

# 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  
Neugebauer Congressional Committee

ADDRESS (number and street) PO Box 54175  
 Check if different than previously reported. (ACC)  
Lubbock TX 79453 4175

2. **FEC IDENTIFICATION NUMBER** C00384016  
**CITY** **STATE** **ZIP CODE** **STATE** **DISTRICT**  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)  
TX 19

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 11 04 2008 in the State of TX

5. Covering Period 10 16 2008 through 11 24 2008

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 James Cummings

Signature of Treasurer Electronically Filed by James Cummings Date 12 04 2008

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Neugebauer Congressional Committee

Report Covering the Period:

From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	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)).....	59976.00	1175953.60
(b) Total Contribution Refunds (from Line 20(d)).....	500.00	11870.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	59476.00	1164083.60
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	46923.95	600364.64
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2057.41
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	46923.95	598307.23
8. Cash on Hand at Close of Reporting Period (from Line 27).....	524303.91	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

**POST-ELECTION DETAILED  
SUMMARY PAGE**

FEC Form 3 (Revised 07/05)

Report of Receipts and Disbursements

Page 5

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Neugebauer Congressional Committee

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

**I. RECEIPTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>4</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (date of general election)	M	M	1	1	D	D	0	4	Y	Y	Y	Y	2	0	0	8	COLUMN C Total for <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>5</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (date after general election)  through <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>4</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (last day of reporting period)	M	M	1	1	D	D	0	5	Y	Y	Y	Y	2	0	0	8	M	M	1	1	D	D	2	4	Y	Y	Y	Y	2	0	0	8
M	M																																																	
1	1																																																	
D	D																																																	
0	4																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
M	M																																																	
1	1																																																	
D	D																																																	
0	5																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
M	M																																																	
1	1																																																	
D	D																																																	
2	4																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
11. CONTRIBUTIONS (other than loans) FROM:																																																		
(a) Individuals/Persons Other than Political Committees																																																		
(i) Itemized (Use Schedule A)																																																		
24666.00	621920.30	250.00																																																
(ii) Unitemized																																																		
2860.00	32363.00	300.00																																																
(iii) Total of contributions from individuals																																																		
27526.00	654283.30	550.00																																																
(b) Political Party Committees																																																		
0.00	740.00	0.00																																																
(c) Other Political Committees																																																		
32450.00	520930.30	4000.00																																																

**POST-ELECTION DETAILED  
SUMMARY PAGE  
Report of Receipts and Disbursements**

<b>COLUMN A</b> Total this Period	<b>COLUMN B</b> Election Cycle Total as of * (date of general Election) (* See page 5 for date)	<b>COLUMN C</b> Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
59976.00	1175953.60	4550.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	90000.00	0.00
(b). All Other Loans		
0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b))		
0.00	90000.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
0.00	2057.41	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc)		
526.40	8343.64	382.97
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
60502.40	1276354.65	4932.97

**POST ELECTION DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 7

Write or Type Committe Name

Neugebauer Congressional Committee

Report the covering period

From:

MM 10

DD 16

YYYY 2008

To:

MM 11

DD 24

YYYY 2008

**II. DISBURSEMENTS**

<b>COLUMN A</b> Total this period	<b>COLUMN B</b> Election Cycle Total as of * (date of general election) (* See page 5 for date)	<b>COLUMN C</b> Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
17. OPERATING EXPENDITURES		
46923.95	600364.64	17252.06
18. TRANSFER TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN PAYMENTS		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	232900.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b) )		
0.00	232900.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	9370.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

**POST ELECTION DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 8

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	Total for * Through *	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
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(c) Other political committees (such as PACs)

500.00	2500.00	0.00
--------	---------	------

(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c) )

500.00	11870.00	0.00
--------	----------	------

21. OTHER DISBURSEMENTS

8000.00	201770.00	0.00
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22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)

55423.95	1046904.64	17252.06
----------	------------	----------

**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

59476.00	1164083.60	4550.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

46923.95	598307.23	17252.06
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINING OF REPORTING PERIOD .....	519225.46
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	60502.40
25. SUBTOTAL(add Line 23 and Line 24) .....	579727.86
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	55423.95
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	524303.91

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 62

(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

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)  
Neugebauer Congressional Committee

**A.**

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

Mailing Address 70 NE Loop 410  
Suite 100

City San Antonio State TX Zip Code 78216-5841

FEC ID number of contributing federal political committee. C

Name of Employer Plains Capital Bank Occupation Vice President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

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

**Transaction ID:** A-C11410

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)  
Michael D. Moore

Mailing Address 9723 Mid Walk Drive

City San Antonio State TX Zip Code 78230-4075

FEC ID number of contributing federal political committee. C

Name of Employer Ironstone Development, LLC Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2250.00

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

**Transaction ID:** A-C11357

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)  
M. Scott Norman, Jr.

Mailing Address 3605 Edgemont Drive

City Austin State TX Zip Code 78731-5816

FEC ID number of contributing federal political committee. C

Name of Employer Texas Ass'n of Builders Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

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

**Transaction ID:** A-C11409

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) ..... 1500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 62  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

**A.** Full Name (Last, First, Middle Initial)  
Becky Oliver

Mailing Address 5305 Elm Street

City State Zip Code  
Houston TX 77081

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

Name of Employer Information Requested Occupation Information Requested

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

Amount of Each Receipt this Period: 1000.00

Transaction ID: A-C11358

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

**B.** Full Name (Last, First, Middle Initial)  
S. M. Powell

Mailing Address 2900 Tarry Trail

City State Zip Code  
Austin TX 78703-1153

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

Name of Employer Information Requested Occupation Information Requested  
Atlantic Trust Financial Advisor

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

Amount of Each Receipt this Period: 3300.00

Transaction ID: A-C11351

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

**C.** Full Name (Last, First, Middle Initial)  
Robert B. Rowing

Mailing Address 600 East Las Colinas Boulevard  
Suite 1900

City State Zip Code  
Irving TX 75309

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

Name of Employer Information Requested Occupation Information Requested  
TRT Holdings, Inc. Investor

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

Amount of Each Receipt this Period: 2300.00

Transaction ID: A-C11354

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5600.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 62  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

**A.** Full Name (Last, First, Middle Initial)  
Deborah Teesdale

Mailing Address 2104 Augusta Drive

City State Zip Code  
League City TX 77573

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

Name of Employer Information Requested Occupation Information Requested

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

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 17 / 2008

**Transaction ID: A-C11359**

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)  
Tim Word

Mailing Address PO Box 310330

City State Zip Code  
New Braunfels TX 78131-0330

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

Name of Employer Information Requested Occupation Information Requested

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

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 17 / 2008

**Transaction ID: A-C11356**

Amount of Each Receipt this Period  
1800.00

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

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

Mailing Address 4605 94th Street

City State Zip Code  
Lubbock TX 79424-5015

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

Name of Employer Information Requested Occupation Information Requested

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

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 20 / 2008

**Transaction ID: A-C11451**

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) ..... ► **3300.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 62  
(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)  
Neugebauer Congressional Committee

