

# 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

Friends of Jack Kingston

ADDRESS (number and street) PO Box 2133

Check if different than previously reported. (ACC)

Savannah GA 31402

2. **FEC IDENTIFICATION NUMBER** C00261958

**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

CITY STATE ZIP CODE STATE DISTRICT

GA 01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(c) 30-Day **POST**-Election Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2008 through 09 30 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 J. Harry Haslam, Jr.

Signature of Treasurer Electronically Filed by J. Harry Haslam, Jr. Date 10 14 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

Friends of Jack Kingston

Report Covering the Period:

From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

To: 

|   |   |
|---|---|
| M | M |
| 0 | 9 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)).....  | 143242.50               | 713219.79                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)).....  | 800.00                  | 800.00                             |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                            | 142442.50               | 712419.79                          |
| 7. Net Operating Expenditures   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17).....   | 63551.74                | 394695.70                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 2957.41                 | 7265.93                            |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                                      | 60594.33                | 387429.77                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....   | 913276.44               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 0.00                    |                                    |

**For further information contact:**

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

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Friends of Jack Kingston

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 9 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

**I. RECEIPTS**

**COLUMN A**  
Total This Period

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

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

75300.00

378127.54

(ii) Unitemized.....

2848.50

7392.00

(iii) TOTAL of contributions

78148.50

385519.54

from individuals..... ▶

1000.00

1000.00

(b) Political Party Committees.....

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

64094.00

326700.25

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

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

143242.50

713219.79

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

0.00

0.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

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

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

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

2957.41

7265.93

15. OTHER RECEIPTS

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

4866.32

45216.36

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)..... ▶

151066.23

765702.08

**DETAILED SUMMARY PAGE**  
of Disbursements

| <b>II. DISBURSEMENTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Election Cycle-to-Date</b> |
|--|---------------------------------------|--|
| 17. OPERATING EXPENDITURES.....  | 63551.74                              | 394695.70                                  |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES.....                         | 0.00                                  | 0.00                                       |
| 19. LOAN REPAYMENTS:   |                                       |  |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                                  | 0.00                                       |
| (b) Of all Other Loans.....  | 0.00                                  | 0.00                                       |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                                  | 0.00                                       |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                                       |  |
| (a) Individuals/Persons Other<br>Than Political Committees.....              | 800.00                                | 800.00                                     |
| (b) Political Party Committees.....  | 0.00                                  | 0.00                                       |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                                  | 0.00                                       |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 800.00                                | 800.00                                     |
| 21. OTHER DISBURSEMENTS.....   | 2050.00                               | 85257.04                                   |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 66401.74                              | 480752.74                                  |

**III. CASH SUMMARY**

|   |           |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 828611.95 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....                             | 151066.23 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 979678.18 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 66401.74  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 913276.44 |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 5 / 95                  |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|   | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|   |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

|   |  |  |
|---|--|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Mr. Robert M. Torras, Sr. | Date of Receipt<br>MM / DD / YYYY<br>09 / 05 / 2008  |
|   | Mailing Address 101 Gould Street                                     | <b>Transaction ID:</b> 80926.C15614  |
|   | City State Zip Code<br>Saint Simons Islan GA 31522                   | Amount of Each Receipt this Period<br>1000.00  |
|   | FEC ID number of contributing federal political committee. <b>C</b>  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer<br>Torras Properties   | Occupation<br>President & CEO  |  |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>2000.00                                  |  |

|   |   |  |
|---|---|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Mr. Terry Moore          | Date of Receipt<br>MM / DD / YYYY<br>07 / 07 / 2008  |
|   | Mailing Address 384 Dixie Drive                                     | <b>Transaction ID:</b> 80708.C15576  |
|   | City State Zip Code<br>West Green GA 31567                          | Amount of Each Receipt this Period<br>200.00   |
|   | FEC ID number of contributing federal political committee. <b>C</b> | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer<br>JTM Sales   | Occupation<br>Restaurant Owner                                      |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>200.00                                  |  |

