-C5507

Amount of Each Receipt this Period
2500.00

campaign contribution

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

B. Full Name (Last, First, Middle Initial)
Symantec Corporation PAC

Mailing Address 20330 Stevens Creek Boulevard

City State Zip Code
Cupertino CA 95014-2268

FEC ID number of contributing federal political committee. **C** C00394031

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 22 / 2005

Transaction ID: A-C5513

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)
American Academy of Dermatology PAC (SKINPAC)

Mailing Address 1350 I Street NW
Suite 800

City State Zip Code
Washington DC 20005-3305

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 28 / 2005

Transaction ID: A-C5551

Amount of Each Receipt this Period
1000.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 61
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. (COALPAC) The National Mining Association		Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2005
Mailing Address 101 Constitution Avenue NW Suite 500		Transaction ID: A-C5535
City State Zip Code Washington DC 20001-2133	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00109819		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Assurant, Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2005
Mailing Address PO Box 3050		Transaction ID: A-C5542
City State Zip Code Milwaukee WI 53201-3050	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00185694		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Cardinal Health, Inc. Political Action Committee		Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2005
Mailing Address 7000 Cardinal Place		Transaction ID: A-C5541
City State Zip Code Dublin OH 43017-1091	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00332833		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 61
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Koch Industries (KOCHPAC)

Mailing Address 655 15th Street NW
Suite 445

City Washington State DC Zip Code 20005-5727

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2005

Transaction ID: A-C5536

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
National Assoc. of Broadcasters Television and Radio PAC

Mailing Address 1771 N Street NW

City Washington State DC Zip Code 20036-2800

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2005

Transaction ID: A-C5533

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)
POWER PAC Edison Electric Institute

Mailing Address 701 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004-2608

FEC ID number of contributing federal political committee. **C** C00095869

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2005

Transaction ID: A-C5534

Amount of Each Receipt this Period
1000.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 61
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Michael Burgess for Congress

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

Mailing Address 105 Congress Avenue
Suite 750

City Austin State TX Zip Code 78701-4019

FEC ID number of contributing federal political committee. **C** C00226548

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2005

Transaction ID: A-C5543

Amount of Each Receipt this Period
2500.00

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

B. Full Name (Last, First, Middle Initial)
LAFARGE PAC

Mailing Address 12950 Worldgate Drive
Suite 500

City Herndon State VA Zip Code 20170-6000

FEC ID number of contributing federal political committee. **C** C00246678

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2005

Transaction ID: A-C5557

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)
American Gas Association PAC

Mailing Address 400 N Capitol Street NW

City Washington State DC Zip Code 20001-1511

FEC ID number of contributing federal political committee. **C** C00007450

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2005

Transaction ID: A-C5560

Amount of Each Receipt this Period
1000.00

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 61
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Cigna Coproration PAC

Mailing Address Two Liberty Place
1601 Chesnut Street

City Philadelphia State PA Zip Code 19192

FEC ID number of contributing federal political committee. **C** C00085316

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 0 5

Transaction ID: A-C5562

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
College of American Pathologists (PATH PAC)

Mailing Address 1350 I Street NW
Suite 590

City Washington State DC Zip Code 20005-3305

FEC ID number of contributing federal political committee. **C** C00274944

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 0 5

Transaction ID: A-C5561

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)
Exxon Mobil Corporation PAC

Mailing Address 325 Pennsylvania Avenue SE
280

City Washington State DC Zip Code 20003-1274

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 0 5

Transaction ID: A-C5558

Amount of Each Receipt this Period
1000.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 29 / 61
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
National Association of Chain Drug Stores (NACDS) PAC

Mailing Address PO Box 1417-D49

City State Zip Code
Alexandria VA 22313

FEC ID number of contributing federal political committee. **C** C00022368

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 05 / 2005

Transaction ID: A-C5559

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
American Nurses Assn. (ANA-PAC)