**A.** Full Name (Last, First, Middle Initial)  
James R. Cone, Jr.  
Mailing Address PO Box 10217

City Lubbock State TX Zip Code 79408-3217

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

Name of Employer Cone Elevator Occupation Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 10 / 20 / 2008  
Transaction ID: A-C11399  
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)  
Margaret M. Croft  
Mailing Address 3707 67th Street

City Lubbock State TX Zip Code 79413-6006

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

Name of Employer Self-Employed Occupation Investor

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 10 / 20 / 2008  
Transaction ID: A-C11398  
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)  
Johnnie Sue Dayton  
Mailing Address 9108 York Place

City Lubbock State TX Zip Code 79424-4875

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 210.00

Date of Receipt: 10 / 20 / 2008  
Transaction ID: A-C11388  
Amount of Each Receipt this Period: 100.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 62  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

**A.** Full Name (Last, First, Middle Initial)  
Cris Duncan

Mailing Address 6703 91st Lane

City Lubbock State TX Zip Code 79424-6772

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

Name of Employer Self-Employed Occupation Machine Operator/Laborer

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

Date of Receipt: 10 / 20 / 2008  
**Transaction ID:** A-C11389  
 Amount of Each Receipt this Period: 100.00

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

**B.** Full Name (Last, First, Middle Initial)  
Tim Garrett

Mailing Address 4105 84th Street

City Lubbock State TX Zip Code 79423-1935

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

Name of Employer Westmark Realtors Occupation Owner / Partner

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

Date of Receipt: 10 / 20 / 2008  
**Transaction ID:** A-C11401  
 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)  
Ted Higginbottom

Mailing Address PO Box 494

City Seminole State TX Zip Code 79360-0494

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

Name of Employer Self-Employed Occupation Agriculture

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

Date of Receipt: 10 / 20 / 2008  
**Transaction ID:** A-C11397  
 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) ..... ▶ **600.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 62  
(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)  
Neugebauer Congressional Committee

**A.**

Full Name (Last, First, Middle Initial)  
Andrew S. Hutchison

Mailing Address 7704 Trenton Avenue

City Lubbock State TX Zip Code 79424-0716

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

Name of Employer Self-Employed Occupation Home Builder

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period 300.00

Transaction ID: A-C11393

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

**B.**

Full Name (Last, First, Middle Initial)  
George R. Lewis

Mailing Address 3604 Princeton Avenue

City Dallas State TX Zip Code 75205-3249

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

Name of Employer George Lewis, Inc. Occupation Builder

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period 750.00

Transaction ID: A-C11403

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

**C.**

Full Name (Last, First, Middle Initial)  
Larry K. Lowe

Mailing Address 2313 Broadway Street

City Lubbock State TX Zip Code 79401-2916

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

Name of Employer Self-Employed Occupation Farming / Ranching

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period 350.00

Transaction ID: A-C11406

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 62  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

**A.**

Full Name (Last, First, Middle Initial)  
Arthur Riklin

Mailing Address 122 Laburnum

City San Antonio State TX Zip Code 78209

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 10 / 20 / 2008

**Transaction ID:** A-C11450

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)  
Lloyd W. Powell, Jr.

Mailing Address 5949 Sherry Lane Suite 850

City Dallas State TX Zip Code 75225-8060

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

Name of Employer Cholla Petroleum Occupation Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 10 / 21 / 2008

**Transaction ID:** A-C11418

Amount of Each Receipt this Period 800.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Michal Powell

Mailing Address 3843 Shenandoah Street

City Dallas State TX Zip Code 75205-1701

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 10 / 21 / 2008

**Transaction ID:** A-C11417

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) ..... ► 2800.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 62  
(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)  
Neugebauer Congressional Committee

**A.**

Full Name (Last, First, Middle Initial)  
J. Bruce Barrett

Mailing Address PO Box 280

City State Zip Code  
Springlake TX 79082-0280

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

Name of Employer Self-Employed Occupation  
Cattleman

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

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

Transaction ID: A-C11472

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)  
Johnnie Sue Dayton

Mailing Address 9108 York Place

City State Zip Code  
Lubbock TX 79424-4875

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

Name of Employer Retired Occupation  
Retired

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

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

Transaction ID: A-C11416

Amount of Each Receipt this Period  
40.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Pete Fowler

Mailing Address 330 County Road 328

City State Zip Code  
Rotan TX 79546-6118

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

Name of Employer Self-Employed Occupation  
Rancher

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

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

Transaction ID: A-C11414

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) ..... ▶ **790.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one) <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 15 / 62
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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Subodh Patel		Date of Receipt MM / DD / YYYY 10 / 22 / 2008
	Mailing Address PO Box 2009		<b>Transaction ID:</b> A-C11413
	City Lubbock	State TX	Zip Code 79408-2009
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 501.00
	Name of Employer Self-Employed	Occupation Investor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 501.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Dewayne Chitwood		Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 95 Hedges Road		<b>Transaction ID:</b> A-C11523
	City Abilene	State TX	Zip Code 79605-6514
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
	Name of Employer Loes Tex Drilling Co.	Occupation Executive Administrator	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Dewayne Chitwood		Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 95 Hedges Road		<b>Transaction ID:</b> A-C11524
	City Abilene	State TX	Zip Code 79605-6514
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period -1000.00
	Name of Employer Loes Tex Drilling Co.	Occupation Executive Administrator	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	501.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 62  
(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)  
Neugebauer Congressional Committee

**A.**

Full Name (Last, First, Middle Initial)  
Shirley L. Garrison

Mailing Address 3702 4th Street

City Lubbock State TX Zip Code 79415-5346

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

**Transaction ID: A-C11444**

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)  
Gregg E. Goodall

Mailing Address P.O. Box 1152

City Breckenridge State TX Zip Code 76424-1152

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

Name of Employer Self-Employed Occupation Oil Producer

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3300.00

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

**Transaction ID: A-C11444**

Amount of Each Receipt this Period  
2300.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Joe Grimes

Mailing Address PO Box 65

City Wolforth State TX Zip Code 79382-0065

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

Name of Employer Grimes & Associates Occupation Consultant / Engineer

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

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

**Transaction ID: A-C11444**

Amount of Each Receipt this Period  
2300.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4850.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 62  
(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)  
Neugebauer Congressional Committee

**A.**

Full Name (Last, First, Middle Initial)  
R. C. Sparks

Mailing Address 1413 Lilac Drive

City State Zip Code  
Denver City TX 79323-2435

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

Name of Employer Occupation  
Retired Retired

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

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

Transaction ID: A-C11448

Amount of Each Receipt this Period  
25.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Cleve Whitener

Mailing Address PO Box 1761

City State Zip Code  
Abilene TX 79604-1761

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

Name of Employer Occupation  
Lauren, Eng & Costa President

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

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

Transaction ID: A-C11443

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)  
Patrick Hanford

Mailing Address 4617 91st Street

City State Zip Code  
Lubbock TX 79424-5035

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

Name of Employer Occupation  
TX Tech Health Science Ct- r. Physician

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

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

Transaction ID: A-C11459

Amount of Each Receipt this Period  
100.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1125.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 62  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