|   |   |  |
|---|---|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Mr. Richard Eckburg      | Date of Receipt<br>MM / DD / YYYY<br>09 / 18 / 2008  |
|   | Mailing Address 48 Cotton Crossing West                             | <b>Transaction ID:</b> 80926.C15682  |
|   | City State Zip Code<br>Savannah GA 31411-1543                       | Amount of Each Receipt this Period<br>2000.00  |
|   | FEC ID number of contributing federal political committee. <b>C</b> | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer<br>Retired   | Occupation<br>Retired   |  |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 | Election Cycle-to-Date ▼<br>4000.00                                 |  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>3200.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 95  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
M. Jerry Hogan, Sr.  
Mailing Address P.O. Box 30277

City Savannah State GA Zip Code 31410

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 09 / 05 / 2008  
**Transaction ID:** 80926.C15625  
 Amount of Each Receipt this Period 500.00

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

**B.** Full Name (Last, First, Middle Initial)  
E. Rees Gibson  
Mailing Address 1516 Saint Marys Ave

City Waycross State GA Zip Code 31501-5022

FEC ID number of contributing federal political committee. C

Name of Employer Gibson McDonald Furniture Occupation owner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt 08 / 11 / 2008  
**Transaction ID:** 80926.C15609  
 Amount of Each Receipt this Period 200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. Thomas W. Wright  
Mailing Address 710 Bradley Point Road

City Savannah State GA Zip Code 31410-3045

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 ▼ 400.00

Date of Receipt 09 / 10 / 2008  
**Transaction ID:** 80926.C15661  
 Amount of Each Receipt this Period 200.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 95  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Mr. Henry D. Stevens IV

Mailing Address 1 Old South Ln

City Savannah State GA Zip Code 31411-2802

FEC ID number of contributing federal political committee. C

Name of Employer Stevens Insurance Services Occupation Sales

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 23 / 2008

**Transaction ID:** 80926.C15695

Amount of Each Receipt this Period 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Dr. Albert J. Kingston

Mailing Address 324 Georgetown Dr.

City Athens State GA Zip Code 30605-3087

FEC ID number of contributing federal political committee. C

Name of Employer Univ. of GA Professor Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 07 / 16 / 2008

**Transaction ID:** 80926.C15591

Amount of Each Receipt this Period 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. Leonard H. Blount

Mailing Address 106 Lancaster Point

City Statesboro State GA Zip Code 30458-9100

FEC ID number of contributing federal political committee. C

Name of Employer Blount, Ansley & Sorrier Ins. Occupation Manager

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2008

**Transaction ID:** 80926.C15679

Amount of Each Receipt this Period 250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 2250.00

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

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 8 / 95                  |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|   | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 15             |                              |

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

|   |   |  |
|---|---|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Dr. James A. Daly      | Date of Receipt<br>MM / DD / YYYY<br>09 / 05 / 2008  |
|   | Mailing Address 1132 Wilmington Island Rd                         | <b>Transaction ID:</b> 80926.C15640  |
|   | City State Zip Code<br>Savannah GA 31410-4509                     | Amount of Each Receipt this Period<br>1000.00  |
|   | FEC ID number of contributing federal political committee.<br>C   | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|   | Name of Employer Information Requested<br>Occupation<br>Physician |  |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>1000.00                               |  |

|   |  |  |
|---|--|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Mr. Charles B. Compton, Jr.   | Date of Receipt<br>MM / DD / YYYY<br>09 / 05 / 2008  |
|   | Mailing Address 55 McIntosh Dr.  | <b>Transaction ID:</b> 80926.C15633  |
|   | City State Zip Code<br>Savannah GA 31406                                 | Amount of Each Receipt this Period<br>1000.00  |
|   | FEC ID number of contributing federal political committee.<br>C          | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|   | Name of Employer Information Requested<br>Occupation<br>Insurance Broker |  |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>2000.00                                      |  |

|   |  |  |
|---|--|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Mr. W. Waldo Bradley  | Date of Receipt<br>MM / DD / YYYY<br>09 / 05 / 2008  |
|   | Mailing Address P.O. Box 1408                                    | <b>Transaction ID:</b> 80926.C15630  |
|   | City State Zip Code<br>Savannah GA 31402-1408                    | Amount of Each Receipt this Period<br>1000.00  |
|   | FEC ID number of contributing federal political committee.<br>C  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|   | Name of Employer Information Requested<br>Occupation<br>Chairman |  |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>2000.00                              |  |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 3000.00 |
| <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 9 / 95  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Judy Eckburg