Mailing Address 8515 Georgia Avenue Suite 400

City State Zip Code
Silver Spring MD 20910-3492

FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 12 / 2005

Transaction ID: A-C5580

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)
Exelon Corporation PAC

Mailing Address PO Box 805379

City State Zip Code
Chicago IL 60680-4115

FEC ID number of contributing federal political committee. **C** C00141218

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 12 / 2005

Transaction ID: A-C5581

Amount of Each Receipt this Period
1000.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 / 61
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
American Dental PAC

Mailing Address 1111 14th Street NW
Suite 1100

City Washington State DC Zip Code 20005-5603

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 5

Transaction ID: A-C5605

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
American Dental PAC

Mailing Address 1111 14th Street NW
Suite 1100

City Washington State DC Zip Code 20005-5603

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 5

Transaction ID: A-C5606

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)
Automotive Free International Trade PAC

Mailing Address 1625 Prince Street
Suite 225

City Alexandria State VA Zip Code 22314-2889

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 5

Transaction ID: A-C5603

Amount of Each Receipt this Period
1500.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Caremark RX Inc. PAC

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60052

FEC ID number of contributing federal political committee. **C** C00384818

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	5	/	2	0	0	5

Transaction ID: A-C5611

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Comcast Corporation Political Action Committee

Mailing Address 1500 Market Street

City State Zip Code
Philadelphia PA 19102-2100

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	5	/	2	0	0	5

Transaction ID: A-C5608

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)
Johnson and Johnson Employees' Good Government Fund

Mailing Address 1350 I Street NW

City State Zip Code
Washington DC 20005-3305

FEC ID number of contributing federal political committee. **C** C00010983

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	5	/	2	0	0	5

Transaction ID: A-C5610

Amount of Each Receipt this Period
1000.00

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

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

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

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

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

FOR LINE NUMBER: PAGE 32 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Miller Brewing Company PAC

Mailing Address 3939 W Highland Boulevard

City State Zip Code
Milwaukee WI 53208-2816

FEC ID number of contributing federal political committee. **C** C00102780

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2005

Transaction ID: A-C5602

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Pfizer Corporation Employees Political Action Committee

Mailing Address 1455 F Street NW
Suite 550

City State Zip Code
Washington DC 20004-1009

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2005

Transaction ID: A-C5609

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)
Valero Energy Corporation (VALPAC)

Mailing Address 601 Pennsylvania Avenue, NW
Suite 900

City State Zip Code
Washington DC 20004-2601

FEC ID number of contributing federal political committee. **C** C00109546

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2005

Transaction ID: A-C5607

Amount of Each Receipt this Period
2500.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 61
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. Wal-Mart Stores Inc. PAC for Responsible Government		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2005
Mailing Address 702 SW 8th Street		Transaction ID: A-C5612
City Bentonville	State AR	Zip Code 72716-6209
FEC ID number of contributing federal political committee.	C C00093054	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Dairy Farmers of America (DEPAC)		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2005
Mailing Address 10220 NW Ambassador Drive # 909700		Transaction ID: A-C5655
City Kansas City	State MO	Zip Code 64153-2312
FEC ID number of contributing federal political committee.	C C00001388	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Independent Bankers Association of Texas PAC (IBAT)		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2005
Mailing Address 1700 Rio Grande Street Suite 100		Transaction ID: A-C5656
City Austin	State TX	Zip Code 78701-1683
FEC ID number of contributing federal political committee.	C C00332841	Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 61
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. Alcon Laboratories Inc PAC		Date of Receipt M M / D D / Y Y Y Y Y 09 / 12 / 2005	
Mailing Address 6201 South Freeway		Transaction ID: A-C5678	
City State Zip Code Fort Worth TX 76134-2001	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C C00382119		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) B. Myra Crowover Campaign		Date of Receipt M M / D D / Y Y Y Y Y 09 / 18 / 2005	
Mailing Address P.O. Box 51322		Transaction ID: A-C6038	
City State Zip Code Denton TX 76206	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) C. Myra Crowover Campaign		Date of Receipt M M / D D / Y Y Y Y Y 09 / 18 / 2005	
Mailing Address P.O. Box 51322		Transaction ID: A-C6039	
City State Zip Code Denton TX 76206	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 2000.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 61
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. National Beer Wholesalers Association (NBWA PAC)		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2005
Mailing Address 1100 King Street Suite 600		Transaction ID: A-C5675
City State Zip Code Alexandria VA 22314-2925		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00144766		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) B. Sprint Nextel Corporation PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2005
Mailing Address 6450 Sprint Parkway		Transaction ID: A-C5684
City State Zip Code Overland Park KS 66251-6105		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00089342		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. American Academy of Ophthalmology PAC (OPHTHPAC)		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2005
Mailing Address 1101 Vermont Avenue NW Suite 700		Transaction ID: A-C5672
City State Zip Code Washington DC 20005-3526		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00196246		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 3500.00		