**A.** Full Name (Last, First, Middle Initial)  
Glenna S. Wylie

Mailing Address 3619 69th Street

City Lubbock State TX Zip Code 79413-6016

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 285.00

Date of Receipt: 10 / 28 / 2008  
Transaction ID: A-C11458

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)  
Legacy Farms, LP

Mailing Address P.O. Box 1659

City Plainview State TX Zip Code 79073

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 500.00

Date of Receipt: 10 / 29 / 2008  
Transaction ID: A-C11462

Amount of Each Receipt this Period: 500.00

SEE MEMO ITEM

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

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

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

Mailing Address P.O. Box 1659

City Plainview State TX Zip Code 79073-1659

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

Name of Employer Legacy Farms, LP Occupation Member/ Partner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 500.00

Date of Receipt: 10 / 29 / 2008  
Transaction ID: A-PI29

Amount of Each Receipt this Period: 500.00

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

**[MEMO ITEM]**  
Partnership Itemization Memo

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 62  
(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)  
Neugebauer Congressional Committee

**A.**

Full Name (Last, First, Middle Initial)  
R.J. Gilbert

Mailing Address 4600 Goldfield

City San Antonio State TX Zip Code 78218-4601

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

Name of Employer Unilever Dental Research Occupation Physician

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2008

Transaction ID: A-C11460

Amount of Each Receipt this Period 200.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Jim G. Grattan

Mailing Address 2214 Topeka Avenue

City Lubbock State TX Zip Code 79407-2330

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

Name of Employer Texas Cardiac Center Occupation Physician

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2008

Transaction ID: A-C11499

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)  
Law Offices of Sam J. Chase

Mailing Address P.O. Box 726

City Abilene State TX Zip Code 79604

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 11 / 18 / 2008

Transaction ID: A-C11497

Amount of Each Receipt this Period 250.00

SEE MEMO ITEM

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

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 950.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 20 / 62	
	(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)  
Neugebauer Congressional Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Sam Chase		Date of Receipt																					
	Mailing Address PO Box 726		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	8	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	1	8	/	2	0	0	8														
	City	State	Zip Code		<b>Transaction ID:</b> A-PI30																			
	Abilene	TX	79604-0726																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
				<input type="text" value="250.00"/>																				
Name of Employer Self-Employed		Occupation Attorney		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> Partnership Itemization Memo																				
Receipt For:      2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="250.00"/>																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="24666.00"/>

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

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

FOR LINE NUMBER: PAGE 21 / 62  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

**A.** Full Name (Last, First, Middle Initial)  
Association of Progressive Rental Organizations (APRO PAC)  
Mailing Address 1504 Robin Hood Trail

City State Zip Code  
Austin TX 78703

FEC ID number of contributing federal political committee. **C** C00166223

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

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

**Transaction ID:** A-C11352

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)  
ConocoPhillips Spirit PAC  
Mailing Address 14008 Plaza Office Building

City State Zip Code  
Bartlesville OK 74004

FEC ID number of contributing federal political committee. **C** C00112896

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

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

**Transaction ID:** A-C11350

Amount of Each Receipt this Period  
3000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Valero Energy Corporation PAC  
Mailing Address PO Box 696000

City State Zip Code  
San Antonio TX 78269-6000

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 12000.00

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

**Transaction ID:** A-C11355

Amount of Each Receipt this Period  
1000.00

SEE REFUND IN YEAR-END 20-08  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 62  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

**A.** Full Name (Last, First, Middle Initial)  
Xcel Energy Employee PAC

Mailing Address 1225 17th Street  
Suite 900

City State Zip Code  
Denver CO 80202-5534

FEC ID number of contributing federal political committee. **C** C00107771

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** A-C11353

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)  
UPSPAC

Mailing Address 55 Glenlake Parkway NE

City State Zip Code  
Atlanta GA 30328-3474

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5950.00

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

**Transaction ID:** A-I11522

Amount of Each Receipt this Period  
200.00

Inkind: Facility Rental

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

**C.** Full Name (Last, First, Middle Initial)  
Cargill Incorporated PAC

Mailing Address PO Box 9300  
Department 5

City State Zip Code  
Minneapolis MN 55440-9300

FEC ID number of contributing federal political committee. **C** C00067884

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

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

**Transaction ID:** A-C11419

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) ..... ► **3200.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 62  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

**A.** Full Name (Last, First, Middle Initial)  
Land O' Lakes PAC (LOL PAC)

Mailing Address P.O. Box 64101

City State Zip Code  
Saint Paul MN 55164

FEC ID number of contributing federal political committee. **C** C00009423

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

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

**Transaction ID:** A-C11420

Amount of Each Receipt this Period  
1500.00

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

**B.** Full Name (Last, First, Middle Initial)  
The Scooter Store PAC

Mailing Address 1650 Independence Drive

City State Zip Code  
New Braunfels TX 78132

FEC ID number of contributing federal political committee. **C** C00419937

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

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

**Transaction ID:** A-C11415

Amount of Each Receipt this Period  
750.00

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

**C.** Full Name (Last, First, Middle Initial)  
Chrysler Service Contracts, Inc. PAC

Mailing Address 1000 Chrysler Drive

City State Zip Code  
Auburn Hills MI 48326-2766

FEC ID number of contributing federal political committee. **C** C00043687

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** A-C11445

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) ..... ► **3250.00**

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

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

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

FOR LINE NUMBER: PAGE 24 / 62  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

**A.** Full Name (Last, First, Middle Initial)  
Friends of Van Wilson  
Mailing Address P.O. Box 64247  
City Lubbock State TX Zip Code 79464  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00  
Date of Receipt: 10 / 27 / 2008  
Transaction ID: A-C11438  
Amount of Each Receipt this Period: 500.00  
STATE COMMITTEE  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Investment Company Institute (ICI PAC)  
Mailing Address 1401 H Street NW # 1200  
City Washington State DC Zip Code 20005-2110  
FEC ID number of contributing federal political committee. **C** C00105981  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt: 10 / 27 / 2008  
Transaction ID: A-C11446  
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)  
National Pro-Life Alliance PAC  
Mailing Address 4521 Windsor Arms Court  
City Annandale State VA Zip Code 22003  
FEC ID number of contributing federal political committee. **C** C00358051  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00  
Date of Receipt: 10 / 27 / 2008  
Transaction ID: A-C11447  
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) ..... ▶ 2000.00  
**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 62  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

**A.** Full Name (Last, First, Middle Initial)  
Texas Farm Bureau AgFund, Inc.  
Mailing Address PO Box 2689

City State Zip Code  
Waco TX 76702-2689

FEC ID number of contributing federal political committee. **C** C00214981

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

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

**Transaction ID:** A-C11455

Amount of Each Receipt this Period  
5000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Credit Union Legislative Action Council (CULAC)  
Mailing Address 601 Pennsylvania Avenue NW  
South Building Suite 600

City State Zip Code  
Washington DC 20004-2601

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

**Transaction ID:** A-C11457

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)  
Texas Aggregates & Concrete Association PAC  
Mailing Address 900 Congress Avenue  
Suite 200