Mailing Address 48 Cotton Crossing West

City Savannah State GA Zip Code 31411-1543

FEC ID number of contributing federal political committee. C

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 2000.00

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

**Transaction ID:** 80926.C15683

Amount of Each Receipt this Period 2000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. William H. Lovett

Mailing Address 115 E. Jones Street

City Savannah State GA Zip Code 31401

FEC ID number of contributing federal political committee. C

Name of Employer Hussey, Gay Bell & DeYoung, Inc Occupation Architect

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

**Transaction ID:** 80926.C15636

Amount of Each Receipt this Period 500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert S. Jepson, Jr.

Mailing Address 8 Shellworth Crossing

City Savannah State GA Zip Code 31411-2135

FEC ID number of contributing federal political committee. C

Name of Employer Jepson Industries Occupation Investor

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 3500.00

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

**Transaction ID:** 80926.C15686

Amount of Each Receipt this Period 2500.00

Receipt  
 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 10 / 95  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Mr. Joseph W. Dobransky

Mailing Address 3 Land Bridge Lane

City Savannah State GA Zip Code 31411-2734

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 4300.00

Date of Receipt 09 / 26 / 2008  
**Transaction ID:** 81006.C15732  
 Amount of Each Receipt this Period 2300.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Barbara S. Andrews

Mailing Address 111 Green Island Road

City Savannah State GA Zip Code 31411

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2008  
**Transaction ID:** 81006.C15727  
 Amount of Each Receipt this Period 250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Margaret B. Wyly

Mailing Address 1701 Chatham Ave.  
P.O. Box 753

City Tybee Island State GA Zip Code 31328

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

Name of Employer Information Requested Occupation Realtor

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2008  
**Transaction ID:** 81006.C15731  
 Amount of Each Receipt this Period 250.00

Receipt  
 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 11 / 95

(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)  
Friends of Jack Kingston

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Walter N. Lewis

Mailing Address PO Box 60759

City Savannah State GA Zip Code 31420-0759

FEC ID number of contributing federal political committee. C

Name of Employer J.C. Lewis Motor Co. Occupation Auto Dealer

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 05 / 2008

**Transaction ID:** 80926.C15627

Amount of Each Receipt this Period 1000.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Dr. Clyde H. Andrews

Mailing Address 6 She Crab Circle

City Savannah State GA Zip Code 31411

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Endodontist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 08 / 2008

**Transaction ID:** 80926.C15648

Amount of Each Receipt this Period 500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Mrs. Ruth A. Quattlebaum

Mailing Address 122 Grays Creek Drive

City Savannah State GA Zip Code 31410-1041

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Office Manager

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 08 / 2008

**Transaction ID:** 80926.C15652

Amount of Each Receipt this Period 250.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 95

(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)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Melissa Emery

Mailing Address 43 Cotton Crossing West

City Savannah State GA Zip Code 31411-1543

FEC ID number of contributing federal political committee. C

Name of Employer Viewfinder Occupation owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1050.00

Date of Receipt 08 / 07 / 2008

**Transaction ID:** 80926.C15605

Amount of Each Receipt this Period 150.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jim K. Emery

Mailing Address 43 Cotton Crossing West

City Savannah State GA Zip Code 31411-1543

FEC ID number of contributing federal political committee. C

Name of Employer Viewfinder Research Occupation Research Consultant

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1050.00

Date of Receipt 08 / 07 / 2008

**Transaction ID:** 80926.C15604

Amount of Each Receipt this Period 150.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. William Seymour, III