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 61
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial) Burlington Northern Santa Fe PAC (BNSF)		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2005
Mailing Address 700 13th Street NW Suite 220		Transaction ID: A-C5673
City State Zip Code Washington DC 20005-5915	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00235739		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Realtors Political Action Committee (RPAC)		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2005
Mailing Address 700 11th Street NW		Transaction ID: A-C5685
City State Zip Code Washington DC 20001-4507	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00030718		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

C. Full Name (Last, First, Middle Initial) National Multi Housing Council PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2005
Mailing Address 1850 M Street NW Suite 540		Transaction ID: A-C5740
City State Zip Code Washington DC 20036-5816	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00130773		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 37 / 61
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
National Rifle Association PAC (NRA)

Mailing Address 410 1st Street SE
Floor 2

City State Zip Code
Washington DC 20003-1867

FEC ID number of contributing federal political committee. **C** C70000716

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2005

Transaction ID: A-C5741

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
National Cable & Telecommunications PAC

Mailing Address 1724 Massachusetts Avenue NW

City State Zip Code
Washington DC 20036-1905

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2005

Transaction ID: A-C5739

Amount of Each Receipt this Period
5000.00

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

SUBTOTAL of Receipts This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	57000.00

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)
Michael Burgess for Congress

A. Tortilla Coast Full Name (Last, First, Middle Initial) Mailing Address 400 1st Street SE City Washington State DC Zip Code 20003-1826 Purpose of Disbursement Meal expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-E-5732 Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2005 Amount of Each Disbursement this Period 151.08 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
--	--	--

B. CardService International Full Name (Last, First, Middle Initial) Mailing Address PO Box 5180 City Simi Valley State CA Zip Code 93062-5180 Purpose of Disbursement Credit card modem expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-E-5733 Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2005 Amount of Each Disbursement this Period 33.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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C. American Airlines Full Name (Last, First, Middle Initial) Mailing Address 4333 Amon Carter Boulevard City Fort Worth State TX Zip Code 76155-2605 Purpose of Disbursement Airfare expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-E-5734 Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2005 Amount of Each Disbursement this Period 385.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SUBTOTAL of Disbursements This Page (optional) ▶	570.28
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. CardService International		Transaction ID: B-E-5742 Date of Disbursement 07 / 11 / 2005
Mailing Address PO Box 5180		Amount of Each Disbursement this Period 74.76
City Simi Valley State CA Zip Code 93062-5180	Purpose of Disbursement Credit card processing fee Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Eldorado Hotel & Spa		Transaction ID: B-E-5735 Date of Disbursement 07 / 11 / 2005
Mailing Address 309 W. San Francisco		Amount of Each Disbursement this Period 328.66
City Santa Fe State NM Zip Code 87501	Purpose of Disbursement Hotel expense Candidate Name Category/Type: 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Completecampaigns.com		Transaction ID: B-E-5495 Date of Disbursement 07 / 19 / 2005
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 500.00
City San Diego State CA Zip Code 92102-4548	Purpose of Disbursement Campaign software Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	903.42
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)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. Gaylord Texan Resort & Convention Center		Transaction ID: B-E-5498 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 5
Mailing Address P.O. Box 849933		Amount of Each Disbursement this Period 2327.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Dallas State TX Zip Code 75219	Purpose of Disbursement Room rentals Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Magnolia Group, Inc.		Transaction ID: B-E-5497 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 5
Mailing Address 3503 Dickason Avenue Suite B		Amount of Each Disbursement this Period 2950.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Dallas State TX Zip Code 75219	Purpose of Disbursement Fundraising consultant Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Dr. Michael C. Burgess		Transaction ID: B-E-5499 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 5
Mailing Address 106 Highland Lake Drive		Amount of Each Disbursement this Period 316.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Highland Village State TX Zip Code 75077-6736	Purpose of Disbursement Mileage reimbursement Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5593.91
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)
Michael Burgess for Congress