City State Zip Code  
Austin TX 78701

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

**Transaction ID:** A-C11456

Amount of Each Receipt this Period  
2000.00

State PAC/ See Refund Yr.  
End  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8000.00**

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

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

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

FOR LINE NUMBER: PAGE 26 / 62  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

**A.** Full Name (Last, First, Middle Initial)  
Greenberg Traurig, P.A. PAC

Mailing Address 1221 Brickell Avenue

City State Zip Code  
Miami FL 33131-3224

FEC ID number of contributing federal political committee. **C** C00266585

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 3 0 / 2 0 0 8

**Transaction ID:** A-C11465

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)  
Suddenlink PAC

Mailing Address 12444 Powerscourt Drive  
Suite 420

City State Zip Code  
Saint Louis MO 63131-3660

FEC ID number of contributing federal political committee. **C** C00426601

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 3 0 / 2 0 0 8

**Transaction ID:** A-C11464

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)  
National Association of Home Builders PAC

Mailing Address 1201 15th Street NW

City State Zip Code  
Washington DC 20005-2842

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 3 / 2 0 0 8

**Transaction ID:** A-C11482

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) ..... ► **7000.00**

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

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

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

FOR LINE NUMBER: PAGE 27 / 62

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

**A.**

Full Name (Last, First, Middle Initial)  
Wells Real Estate Funds, Inc. PAC (Wells PAC)

Mailing Address 6200 The Corners Parkway  
Suite 250

City State Zip Code  
Norcross GA 30092

FEC ID number of contributing federal political committee. **C** C00403915

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: A-C11517

Amount of Each Receipt this Period

1000.00

Postmarked 11/3/2008

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

**B.**

Full Name (Last, First, Middle Initial)  
Goldman Sachs Group, Inc. PAC

Mailing Address 101 Constitution Avenue NW  
Suite 1000 East

City State Zip Code  
Washington DC 20001-2133

FEC ID number of contributing federal political committee. **C** C00350744

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

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

Transaction ID: A-C11485

Amount of Each Receipt this Period

3000.00

Postmarked 11/3/2008

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

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

4000.00

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

32450.00

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 28 / 62</span>	
	(check only one)	
<input 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 checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

**A.**

Full Name (Last, First, Middle Initial) First Bank & Trust Co.		Date of Receipt
Mailing Address 7806 Indiana Avenue		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
City	State	Zip Code
Lubbock	TX	79423-1806
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> A-M11372
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="143.43"/>
Occupation		Interest Income
Receipt For: 2008		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	
<input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	
	<input type="text" value="434.44"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="143.43"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="143.43"/>

# 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)  
Neugebauer Congressional Committee

A.

Full Name (Last, First, Middle Initial)  
Bogart Associates, Inc.

Transaction ID: B-E-11290  
Date of Disbursement

Mailing Address 1200 Trinity Drive

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

City State Zip Code  
Alexandria VA 22314

Amount of Each Disbursement this Period

358.80
--------

Purpose of Disbursement  
Catering

003
-----

Category/  
Type

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

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Campaign Financial Services

Transaction ID: B-E-11296  
Date of Disbursement

Mailing Address 7315 Wisconsin Avenue  
Suite 310 East

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

City State Zip Code  
Bethesda MD 20814

Amount of Each Disbursement this Period

1775.00
---------

Purpose of Disbursement  
Bookkeeping Consulting

001
-----

Category/  
Type

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

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Campaign Solutions/ E-Donations

Transaction ID: B-E-11294  
Date of Disbursement

Mailing Address 118 North Saint Asaph Street

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

City State Zip Code  
Alexandria VA 22314-3110

Amount of Each Disbursement this Period

7.19
------

Purpose of Disbursement  
Web Hosting Fee

001
-----

Category/  
Type

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

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

2140.99
---------

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

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Complete Campaigns

Mailing Address 3635 Ruffin Road

City San Diego State CA Zip Code 92123-1880

Purpose of Disbursement

Software Service

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-11295

Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

450.00

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

B.

Full Name (Last, First, Middle Initial)

Lilly & Company

Mailing Address 1005 Congress Avenue  
Suite 910

City Austin State TX Zip Code 78701-2467

Purpose of Disbursement

SEE MEMO ITEMS

Candidate Name

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-11291

Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

5366.99

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

Original vendors exceeding  
reporting threshold itemi-  
zed as memo transactions.

C.

Full Name (Last, First, Middle Initial)

Lilly & Company

Mailing Address 1005 Congress Avenue  
Suite 910

City Austin State TX Zip Code 78701-2467

Purpose of Disbursement

Fundraising Consulting

Candidate Name

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-4141

Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

3000.00

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

**[MEMO ITEM]**  
Subitemization of Lilly  
& Company(10/16/08)

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

5816.99

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)  
Neugebauer Congressional Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Lilly &amp; Company</p> <p>Mailing Address 1005 Congress Avenue Suite 910</p> <p>City Austin State TX Zip Code 78701-2467</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B-S-4142</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1489.27</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> Subitemization of Lilly &amp; Company(10/16/08)</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lilly &amp; Company</p> <p>Mailing Address 1005 Congress Avenue Suite 910</p> <p>City Austin State TX Zip Code 78701-2467</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B-S-4143</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 767.62</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> Subitemization of Lilly &amp; Company(10/16/08)</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Lilly &amp; Company</p> <p>Mailing Address 1005 Congress Avenue Suite 910</p> <p>City Austin State TX Zip Code 78701-2467</p> <p>Purpose of Disbursement Blast Fax &amp; Express Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B-S-4144</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 110.10</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> Subitemization of Lilly &amp; Company(10/16/08)</p>

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

A.

Full Name (Last, First, Middle Initial)  
Premier Signs & Graphics

Mailing Address 6011 43rd Street

City Lubbock State TX Zip Code 79407-3712

Purpose of Disbursement  
Banners & Signs

Candidate Name

006  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-11293  
Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

50.00

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

B.

Full Name (Last, First, Middle Initial)  
AT&T

Mailing Address PO Box 5001

City Carol Stream State IL Zip Code 60197-5001

Purpose of Disbursement  
Telephone Service

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-11365  
Date of Disbursement

10 / 20 / 2008

Amount of Each Disbursement this Period

272.79

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

C.

Full Name (Last, First, Middle Initial)  
Benchmark

Mailing Address 1607 Broadway Street

City Lubbock State TX Zip Code 79401-3120

Purpose of Disbursement  
Printing

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-11366  
Date of Disbursement

10 / 20 / 2008

Amount of Each Disbursement this Period

14.97

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

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

337.76

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)  
Neugebauer Congressional Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Campaign Solutions/ E-Donations <hr/> Mailing Address 118 North Saint Asaph Street <hr/> City Alexandria State VA Zip Code 22314-3110 <hr/> Purpose of Disbursement E-Merchant Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-11473 Date of Disbursement 10 / 20 / 2008 <hr/> Amount of Each Disbursement this Period 371.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Computer Transition Services Inc. <hr/> Mailing Address 3223 S Loop 289 Suite 556 <hr/> City Lubbock State TX Zip Code 79423-1337 <hr/> Purpose of Disbursement Web Hosting Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-11367 Date of Disbursement 10 / 20 / 2008 <hr/> Amount of Each Disbursement this Period 15.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Premier Signs & Graphics <hr/> Mailing Address 6011 43rd Street <hr/> City Lubbock State TX Zip Code 79407-3712 <hr/> Purpose of Disbursement Printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-11368 Date of Disbursement 10 / 20 / 2008 <hr/> Amount of Each Disbursement this Period 619.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

1006.33

**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)  
Neugebauer Congressional Committee

A.