Mailing Address 95 Skidaway Island Park Road #22

City Savannah State GA Zip Code 31411

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 09 / 05 / 2008

**Transaction ID:** 80926.C15613

Amount of Each Receipt this Period 500.00

Receipt  
 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 / 95  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Dr. S. W. Clark, III</p> <p>Mailing Address 502 Isabella Street</p> <p>City State Zip Code<br/>Waycross GA 31501</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation<br/>The Clark Eye Clinic, P.C. Ophthalmologist</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼<br/> <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">1000.00</span></p> | <p>Date of Receipt<br/> <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span><br/> <span style="border: 1px solid black; padding: 2px;">07 / 30 / 2008</span></p> <p><b>Transaction ID:</b> 80926.C15601</p> <p>Amount of Each Receipt this Period<br/> <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p>Receipt<br/> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> |
|---|---|

|   |  |
|---|--|
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>F. Sprague Exley</p> <p>Mailing Address 3 Brightside Lane</p> <p>City State Zip Code<br/>Savannah GA 31411</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation<br/>Savannah Foods VICE PRESIDENT</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼<br/> <input type="checkbox"/> Primary   <input type="checkbox"/> General<br/> <input checked="" type="checkbox"/> Other (specify) ▼<br/>                 General 2008</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">500.00</span></p> | <p>Date of Receipt<br/> <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span><br/> <span style="border: 1px solid black; padding: 2px;">09 / 23 / 2008</span></p> <p><b>Transaction ID:</b> 80926.C15716</p> <p>Amount of Each Receipt this Period<br/> <span style="border: 1px solid black; padding: 2px;">500.00</span></p> <p>Receipt<br/> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> |
|---|--|

|  |  |
|--|--|
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Mr. Alex Salgueiro</p> <p>Mailing Address 70 Peregrine Crossing</p> <p>City State Zip Code<br/>Savannah GA 31411-2832</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation<br/>Savannah Restaurant Corp. President</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼<br/> <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">500.00</span></p> | <p>Date of Receipt<br/> <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span><br/> <span style="border: 1px solid black; padding: 2px;">09 / 10 / 2008</span></p> <p><b>Transaction ID:</b> 80926.C15656</p> <p>Amount of Each Receipt this Period<br/> <span style="border: 1px solid black; padding: 2px;">500.00</span></p> <p>Receipt<br/> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> |
|--|--|

|  |   |
|--|---|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <span style="border: 1px solid black; padding: 2px;">2000.00</span> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <span style="border: 1px solid black; padding: 2px;"> </span>       |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 95

(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)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Glen M. Darbyshire

Mailing Address 519 Whitfield Ave.

City Savannah State GA Zip Code 31406

FEC ID number of contributing federal political committee. C

Name of Employer: Hunter, Mclean, Exley & Dunn  
Occupation: Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
09 / 08 / 2008

Transaction ID: 80926.C15650

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. J. Eugene Marshall

Mailing Address 15 Mulberry Bluff Drive

City Savannah State GA Zip Code 31406

FEC ID number of contributing federal political committee. C

Name of Employer: Mass Mutual  
Occupation: General Agent

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
09 / 05 / 2008

Transaction ID: 80926.C15639

Amount of Each Receipt this Period  
300.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. Anthony Abbott

Mailing Address 117 W. Oglethorpe Ave.

City Savannah State GA Zip Code 31401-3636

FEC ID number of contributing federal political committee. C

Name of Employer: Abbott & Abbott  
Occupation: Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
09 / 17 / 2008

Transaction ID: 80926.C15663

Amount of Each Receipt this Period  
500.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 95  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Martin R. Sullivan

Mailing Address 37 W Fairmont Ave # 100

City Savannah State GA Zip Code 31406-3455

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

Name of Employer Sullivans Staffing Occupation owner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 08 / 2008  
**Transaction ID:** 80926.C15649  
 Amount of Each Receipt this Period 500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. J. Thomas Coleman, Jr.