A. Robert Sherman Full Name (Last, First, Middle Initial) Mailing Address 32 Timbergreen Circle City Denton State TX Zip Code 76205-8577 Purpose of Disbursement Office rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-E-5496 Date of Disbursement 07 / 19 / 2005 Amount of Each Disbursement this Period 700.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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B. Sheraton Hotel Full Name (Last, First, Middle Initial) Mailing Address 900 S. Orme Street City Arlington State VA Zip Code 22204 Purpose of Disbursement Hotel expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-E-5736 Date of Disbursement 07 / 21 / 2005 Amount of Each Disbursement this Period 1328.59 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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C. Sprint Full Name (Last, First, Middle Initial) Mailing Address 211 Justin Road City Lewisville State TX Zip Code 75067 Purpose of Disbursement Telephone expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-E-5502 Date of Disbursement 07 / 22 / 2005 Amount of Each Disbursement this Period 256.96 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SUBTOTAL of Disbursements This Page (optional)

2285.55

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)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. US House Members Dining Room		Transaction ID: B-E-5737 Date of Disbursement 07 / 22 / 2005
Mailing Address US Capitol Building		Amount of Each Disbursement this Period 40.70
City Washington State DC Zip Code 20515	Purpose of Disbursement Meal expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Bogart Associates, Inc.		Transaction ID: B-E-5505 Date of Disbursement 07 / 25 / 2005
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 700.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Fundraising consultant Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. DBR Publishing Co., LLC		Transaction ID: B-E-5503 Date of Disbursement 07 / 25 / 2005
Mailing Address 11375 E. 61st- Suite 102 P.O. Box 470303		Amount of Each Disbursement this Period 300.00
City Tulsa State OK Zip Code 74147-0303	Purpose of Disbursement Program advertisement Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1040.70
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. Twenty East Agency, LLC		Transaction ID: B-E-5504 Date of Disbursement 07 / 25 / 2005	
Mailing Address PO Box 8227		Amount of Each Disbursement this Period 135.32	
City Tyler State TX Zip Code 75711-8227	Purpose of Disbursement Website hosting Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

Full Name (Last, First, Middle Initial) B. Denton Florist		Transaction ID: B-E-5527 Date of Disbursement 07 / 28 / 2005	
Mailing Address 101 N Elm Street Suite 100		Amount of Each Disbursement this Period 56.18	
City Denton State TX Zip Code 76201-4178	Purpose of Disbursement Floral Arrangement Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

Full Name (Last, First, Middle Initial) C. US House Members Dining Room		Transaction ID: B-E-5738 Date of Disbursement 07 / 29 / 2005	
Mailing Address US Capitol Building		Amount of Each Disbursement this Period 56.10	
City Washington State DC Zip Code 20515	Purpose of Disbursement Meal expense Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