Full Name (Last, First, Middle Initial)  
U-Stor

Mailing Address 3103 50th Street

City Lubbock State TX Zip Code 79413-4103

Purpose of Disbursement  
Storage

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-11364  
Date of Disbursement

10 / 20 / 2008

Amount of Each Disbursement this Period

119.00

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

B.

Full Name (Last, First, Middle Initial)  
AT&T Mobility

Mailing Address PO Box 6463

City Carol Stream State IL Zip Code 60197-6463

Purpose of Disbursement  
Cellular Phone Service

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-11426  
Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

700.72

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

C.

Full Name (Last, First, Middle Initial)  
Benchmark

Mailing Address 1607 Broadway Street

City Lubbock State TX Zip Code 79401-3120

Purpose of Disbursement  
Printing

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-11428  
Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

8.58

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

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

828.30

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)  
Neugebauer Congressional Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bogart Associates, Inc.</p> <p>Mailing Address 1200 Trinity Drive</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Fundraising Consulting Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-11429 <b>Date of Disbursement</b> 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Federal Express</p> <p>Mailing Address PO Box 660481</p> <p>City Dallas State TX Zip Code 75266-0481</p> <p>Purpose of Disbursement Express Mail Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-11430 <b>Date of Disbursement</b> 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 323.40</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Marine Corps Ball</p> <p>Mailing Address 5209 Western Plains Avenue</p> <p>City Abilene State TX Zip Code 79606-5306</p> <p>Purpose of Disbursement Program Expense- Tickets Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-11421 <b>Date of Disbursement</b> 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 180.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

3503.40

**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)  
Neugebauer Congressional Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Switch I.T. Support</p> <p>Mailing Address 1655 Main Street Suite 207</p> <p>City Lubbock State TX Zip Code 79401</p> <p>Purpose of Disbursement Computer Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-11427</p> <p>Date of Disbursement 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 75.78</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Tele-Town Hall Services</p> <p>Mailing Address 5101 Macarthur Boulevard NW</p> <p>City Washington State DC Zip Code 20016-3315</p> <p>Purpose of Disbursement Polling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-11422</p> <p>Date of Disbursement 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 2589.13</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Texas Homeland Security &amp; Sound</p> <p>Mailing Address 7415 Brownfield Highway #6</p> <p>City Lubbock State TX Zip Code 79407</p> <p>Purpose of Disbursement Security System Renewal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-11431</p> <p>Date of Disbursement 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 272.79</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

2937.70

**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)  
Neugebauer Congressional Committee

A.

Full Name (Last, First, Middle Initial)  
Chanda Allen

Mailing Address 5513 99th Street

City Lubbock State TX Zip Code 79424-6263

Purpose of Disbursement  
Reimbursement- Mileage

Candidate Name

002  
Category/  
Type

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

State: District:

Transaction ID: B-E-11425  
Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

82.02

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

B.

Full Name (Last, First, Middle Initial)  
Todd Smith

Mailing Address 3102 104th Street

City Lubbock State TX Zip Code 79423

Purpose of Disbursement  
Banners & Signs

Candidate Name

006  
Category/  
Type

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

State: District:

Transaction ID: B-E-11424  
Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

3000.00

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

C.

Full Name (Last, First, Middle Initial)  
Texas Workforce Commission

Mailing Address 4611 50th Street Suite D

City Lubbock State TX Zip Code 79414-3500

Purpose of Disbursement  
Payroll Taxes

Candidate Name

001  
Category/  
Type

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

State: District:

Transaction ID: B-E-11436  
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

58.20

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

SUBTOTAL of Disbursements This Page (optional) ▶

3140.22

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)  
Neugebauer Congressional Committee

A.	Full Name (Last, First, Middle Initial) Chanda Allen  Mailing Address 5513 99th Street  City Lubbock State TX Zip Code 79424-6263  Purpose of Disbursement Payroll Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-11434 Date of Disbursement 10 / 27 / 2008  Amount of Each Disbursement this Period 1030.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
B.	Full Name (Last, First, Middle Initial) Dana Neugebauer  Mailing Address 611 Pennsylvania Ave. SE #395  City Washington State DC Zip Code 20003  Purpose of Disbursement Reimbursement- Transportation Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-11437 Date of Disbursement 10 / 27 / 2008  Amount of Each Disbursement this Period 63.56  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
C.	Full Name (Last, First, Middle Initial) Kristen Vander-Plas  Mailing Address 4004 47th Street  City Lubbock State TX Zip Code 79413-3704  Purpose of Disbursement Payroll Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-11435 Date of Disbursement 10 / 27 / 2008  Amount of Each Disbursement this Period 387.91  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

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

1481.47

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

A.

Full Name (Last, First, Middle Initial)  
Abilene Chamber of Commerce

Mailing Address PO Box 2281

City Abilene State TX Zip Code 79604-2281

Purpose of Disbursement  
Program Expense- Tickets

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-4214

Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

200.00

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

**[MEMO ITEM]**

Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)

B.

Full Name (Last, First, Middle Initial)  
Alliance Realty Services

Mailing Address P.O. Box 53608

City Lubbock State TX Zip Code 79453

Purpose of Disbursement  
Office Rent

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-4190

Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

578.00

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

**[MEMO ITEM]**

Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)

C.

Full Name (Last, First, Middle Initial)  
Bigam's Smokehouse

Mailing Address 3312 82nd Street

City Lubbock State TX Zip Code 79423

Purpose of Disbursement  
Catering

Candidate Name

003  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-4198

Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

3337.82

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

**[MEMO ITEM]**

Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)

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

0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

A.	Full Name (Last, First, Middle Initial) Brix Steakhouse <hr/> Mailing Address 1404 W 1st Street <hr/> City Hereford State TX Zip Code 79045-6102 <hr/> Purpose of Disbursement Catering Candidate Name <span style="float: right;">003 Category/ Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-S-4215 Date of Disbursement 10 / 28 / 2008 <hr/> Amount of Each Disbursement this Period 290.54 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)
B.	Full Name (Last, First, Middle Initial) Dish Network <hr/> Mailing Address Department 63 <hr/> City Palatine State IL Zip Code 60055 <hr/> Purpose of Disbursement Television Service Candidate Name <span style="float: right;">001 Category/ Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-S-4202 Date of Disbursement 10 / 28 / 2008 <hr/> Amount of Each Disbursement this Period 38.22 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)
C.	Full Name (Last, First, Middle Initial) EFTPS Enrollment Processing Center <hr/> Mailing Address P.O. Box 173788 <hr/> City Denver State CO Zip Code 80217-3788 <hr/> Purpose of Disbursement Payroll Taxes Candidate Name <span style="float: right;">001 Category/ Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-11453 Date of Disbursement 10 / 28 / 2008 <hr/> Amount of Each Disbursement this Period 559.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