Mailing Address P. O. Box 22398

City Savannah State GA Zip Code 31403-2398

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

Name of Employer Bonitz Occupation President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt 09 / 05 / 2008  
**Transaction ID:** 80926.C15647  
 Amount of Each Receipt this Period 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. J. Thomas Coleman, Jr.

Mailing Address P. O. Box 22398

City Savannah State GA Zip Code 31403-2398

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

Name of Employer Bonitz Occupation President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼ General 2008

Election Cycle-to-Date ▼ 4500.00

Date of Receipt 09 / 25 / 2008  
**Transaction ID:** 81006.C15718  
 Amount of Each Receipt this Period 500.00

Receipt  
 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 16 / 95  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Barbara W. Nutting

Mailing Address 9 Magnolia Crossing

City Savannah State GA Zip Code 31411-1417

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt M M / D D / Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

**Transaction ID:** 80926.C15619

Amount of Each Receipt this Period 200.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. William H. Ulmer

Mailing Address 10 Windwalk Lane

City Savannah State GA Zip Code 31411-2222

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 M M / D D / Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

**Transaction ID:** 80926.C15620

Amount of Each Receipt this Period 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Dr. James G. Lindley, Jr.

Mailing Address 17 Bluff Drive

City Savannah State GA Zip Code 31406-7504

FEC ID number of contributing federal political committee. C

Name of Employer Neurological Instit. of Sav. Occupation Neurosurgeon

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

**Transaction ID:** 80926.C15660

Amount of Each Receipt this Period 500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 1700.00

**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 / 95  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Dr. A. Jolly Howard

Mailing Address 11 Bartow Point Drive

City Savannah State GA Zip Code 31404

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

Name of Employer Self-Employed Occupation Dentist

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

Date of Receipt 09 / 10 / 2008  
**Transaction ID:** 80926.C15659  
 Amount of Each Receipt this Period 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jerry L. Loupee

Mailing Address 2 Windswept Lane

City Savannah State GA Zip Code 31411-2712

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 09 / 05 / 2008  
**Transaction ID:** 80926.C15631  
 Amount of Each Receipt this Period 250.00

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

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

Mailing Address P.O. Box 2133

City Savannah State GA Zip Code 31402

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

Name of Employer . Occupation .

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

Date of Receipt 09 / 08 / 2008  
**Transaction ID:** 80926.C15653  
 Amount of Each Receipt this Period 200.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1450.00**

**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 / 95  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Dr. Brian Kornblatt

Mailing Address 1416 Walthour Road

City Savannah State GA Zip Code 31410

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Physician

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 23 / 2008

**Transaction ID:** 80926.C15696

Amount of Each Receipt this Period 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. R. E. Cartledge

Mailing Address 15 Lake Street Suite 235

City Savannah State GA Zip Code 31411-2913

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 ▼ 1500.00

Date of Receipt 09 / 10 / 2008

**Transaction ID:** 80926.C15654

Amount of Each Receipt this Period 500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. R. E. Cartledge

Mailing Address 15 Lake Street Suite 235

City Savannah State GA Zip Code 31411-2913

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 3300.00

Date of Receipt 09 / 25 / 2008

**Transaction ID:** 81006.C15717

Amount of Each Receipt this Period 1800.00

Receipt  
 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 19 / 95

(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)  
Friends of Jack Kingston

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Robert B. Baker

Mailing Address 100 Morgan Industrial Blvd.

City State Zip Code  
Garden City GA 31408

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Baker Construction owner

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
 General 2008 4500.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 5 |   | 2 | 0 | 0 | 8 |

**Transaction ID:** 81006.C15728

Amount of Each Receipt this Period  
2500.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Dale C. Critz, Jr.

Mailing Address 5 Grimball River Road

City State Zip Code  
Savannah GA 31406

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Critz, Inc. Auto Dealer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
 General 2008 4500.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 0 | 8 |

**Transaction ID:** 80926.C15684

Amount of Each Receipt this Period  
2500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Edward W. Shaw

Mailing Address 1715 N. Nelson St.