SUBTOTAL of Disbursements This Page (optional) ▶	247.60
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. CardService International		Transaction ID: B-E-5743 Date of Disbursement 08 / 01 / 2005
Mailing Address PO Box 5180		Amount of Each Disbursement this Period 27.71
City Simi Valley State CA Zip Code 93062-5180	Purpose of Disbursement Credit card processing fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Tortilla Coast		Transaction ID: B-E-5699 Date of Disbursement 08 / 01 / 2005
Mailing Address 400 1st Street SE		Amount of Each Disbursement this Period 68.53
City Washington State DC Zip Code 20003-1826	Purpose of Disbursement Meal expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Denton High School Gridiron Club		Transaction ID: B-E-5538 Date of Disbursement 08 / 02 / 2005
Mailing Address 502 West Oak Street Suite 101		Amount of Each Disbursement this Period 125.00
City Denton State TX Zip Code 76201	Purpose of Disbursement program advertisement Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	221.24
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s)
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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)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. CardService International		Transaction ID: B-E-5702 Date of Disbursement 08 / 03 / 2005
Mailing Address PO Box 5180		Amount of Each Disbursement this Period 39.95
City Simi Valley State CA Zip Code 93062-5180	Purpose of Disbursement Credit card modem Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Magnolia Group, Inc.		Transaction ID: B-E-5553 Date of Disbursement 08 / 03 / 2005
Mailing Address 3503 Dickason Avenue Suite B		Amount of Each Disbursement this Period 6576.35
City Dallas State TX Zip Code 75219	Purpose of Disbursement fundraising consulting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Verizon Southwest		Transaction ID: B-E-5552 Date of Disbursement 08 / 03 / 2005
Mailing Address PO Box 920041		Amount of Each Disbursement this Period 289.99
City Dallas State TX Zip Code 75392-0041	Purpose of Disbursement telephone expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	6906.29
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. Bogart Associates, Inc.		Transaction ID: B-E-5563 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Fundraising consulting fee Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CardService International		Transaction ID: B-E-5744 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 5
Mailing Address PO Box 5180		Amount of Each Disbursement this Period 6.68 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Simi Valley State CA Zip Code 93062-5180	Purpose of Disbursement Credit card processing fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Completecampaigns.com		Transaction ID: B-E-5588 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 5
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City San Diego State CA Zip Code 92102-4548	Purpose of Disbursement Campaign software expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1006.68
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s)
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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)
Michael Burgess for Congress

<p>A. Full Name (Last, First, Middle Initial) Huckaby-Davis-Lisker</p>		<p>Transaction ID: B-E-5587 Date of Disbursement 08 / 11 / 2005</p>
<p>Mailing Address 228 S Washington Street Suite 200</p>		<p>Amount of Each Disbursement this Period 500.00</p>
<p>City Alexandria State VA Zip Code 22314-5404</p>	<p>Purpose of Disbursement FEC Compliance/ Financial Cons Candidate Name</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>001 Category/ Type</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>B. Full Name (Last, First, Middle Initial) Talent PayMaster, Inc.</p>		<p>Transaction ID: B-E-5586 Date of Disbursement 08 / 11 / 2005</p>
<p>Mailing Address 7315 Wisconsin Avenue Suite 705 East</p>		<p>Amount of Each Disbursement this Period 3791.20</p>
<p>City Bethesda State MD Zip Code 20814</p>	<p>Purpose of Disbursement Book Keeping Candidate Name</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>001 Category/ Type</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>C. Full Name (Last, First, Middle Initial) Verizon Southwest</p>		<p>Transaction ID: B-E-5585 Date of Disbursement 08 / 11 / 2005</p>
<p>Mailing Address PO Box 920041</p>		<p>Amount of Each Disbursement this Period 301.14</p>
<p>City Dallas State TX Zip Code 75392-0041</p>	<p>Purpose of Disbursement Telephone expense Candidate Name</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>001 Category/ Type</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>4592.34</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

Use separate schedule(s)
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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)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. Bogart Associates, Inc.		Transaction ID: B-E-5593 Date of Disbursement 08 / 24 / 2005	
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 750.00	
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Fundraising consulting fee	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 003		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sprint		Transaction ID: B-E-5591 Date of Disbursement 08 / 24 / 2005	
Mailing Address 211 Justin Road		Amount of Each Disbursement this Period 256.97	
City Lewisville State TX Zip Code 75067	Purpose of Disbursement Telephone Expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Twenty East Agency, LLC		Transaction ID: B-E-5592 Date of Disbursement 08 / 24 / 2005	
Mailing Address PO Box 8227		Amount of Each Disbursement this Period 54.13	
City Tyler State TX Zip Code 75711-8227	Purpose of Disbursement web-hosting	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1061.10
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. Dr. Michael C. Burgess		Transaction ID: B-E-5589 Date of Disbursement 08 / 24 / 2005
Mailing Address 106 Highland Lake Drive		Amount of Each Disbursement this Period 242.75
City Highland Village State TX Zip Code 75077-6736	Purpose of Disbursement travel reimbursement Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Robert Sherman		Transaction ID: B-E-5590 Date of Disbursement 08 / 24 / 2005
Mailing Address 32 Timbergreen Circle		Amount of Each Disbursement this Period 700.00
City Denton State TX Zip Code 76205-8577	Purpose of Disbursement Campaign office rent Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Ray Nichols		Transaction ID: B-I-5693 Date of Disbursement 08 / 25 / 2005
Mailing Address 1002 S Denton Street		Amount of Each Disbursement this Period 450.00
City Gainesville State TX Zip Code 76240-5611	Purpose of Disbursement Inkind: Catering expense Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1392.75
TOTAL This Period (last page this line number only) ▶	_____