559.40

**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)  
Neugebauer Congressional Committee

A.	Full Name (Last, First, Middle Initial) Herring Bank	Transaction ID: B-S-4226
	Mailing Address 2201 Civic Circle	Date of Disbursement 10 / 28 / 2008
	City Amarillo State TX Zip Code 79109-1817	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement Program Expense- Tickets	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Hobby Lobby	Transaction ID: B-S-4193
	Mailing Address 6814 Slide Road	Date of Disbursement 10 / 28 / 2008
	City Lubbock State TX Zip Code 79424-1506	Amount of Each Disbursement this Period 139.61
	Purpose of Disbursement General Office Supplies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Hobby Lobby	Transaction ID: B-S-4200
	Mailing Address 6814 Slide Road	Date of Disbursement 10 / 28 / 2008
	City Lubbock State TX Zip Code 79424-1506	Amount of Each Disbursement this Period 2.70
	Purpose of Disbursement General Office Supplies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

A.

Full Name (Last, First, Middle Initial)  
Lubbock Avalanche-Journal

Mailing Address 710 Avenue J

City Lubbock State TX Zip Code 79401-1808

Purpose of Disbursement  
Subscription Renewal  
Candidate Name

001  
Category/  
Type

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

Transaction ID: B-S-4187

Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

179.40

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

**[MEMO ITEM]**

Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)

B.

Full Name (Last, First, Middle Initial)  
MailStreet Inc

Mailing Address 8000 Peters Road  
Building A Suite 100

City Plantation State FL Zip Code 33324

Purpose of Disbursement  
Web Hosting Fee  
Candidate Name

001  
Category/  
Type

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

Transaction ID: B-S-4191

Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

26.91

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

**[MEMO ITEM]**

Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)

C.

Full Name (Last, First, Middle Initial)  
MailStreet Inc

Mailing Address 8000 Peters Road  
Building A Suite 100

City Plantation State FL Zip Code 33324

Purpose of Disbursement  
Web Hosting Fee  
Candidate Name

001  
Category/  
Type

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

Transaction ID: B-S-4199

Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

107.07

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

**[MEMO ITEM]**

Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)

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

0.00

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)  
Neugebauer Congressional Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Pedro's Tamales</p> <p>Mailing Address 6023 82nd Street</p> <p>City Lubbock State TX Zip Code 79424</p> <p>Purpose of Disbursement Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-S-4217</p> <p>Date of Disbursement 10 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 199.27</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sign Design</p> <p>Mailing Address 6625 19th Street, #109</p> <p>City Lubbock State TX Zip Code 79407</p> <p>Purpose of Disbursement Banners &amp; Signs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-S-4196</p> <p>Date of Disbursement 10 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 48.71</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address Route 3, Box 396 LBB-3SM</p> <p>City Lubbock State TX Zip Code 79401</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-S-4206</p> <p>Date of Disbursement 10 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 168.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)</p>

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

A.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: B-S-4207 Date of Disbursement																			
	Mailing Address Route 3, Box 396 LBB-3SM	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	8	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	8	/	2	0	0	8												
	City Lubbock State TX Zip Code 79401	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Airfare	<table border="1"><tr><td>168.50</td></tr></table>	168.50																		
168.50																					
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>[MEMO ITEM]</b>																			
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: B-S-4208 Date of Disbursement																			
	Mailing Address Route 3, Box 396 LBB-3SM	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	8	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	8	/	2	0	0	8												
	City Lubbock State TX Zip Code 79401	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Airfare	<table border="1"><tr><td>60.50</td></tr></table>	60.50																		
60.50																					
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>[MEMO ITEM]</b>																			
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: B-S-4209 Date of Disbursement																			
	Mailing Address Route 3, Box 396 LBB-3SM	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	8	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	8	/	2	0	0	8												
	City Lubbock State TX Zip Code 79401	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Airfare	<table border="1"><tr><td>96.50</td></tr></table>	96.50																		
96.50																					
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>[MEMO ITEM]</b>																			
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)																			
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**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)  
Neugebauer Congressional Committee

A.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: B-S-4210 Date of Disbursement 10 / 28 / 2008
	Mailing Address Route 3, Box 396 LBB-3SM	Amount of Each Disbursement this Period 96.50
	City Lubbock State TX Zip Code 79401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Airfare Candidate Name	<b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		002 Category/ Type

B.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: B-S-4211 Date of Disbursement 10 / 28 / 2008
	Mailing Address Route 3, Box 396 LBB-3SM	Amount of Each Disbursement this Period 148.00
	City Lubbock State TX Zip Code 79401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Airfare Candidate Name	<b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		002 Category/ Type

C.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: B-S-4212 Date of Disbursement 10 / 28 / 2008
	Mailing Address Route 3, Box 396 LBB-3SM	Amount of Each Disbursement this Period 148.00
	City Lubbock State TX Zip Code 79401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Airfare Candidate Name	<b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		002 Category/ Type

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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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)  
Neugebauer Congressional Committee

A.	Full Name (Last, First, Middle Initial) Tortilla Coast	Transaction ID: B-S-4219 Date of Disbursement 10 / 28 / 2008
	Mailing Address 400 1st St SE	Amount of Each Disbursement this Period 220.00
	City Washington State DC Zip Code 20003-1826	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Catering Candidate Name	<input type="checkbox"/> [MEMO ITEM] Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/Type 003

B.	Full Name (Last, First, Middle Initial) U.S. House of Representatives - Gift Shop	Transaction ID: B-S-4220 Date of Disbursement 10 / 28 / 2008
	Mailing Address B-217 Longworth Building	Amount of Each Disbursement this Period 29.00
	City Washington State DC Zip Code 20515	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement General Office Supplies Candidate Name	<input type="checkbox"/> [MEMO ITEM] Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/Type 001

C.	Full Name (Last, First, Middle Initial) United States Postal Service	Transaction ID: B-S-4185 Date of Disbursement 10 / 28 / 2008
	Mailing Address 8207 Ithaca	Amount of Each Disbursement this Period 111.36
	City Lubbock State TX Zip Code 79423	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage Candidate Name	<input type="checkbox"/> [MEMO ITEM] Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/Type 001

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

A.	Full Name (Last, First, Middle Initial) United States Postal Service	Transaction ID: B-S-4188
	Mailing Address 8207 Ithaca	Date of Disbursement 10 / 28 / 2008
	City Lubbock State TX Zip Code 79423	Amount of Each Disbursement this Period 71.48
	Purpose of Disbursement Postage Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> 001 Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)

B.	Full Name (Last, First, Middle Initial) United States Postal Service	Transaction ID: B-S-4189
	Mailing Address 8207 Ithaca	Date of Disbursement 10 / 28 / 2008
	City Lubbock State TX Zip Code 79423	Amount of Each Disbursement this Period 14.94
	Purpose of Disbursement Postage Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> 001 Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)