City State Zip Code  
Arlington VA 22207

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
General Dynamics Corp. Director Aerospace Programs

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
1000.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 7 |   | 2 | 0 | 0 | 8 |

**Transaction ID:** 80708.C15561

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 6000.00

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

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

|   |   |
|---|---|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: <span style="float: right;">PAGE 20 / 95</span><br>(check only one)<br><input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d<br><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)  
Friends of Jack Kingston

|  |  |
|--|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Mr. Edward W. Shaw</p> <p>Mailing Address 1715 N. Nelson St.</p> <p>City State Zip Code<br/>Arlington VA 22207</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer<br/>General Dynamics Corp.</p> <p>Occupation<br/>Director Aerospace Programs</p> <p>Receipt For: 2008<br/> <input type="checkbox"/> Primary   <input type="checkbox"/> General<br/> <input checked="" type="checkbox"/> Other (specify) ▼<br/>                 General 2008</p> <p>Election Cycle-to-Date ▼<br/> <span style="border: 1px solid black; padding: 2px;">2000.00</span></p> | <p>Date of Receipt<br/> <span style="border: 1px solid black; padding: 2px;">09 / 17 / 2008</span></p> <p><b>Transaction ID:</b> 80926.C15665</p> <p>Amount of Each Receipt this Period<br/> <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p>Receipt<br/> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> |
|--|--|

|  |  |
|--|--|
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Mr. Peter C. Ince</p> <p>Mailing Address 1216 SW Mulberry Way</p> <p>City State Zip Code<br/>Boca Raton FL 33486</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer<br/>Information Requested</p> <p>Occupation<br/>Contractor</p> <p>Receipt For: 2008<br/> <input type="checkbox"/> Primary   <input type="checkbox"/> General<br/> <input checked="" type="checkbox"/> Other (specify) ▼<br/>                 General 2008</p> <p>Election Cycle-to-Date ▼<br/> <span style="border: 1px solid black; padding: 2px;">3400.00</span></p> | <p>Date of Receipt<br/> <span style="border: 1px solid black; padding: 2px;">09 / 17 / 2008</span></p> <p><b>Transaction ID:</b> 80926.C15672</p> <p>Amount of Each Receipt this Period<br/> <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p>Receipt<br/> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> |
|--|--|

|   |  |
|---|--|
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Mr. Michael J. Kistler</p> <p>Mailing Address 109 Modena Island Drive</p> <p>City State Zip Code<br/>Savannah GA 31411-1009</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer<br/>Information Requested</p> <p>Occupation<br/>Real Estate &amp; Develop.</p> <p>Receipt For: 2008<br/> <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼<br/> <span style="border: 1px solid black; padding: 2px;">2000.00</span></p> | <p>Date of Receipt<br/> <span style="border: 1px solid black; padding: 2px;">09 / 05 / 2008</span></p> <p><b>Transaction ID:</b> 80926.C15634</p> <p>Amount of Each Receipt this Period<br/> <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p>Receipt<br/> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> |
|---|--|

|  |   |
|--|---|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <span style="border: 1px solid black; padding: 2px;">3000.00</span> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <span style="border: 1px solid black; padding: 2px;"> </span>       |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 21 / 95                 |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|   | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|   |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

|   |   |  |
|---|---|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Mr. William E. Johnston  | Date of Receipt<br>MM / DD / YYYY<br>07 / 11 / 2008  |
|   | Mailing Address 329 Commercial Drive, Suite 110                     | <b>Transaction ID:</b> 80711.C15584  |
|   | City State Zip Code<br>Savannah GA 31406                            | Amount of Each Receipt this Period<br>1000.00  |
|   | FEC ID number of contributing federal political committee. <b>C</b> | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Retired  | Occupation Retired  |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>1000.00                                 |  |

|   |   |  |
|---|---|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Philip Solomons, Jr.     | Date of Receipt<br>MM / DD / YYYY<br>09 / 22 / 2008  |
|   | Mailing Address 31 E. 49 Street                                     | <b>Transaction ID:</b> 80926.C15689  |
|   | City State Zip Code<br>Savannah GA 31405                            | Amount of Each Receipt this Period<br>2500.00  |
|   | FEC ID number of contributing federal political committee. <b>C</b> | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Information Requested  | Occupation Investments  |  |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 | Election Cycle-to-Date ▼<br>2500.00                                 |  |