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

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

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. CardService International		Transaction ID: B-E-5747 Date of Disbursement 08 / 29 / 2005
Mailing Address PO Box 5180		Amount of Each Disbursement this Period 84.11
City Simi Valley State CA Zip Code 93062-5180	Purpose of Disbursement Credit card processing fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Magnolia Group, Inc.		Transaction ID: B-E-5629 Date of Disbursement 08 / 30 / 2005
Mailing Address 3503 Dickason Avenue Suite B		Amount of Each Disbursement this Period 50.27
City Dallas State TX Zip Code 75219	Purpose of Disbursement fundraising consulting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Magnolia Group, Inc.		Transaction ID: B-E-5631 Date of Disbursement 08 / 30 / 2005
Mailing Address 3503 Dickason Avenue Suite B		Amount of Each Disbursement this Period 5016.87
City Dallas State TX Zip Code 75219	Purpose of Disbursement fundraising consulting fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	5151.25
TOTAL This Period (last page this line number only)	

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

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

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. Texas GOP Lunch		Transaction ID: B-E-5633 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 5
Mailing Address United States Capital Ste. H1-22		Amount of Each Disbursement this Period 220.00
City Washington State DC Zip Code 20215	Purpose of Disbursement meal expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. University of North Texas		Transaction ID: B-E-5659 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 5
Mailing Address PO Box 310889		Amount of Each Disbursement this Period 700.00
City Denton State TX Zip Code 76203-0889	Purpose of Disbursement Table reservation at tailgate Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. CardService International		Transaction ID: B-E-5718 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 5
Mailing Address PO Box 5180		Amount of Each Disbursement this Period 37.25
City Simi Valley State CA Zip Code 93062-5180	Purpose of Disbursement Credit card modem Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	957.25
TOTAL This Period (last page this line number only) ▶	_____

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

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. Grapevine Convention Center		Transaction ID: B-E-5717 Date of Disbursement 09 / 06 / 2005	
Mailing Address 1 Liberty Park Plaza		Amount of Each Disbursement this Period 380.00	
City Grapevine State TX Zip Code 76051-5374	Purpose of Disbursement Organizational banquet	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Tortilla Coast		Transaction ID: B-E-5716 Date of Disbursement 09 / 06 / 2005	
Mailing Address 400 1st Street SE		Amount of Each Disbursement this Period 82.28	
City Washington State DC Zip Code 20003-1826	Purpose of Disbursement Meal expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. CardService International		Transaction ID: B-E-5719 Date of Disbursement 09 / 12 / 2005	
Mailing Address PO Box 5180		Amount of Each Disbursement this Period 3.34	
City Simi Valley State CA Zip Code 93062-5180	Purpose of Disbursement Credit card processing fee	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	465.62
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. Office Depot		Transaction ID: B-E-5721 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 5
Mailing Address 2300 San Jacinto Boulevard		Amount of Each Disbursement this Period 174.22
City Denton State TX Zip Code 76205-7532	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office supplies Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Verizon Southwest		Transaction ID: B-E-5724 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 5
Mailing Address PO Box 920041		Amount of Each Disbursement this Period 216.49
City Dallas State TX Zip Code 75392-0041	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Telephone expense Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Hyatt Regency		Transaction ID: B-E-5726 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 5
Mailing Address 400 New Jersey Avenue NW		Amount of Each Disbursement this Period 265.78
City Washington State DC Zip Code 20001-2002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Hotel expense Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	656.49
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. Bogart Associates, Inc.		Transaction ID: B-E-5665 Date of Disbursement 09 / 21 / 2005	
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 100.00	
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Fundraising consulting Candidate Name	Category/Type 003 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Completecampaigns.com		Transaction ID: B-E-5661 Date of Disbursement 09 / 21 / 2005	
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 500.00	
City San Diego State CA Zip Code 92102-4548	Purpose of Disbursement Campaign software Candidate Name	Category/Type 001 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Flower Mound Chamber of Commerce		Transaction ID: B-E-5662 Date of Disbursement 09 / 21 / 2005	
Mailing Address 700 Parker Square Suite 100		Amount of Each Disbursement this Period 500.00	
City Flower Mound State TX Zip Code 75028-7448	Purpose of Disbursement Table reservation Candidate Name	Category/Type 007 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1100.00
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)