C.	Full Name (Last, First, Middle Initial) United States Postal Service	Transaction ID: B-S-4194
	Mailing Address 8207 Ithaca	Date of Disbursement 10 / 28 / 2008
	City Lubbock State TX Zip Code 79423	Amount of Each Disbursement this Period 10.56
	Purpose of Disbursement Postage Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> 001 Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) United States Postal Service</p> <p>Mailing Address 8207 Ithaca</p> <p>City Lubbock State TX Zip Code 79423</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-S-4204</p> <p>Date of Disbursement 10 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 52.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Visa (Wells Fargo Remittance Center)</p> <p>Mailing Address PO Box 23003</p> <p>City Columbus State GA Zip Code 31902-3003</p> <p>Purpose of Disbursement SEE MEMO ITEMS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-11440</p> <p>Date of Disbursement 10 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 7349.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Original vendors exceeding reporting threshold itemized as memo transactions.</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Visa (Wells Fargo Remittance Center)</p> <p>Mailing Address PO Box 23003</p> <p>City Columbus State GA Zip Code 31902-3003</p> <p>Purpose of Disbursement Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-S-4183</p> <p>Date of Disbursement 10 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 106.19</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)</p>

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

7349.99

**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)  
Neugebauer Congressional Committee

A.	Full Name (Last, First, Middle Initial) Visa (Wells Fargo Remittance Center)	Transaction ID: B-S-4205 Date of Disbursement 10 / 28 / 2008
	Mailing Address PO Box 23003	Amount of Each Disbursement this Period 10.00
	City Columbus State GA Zip Code 31902-3003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)
	Purpose of Disbursement Service Fee Candidate Name 001 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Visa (Wells Fargo Remittance Center)	Transaction ID: B-S-4218 Date of Disbursement 10 / 28 / 2008
	Mailing Address PO Box 23003	Amount of Each Disbursement this Period 10.00
	City Columbus State GA Zip Code 31902-3003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)
	Purpose of Disbursement Service Fee Candidate Name 001 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Wal-Mart Supercenter-Lubbock	Transaction ID: B-S-4186 Date of Disbursement 10 / 28 / 2008
	Mailing Address 4215 S Loop 289	Amount of Each Disbursement this Period 108.08
	City Lubbock State TX Zip Code 79423-1100	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of Visa (Wells Fargo Remittance Center)(10/28/08)
	Purpose of Disbursement General Office Supplies Candidate Name 001 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

A.	Full Name (Last, First, Middle Initial) Capitol Hill Club	Transaction ID: B-E-11454 Date of Disbursement 10 / 29 / 2008
	Mailing Address 300 1st St SE	Amount of Each Disbursement this Period 50.00
	City Washington State DC Zip Code 20003-1801	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/ Type

B.	Full Name (Last, First, Middle Initial) Wendell H. Wilbanks	Transaction ID: B-E-11466 Date of Disbursement 11 / 03 / 2008
	Mailing Address 9803 Knoxville Avenue	Amount of Each Disbursement this Period 269.34
	City Lubbock State TX Zip Code 79423-5144	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement- Mileage Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		002 Category/ Type

C.	Full Name (Last, First, Middle Initial) Campaign Solutions/ E-Donations	Transaction ID: B-E-11474 Date of Disbursement 11 / 05 / 2008
	Mailing Address 118 North Saint Asaph Street	Amount of Each Disbursement this Period 120.80
	City Alexandria State VA Zip Code 22314-3110	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement E-Merchant Fee Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>440.14</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

A.

Full Name (Last, First, Middle Initial)  
Huckaby Davis Lisker

Mailing Address 228 South Washington Street  
Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Compliance Consulting

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-11470  
Date of Disbursement

11 / 05 / 2008

Amount of Each Disbursement this Period

625.00

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

B.

Full Name (Last, First, Middle Initial)  
Lilly & Company

Mailing Address 1005 Congress Avenue  
Suite 910

City Austin State TX Zip Code 78701-2467

Purpose of Disbursement  
SEE MEMO ITEMS

Candidate Name

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-11475  
Date of Disbursement

11 / 06 / 2008

Amount of Each Disbursement this Period

6183.31

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

Original vendors exceeding reporting threshold itemized as memo transactions.

C.

Full Name (Last, First, Middle Initial)  
Lilly & Company

Mailing Address 1005 Congress Avenue  
Suite 910

City Austin State TX Zip Code 78701-2467

Purpose of Disbursement  
Printing

Candidate Name

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-4221  
Date of Disbursement

11 / 06 / 2008

Amount of Each Disbursement this Period

1641.59

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

**[MEMO ITEM]**  
Subitemization of Lilly & Company(11/06/08)

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

6808.31

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)  
Neugebauer Congressional Committee

A.	Full Name (Last, First, Middle Initial) Lilly & Company	Transaction ID: B-S-4222 Date of Disbursement 11 / 06 / 2008
	Mailing Address 1005 Congress Avenue Suite 910	Amount of Each Disbursement this Period 679.46
	City Austin State TX Zip Code 78701-2467	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage Candidate Name	<b>[MEMO ITEM]</b> Subitemization of Lilly & Company(11/06/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Lilly & Company	Transaction ID: B-S-4223 Date of Disbursement 11 / 06 / 2008
	Mailing Address 1005 Congress Avenue Suite 910	Amount of Each Disbursement this Period 33.18
	City Austin State TX Zip Code 78701-2467	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Express Mail Candidate Name	<b>[MEMO ITEM]</b> Subitemization of Lilly & Company(11/06/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Lilly & Company	Transaction ID: B-S-4224 Date of Disbursement 11 / 06 / 2008
	Mailing Address 1005 Congress Avenue Suite 910	Amount of Each Disbursement this Period 3000.00
	City Austin State TX Zip Code 78701-2467	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Consulting Candidate Name	<b>[MEMO ITEM]</b> Subitemization of Lilly & Company(11/06/08)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Lilly &amp; Company</p> <p>Mailing Address 1005 Congress Avenue Suite 910</p> <p>City Austin State TX Zip Code 78701-2467</p> <p>Purpose of Disbursement Mileage Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-S-4225 <b>Date of Disbursement</b> 11 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 829.08</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> Subitemization of Lilly &amp; Company(11/06/08)</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Tele-Town Hall Services</p> <p>Mailing Address 5101 Macarthur Boulevard NW</p> <p>City Washington State DC Zip Code 20016-3315</p> <p>Purpose of Disbursement Strategic Campaign Consulting Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-11477 <b>Date of Disbursement</b> 11 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 2190.75</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Tele-Town Hall Services</p> <p>Mailing Address 5101 Macarthur Boulevard NW</p> <p>City Washington State DC Zip Code 20016-3315</p> <p>Purpose of Disbursement Strategic Campaign Consulting Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-11478 <b>Date of Disbursement</b> 11 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 2750.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