|   |   |  |
|---|---|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Gary Sadowski            | Date of Receipt<br>MM / DD / YYYY<br>09 / 05 / 2008  |
|   | Mailing Address 230 Lyman Hall Road                                 | <b>Transaction ID:</b> 80926.C15642  |
|   | City State Zip Code<br>Savannah GA 31410                            | Amount of Each Receipt this Period<br>1000.00  |
|   | FEC ID number of contributing federal political committee. <b>C</b> | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Sadowski & Company, P.C.   | Occupation Self-Employed  |  |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>1000.00                                 |  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>4500.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

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

|   |  |
|---|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: <span style="float: right;">PAGE 22 / 95</span> |
|   | (check only one)   |
| <input checked="" type="checkbox"/> 11a                                       | <input type="checkbox"/> 11b                                     |
| <input type="checkbox"/> 12   | <input type="checkbox"/> 13a                                     |
| <input type="checkbox"/> 11c  | <input type="checkbox"/> 11d                                     |
| <input type="checkbox"/> 13b  | <input type="checkbox"/> 14                                      |
| <input type="checkbox"/>  | <input type="checkbox"/> 15                                      |

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

|           |  |  |
|-----------|--|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Harry Mahn  | Date of Receipt<br>MM / DD / YYYY<br>09 / 05 / 2008  |
|           | Mailing Address 2024 Walthour Road   | <b>Transaction ID:</b> 80926.C15612  |
|           | City Savannah State GA Zip Code 31410  | Amount of Each Receipt this Period<br>500.00   |
|           | FEC ID number of contributing federal political committee. <b>C</b>  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|           | Name of Employer Springfield Ford Occupation General Manager<br>Receipt For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼<br>500.00 |  |

|           |  |  |
|-----------|--|--|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Mr. James E. Hungerpiller   | Date of Receipt<br>MM / DD / YYYY<br>09 / 10 / 2008  |
|           | Mailing Address 12730 Rockwell Avenue  | <b>Transaction ID:</b> 80926.C15655  |
|           | City Savannah State GA Zip Code 31419  | Amount of Each Receipt this Period<br>1000.00  |
|           | FEC ID number of contributing federal political committee. <b>C</b>  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|           | Name of Employer Retired Occupation Retired<br>Receipt For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼<br>2100.00 |  |

|           |  |  |
|-----------|--|--|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Mrs. Amy C. Vestal  | Date of Receipt<br>MM / DD / YYYY<br>09 / 05 / 2008  |
|           | Mailing Address 13 Top Sail Court  | <b>Transaction ID:</b> 80926.C15629  |
|           | City Savannah State GA Zip Code 31411  | Amount of Each Receipt this Period<br>1000.00  |
|           | FEC ID number of contributing federal political committee. <b>C</b>  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|           | Name of Employer Housewife Occupation Housewife<br>Receipt For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼<br>1000.00 |  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>2500.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 95  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jimmy Dockery

Mailing Address 1006 Pinetree Circle

City Douglas State GA Zip Code 31533

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

Name of Employer AgSouth Farm Credit Occupation Insurance Agent

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008

Date of Receipt 07 / 07 / 2008  
**Transaction ID:** 80708.C15570  
 Amount of Each Receipt this Period 200.00

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

**B.** Full Name (Last, First, Middle Initial)  
Ms. Patricia A. Daley

Mailing Address 9571 Lagersfield Circle

City Vienna State VA Zip Code 22181-6182

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

Name of Employer Daley Policy Group Occupation Lobbyist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008

Date of Receipt 09 / 05 / 2008  
**Transaction ID:** 80926.C15641  
 Amount of Each Receipt this Period 2300.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Mary A. Dobransky