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

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. Jones Day		Transaction ID: B-E-5667 Date of Disbursement 09 / 21 / 2005	
Mailing Address 51 Louisiana Avenue, NW		Amount of Each Disbursement this Period 2975.40	
City Washington State DC Zip Code 20001	Purpose of Disbursement Fundraiser catering expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 003		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Magnolia Group, Inc.		Transaction ID: B-E-5666 Date of Disbursement 09 / 21 / 2005	
Mailing Address 3503 Dickason Avenue Suite B		Amount of Each Disbursement this Period 4181.19	
City Dallas State TX Zip Code 75219	Purpose of Disbursement Fundraising consulting	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Sprint		Transaction ID: B-E-5664 Date of Disbursement 09 / 21 / 2005	
Mailing Address 211 Justin Road		Amount of Each Disbursement this Period 258.27	
City Lewisville State TX Zip Code 75067	Purpose of Disbursement Telephone expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	7414.86
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. Verizon Southwest		Transaction ID: B-E-5663	
Mailing Address PO Box 920041		Date of Disbursement 09 / 21 / 2005	
City Dallas	State TX	Zip Code 75392-0041	Amount of Each Disbursement this Period 289.23
Purpose of Disbursement Telephone expense		001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Robert Sherman		Transaction ID: B-E-5660	
Mailing Address 32 Timbergreen Circle		Date of Disbursement 09 / 21 / 2005	
City Denton	State TX	Zip Code 76205-8577	Amount of Each Disbursement this Period 700.00
Purpose of Disbursement Office rent		001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Talent PayMaster, Inc.		Transaction ID: B-E-5670	
Mailing Address 7315 Wisconsin Avenue Suite 705 East		Date of Disbursement 09 / 23 / 2005	
City Bethesda	State MD	Zip Code 20814	Amount of Each Disbursement this Period 4518.81
Purpose of Disbursement Bookkeeping consulting		001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	5508.04
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)
Michael Burgess for Congress

Full Name (Last, First, Middle Initial) A. Office Depot		Transaction ID: B-E-5728 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 5
Mailing Address 2300 San Jacinto Boulevard		Amount of Each Disbursement this Period 47.15
City State Zip Code Denton TX 76205-7532	Purpose of Disbursement Office supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Twenty East Agency, LLC		Transaction ID: B-E-5694 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 5
Mailing Address PO Box 8227		Amount of Each Disbursement this Period 54.13
City State Zip Code Tyler TX 75711-8227	Purpose of Disbursement Website hosting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Office Depot		Transaction ID: B-E-5729 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 5
Mailing Address 2300 San Jacinto Boulevard		Amount of Each Disbursement this Period 20.70
City State Zip Code Denton TX 76205-7532	Purpose of Disbursement Office supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	121.98
TOTAL This Period (last page this line number only) ▶	47197.35

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

A. Charles Boustany Jr. for Congress

Full Name (Last, First, Middle Initial)
Charles Boustany Jr. for Congress
Mailing Address 331 Beverly Drive

City Lafayette State LA Zip Code 70503

Purpose of Disbursement
Campaign contribution

Candidate Name
Charles W. Boustany, Jr.