**4941.74**

**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)  
Neugebauer Congressional Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Chanda Allen</p> <p>Mailing Address 5513 99th Street</p> <p>City Lubbock State TX Zip Code 79424-6263</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-11480</p> <p>Date of Disbursement 11 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 1030.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Kristen Vander-Plas</p> <p>Mailing Address 4004 47th Street</p> <p>City Lubbock State TX Zip Code 79413-3704</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-11481</p> <p>Date of Disbursement 11 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 483.34</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Complete Campaigns</p> <p>Mailing Address 3635 Ruffin Road</p> <p>City San Diego State CA Zip Code 92123-1880</p> <p>Purpose of Disbursement Software Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-11487</p> <p>Date of Disbursement 11 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 450.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

1963.34

**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)  
Neugebauer Congressional Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bogart Associates, Inc.</p> <p>Mailing Address 1200 Trinity Drive</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Express Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-11496</p> <p>Date of Disbursement 11 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 34.49</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Campaign Solutions/ E-Donations</p> <p>Mailing Address 118 North Saint Asaph Street</p> <p>City Alexandria State VA Zip Code 22314-3110</p> <p>Purpose of Disbursement E-Merchant Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-11519</p> <p>Date of Disbursement 11 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 118.96</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Campaign Financial Services</p> <p>Mailing Address 7315 Wisconsin Avenue Suite 310 East</p> <p>City Bethesda State MD Zip Code 20814</p> <p>Purpose of Disbursement Bookkeeping Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-11501</p> <p>Date of Disbursement 11 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 1775.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

1928.45

**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)  
Neugebauer Congressional Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Chanda Allen  Mailing Address 5513 99th Street  City Lubbock State TX Zip Code 79424-6263 Purpose of Disbursement Payroll Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-11503 Date of Disbursement 11 / 21 / 2008  Amount of Each Disbursement this Period 1030.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Todd Smith  Mailing Address 3102 104th Street  City Lubbock State TX Zip Code 79423 Purpose of Disbursement Reimbursement- Mileage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-11502 Date of Disbursement 11 / 21 / 2008  Amount of Each Disbursement this Period 437.58 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Kristen Vander-Plas  Mailing Address 4004 47th Street  City Lubbock State TX Zip Code 79413-3704 Purpose of Disbursement Payroll Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-11504 Date of Disbursement 11 / 21 / 2008  Amount of Each Disbursement this Period 209.69 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

1677.27

**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)  
Neugebauer Congressional Committee

A.

Full Name (Last, First, Middle Initial)  
American Wind Power Center

Transaction ID: B-E-11507

Mailing Address 1701 Canyon Lake Drive

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

City Lubbock State TX Zip Code 79403

Amount of Each Disbursement this Period

-350.00
---------

Purpose of Disbursement  
Voided Check- Facility Rental

Category/ Type
-------------------

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

Candidate Name

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

State: District:

B.

Full Name (Last, First, Middle Initial)  
Bogart Associates, Inc.

Transaction ID: B-E-11510

Mailing Address 1200 Trinity Drive

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

-358.80
---------

Purpose of Disbursement  
Voided Check- Catering

Category/ Type
-------------------

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

Candidate Name

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

State: District:

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

-708.80
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TOTAL This Period (last page this line number only) .....

46153.00
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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

A.	Full Name (Last, First, Middle Initial) Carl Isett Campaign		Transaction ID: B-E-11432	
	Mailing Address P.O. Box 6337		Date of Disbursement 10 / 24 / 2008	
	City Lubbock	State TX	Zip Code 79493	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Refund of Contribution		010 Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	500.00

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Neugebauer Congressional Committee

A.	Full Name (Last, First, Middle Initial) Tom Feeney for Congress	Transaction ID: B-E-11408 Date of Disbursement 10 / 16 / 2008
	Mailing Address PO Box 622345	Amount of Each Disbursement this Period -1000.00
	City Oviedo State FL Zip Code 32762-2345	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Voided Check: Contribution Candidate Name Tom Feeney Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		011 Category/Type

B.	Full Name (Last, First, Middle Initial) Friends of Dave Reichert	Transaction ID: B-E-11339 Date of Disbursement 10 / 17 / 2008
	Mailing Address PO Box 53322	Amount of Each Disbursement this Period 1000.00
	City Bellevue State WA Zip Code 98015-3322	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Contribution Candidate Name Dave Reichert Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		011 Category/Type

C.	Full Name (Last, First, Middle Initial) Graves for Congress	Transaction ID: B-E-11341 Date of Disbursement 10 / 17 / 2008
	Mailing Address 2345 Grand Boulevard Suite 2400	Amount of Each Disbursement this Period 1000.00
	City Kansas City State MO Zip Code 64108-2642	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Contribution Candidate Name Samuel B. Graves Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		011 Category/Type

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
Neugebauer Congressional Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Henry E. Brown Jr. for Congress  Mailing Address PO Box 61886  City North Charleston State SC Zip Code 29419-1886  Purpose of Disbursement Contribution Candidate Name Henry E. Brown, Jr. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 01 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-11338 Date of Disbursement 10 / 17 / 2008  Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) John Shadeggs Friends  Mailing Address PO Box 45444  City Phoenix State AZ Zip Code 85064-5444  Purpose of Disbursement Contribution Candidate Name John Shadegg Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 03 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-11335 Date of Disbursement 10 / 17 / 2008  Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Knollenberg for Congress  Mailing Address 31000 Telegraph Road Suite 110  City Bingham Farms State MI Zip Code 48025-4321  Purpose of Disbursement Contribution Candidate Name Joe Knollenberg Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-11340 Date of Disbursement 10 / 17 / 2008  Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)  
Neugebauer Congressional Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) People for English</p> <p>Mailing Address PO Box 1940</p> <p>City Erie State PA Zip Code 16507-0940</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Philip S. English</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: PA District: 03</p>	<p><b>Transaction ID:</b> B-E-11336 <b>Date of Disbursement</b>  <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	7	/	2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	1	7	/	2	0	0	8													
1000.00																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Thelma Drake for Congress</p> <p>Mailing Address PO Box 61480</p> <p>City Virginia Beach State VA Zip Code 23466</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Thelma Drake</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: VA District: 02</p>	<p><b>Transaction ID:</b> B-E-11337 <b>Date of Disbursement</b>  <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	7	/	2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	1	7	/	2	0	0	8													
1000.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Texans for Senator John Cornyn, Inc.</p> <p>Mailing Address 6850 Austin Center Boulevard Suite 180</p> <p>City Austin State TX Zip Code 78731-3129</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name John Cornyn, III</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: TX District:</p>	<p><b>Transaction ID:</b> B-E-11423 <b>Date of Disbursement</b>  <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	4	/	2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	2	4	/	2	0	0	8													
1000.00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1" style="width: 100%;"><tr><td style="text-align: center;">3000.00</td></tr></table>	3000.00
3000.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1" style="width: 100%;"><tr><td style="text-align: center;"> </td></tr></table>	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 62 / 62

<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)  
Neugebauer Congressional Committee

A.

Full Name (Last, First, Middle Initial)  
Carl Isett Campaign

Mailing Address P.O. Box 6337

City Lubbock State TX Zip Code 79493

Purpose of Disbursement  
State Contribution

Candidate Name  
Carl Isett

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-11441

Date of Disbursement

10 / 28 / 2008

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) .....

8000.00