Office Sought: House
 Senate
 President
State: LA District: 7

Disbursement For: 2006
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: B-E-5494
Date of Disbursement

07 / 19 / 2005

Amount of Each Disbursement this Period

1000.00

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

B. Michael Steele Exploratory Committee

Mailing Address 150 South Street
Suite 100

City Annapolis State MD Zip Code 21401

Purpose of Disbursement
Campaign contribution

Candidate Name
Michael Steele

Office Sought: House
 Senate
 President
State: MD District: 3

Disbursement For: 2006
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: B-E-5501
Date of Disbursement

07 / 22 / 2005

Amount of Each Disbursement this Period

1000.00

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

C. Poe for Congress

Mailing Address P.O. Box 14222

City Humble State TX Zip Code 77347

Purpose of Disbursement
Campaign contribution

Candidate Name
Ted Poe

Office Sought: House
 Senate
 President
State: TX District: 2

Disbursement For: 2006
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: B-E-5500
Date of Disbursement

07 / 22 / 2005

Amount of Each Disbursement this Period

1000.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

<p>A. Full Name (Last, First, Middle Initial) Fort Worth Republican Women</p>		<p>Transaction ID: B-E-5532 Date of Disbursement 07 / 28 / 2005</p>
<p>Mailing Address 6421 Fershaw Place</p>		<p>Amount of Each Disbursement this Period 250.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>City Fort Worth State TX Zip Code 76116</p>	<p>Purpose of Disbursement Annual fundraiser Candidate Name Category/Type 011</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>B. Full Name (Last, First, Middle Initial) Schmidt for Congress Committee</p>		<p>Transaction ID: B-E-5537 Date of Disbursement 07 / 29 / 2005</p>
<p>Mailing Address 771 Wards Corner Road</p>		<p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>City Loveland State OH Zip Code 45140</p>	<p>Purpose of Disbursement Campaign contribution Candidate Name Jeanette H. Schmidt Category/Type 011</p>	
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 2</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>C. Full Name (Last, First, Middle Initial) Tarrant County Republican Party</p>		<p>Transaction ID: B-E-5713 Date of Disbursement 08 / 29 / 2005</p>
<p>Mailing Address 1415 Ballinger Street</p>		<p>Amount of Each Disbursement this Period 50.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>City Fort Worth State TX Zip Code 76102-5905</p>	<p>Purpose of Disbursement Contribution Candidate Name Category/Type 011</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>1300.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

A. University of North Texas Full Name (Last, First, Middle Initial) Mailing Address PO Box 310889 City Denton State TX Zip Code 76203-0889 Purpose of Disbursement Family weekend sponsorship Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-E-5632 Date of Disbursement 08 / 30 / 2005 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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B. Burns for Congress Full Name (Last, First, Middle Initial) Mailing Address PO Box 1965 City Sylvania State GA Zip Code 30467-7165 Purpose of Disbursement Campaign contribution Candidate Name Max Burns Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-E-5668 Date of Disbursement 09 / 21 / 2005 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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C. Denton County Republican Party Full Name (Last, First, Middle Initial) Mailing Address 325 Pearl Street City Denton State TX Zip Code 76201-9051 Purpose of Disbursement Golf fundraiser sponsorship Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-E-5671 Date of Disbursement 09 / 23 / 2005 Amount of Each Disbursement this Period 1150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SUBTOTAL of Disbursements This Page (optional) ▶	2650.00
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)

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

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NAME OF COMMITTEE (In Full)
Michael Burgess for Congress

A. Full Name (Last, First, Middle Initial)
Fort Worth Black Chamber of Commerce

Mailing Address 1150 South Freeway
#211

City State Zip Code
Fort Worth TX 76104

Purpose of Disbursement
Golf fundraiser sponsorship

Candidate Name

012
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-5669

Date of Disbursement

09 / 23 / 2005

Amount of Each Disbursement this Period

1000.00

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

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

7950.00