Mailing Address 3 Land Bridge Lane

City Savannah State GA Zip Code 31411

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ General 2008

Election Cycle-to-Date ▼ 2008

Date of Receipt 09 / 26 / 2008  
**Transaction ID:** 81006.C15733  
 Amount of Each Receipt this Period 200.00

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

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

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

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

|   |  |
|---|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: <span style="float: right;">PAGE 24 / 95</span> |
|   | (check only one)   |
| <input checked="" type="checkbox"/> 11a                                       | <input type="checkbox"/> 11b                                     |
| <input type="checkbox"/> 12   | <input type="checkbox"/> 13a                                     |
| <input type="checkbox"/> 11c  | <input type="checkbox"/> 11d                                     |
| <input type="checkbox"/> 13b  | <input type="checkbox"/> 14                                      |
| <input type="checkbox"/>  | <input type="checkbox"/> 15                                      |

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

|   |  |  |
|---|--|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Ms. Bonnie J. Singer        | Date of Receipt<br>MM / DD / YYYY<br>09 / 23 / 2008  |
|   | Mailing Address 10805 Hidden Trail Court                               | <b>Transaction ID:</b> 80926.C15710  |
|   | City State Zip Code<br>Potomac MD 20854                                | Amount of Each Receipt this Period<br>1000.00  |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|   | Name of Employer Occupation<br>Washington Alliance Group, Inc. owner   |  |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 | Election Cycle-to-Date ▼<br>5000.00                                    |  |

|   |  |  |
|---|--|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Mr. William T. Brown, Jr.   | Date of Receipt<br>MM / DD / YYYY<br>09 / 05 / 2008  |
|   | Mailing Address 102 Halfmoon River Court                               | <b>Transaction ID:</b> 80926.C15637  |
|   | City State Zip Code<br>Savannah GA 31410                               | Amount of Each Receipt this Period<br>1000.00  |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|   | Name of Employer Occupation<br>SAVANNAH PILOTS ASSOCIATION Pilot       |  |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>3000.00                                    |  |

|   |  |  |
|---|--|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Mr. John E. Pfaff           | Date of Receipt<br>MM / DD / YYYY<br>07 / 11 / 2008  |
|   | Mailing Address 2790 Deer Creek Lane                                   | <b>Transaction ID:</b> 80711.C15585  |
|   | City State Zip Code<br>Waycross GA 31503                               | Amount of Each Receipt this Period<br>200.00   |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|   | Name of Employer Occupation<br>Edward Jones Stockbroker                |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>200.00                                     |  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>2200.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 95  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ben I. Copeland, Sr.  
Mailing Address P. O. Box 217

City State Zip Code  
Lakeland GA 31635

FEC ID number of contributing federal political committee. C

Name of Employer: Patton Seed Company   Occupation: Executive

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 09 / 05 / 2008  
**Transaction ID:** 80926.C15616  
 Amount of Each Receipt this Period 1500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. John C. Kane  
Mailing Address 5 Spring Marsh Circle

City State Zip Code  
Savannah GA 31411-2948

FEC ID number of contributing federal political committee. C

Name of Employer: Retired   Occupation: Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 09 / 22 / 2008  
**Transaction ID:** 80926.C15676  
 Amount of Each Receipt this Period 2300.00

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

**C.** Full Name (Last, First, Middle Initial)  
H.S. Cook, III  
Mailing Address PO Box 7089

City State Zip Code  
Garden City GA 31418

FEC ID number of contributing federal political committee. C

Name of Employer: Savannah Tire Company   Occupation: Vice-President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 10 / 2008  
**Transaction ID:** 80926.C15658  
 Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 4800.00

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

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 26 / 95                 |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|   | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|   |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

|   |   |  |
|---|---|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Mr. Samuel G. McCachern  | Date of Receipt<br>MM / DD / YYYY<br>09 / 17 / 2008  |
|   | Mailing Address 49 Bluff Drive                                      | <b>Transaction ID:</b> 80926.C15662  |
|   | City State Zip Code<br>Savannah GA 31406                            | Amount of Each Receipt this Period<br>500.00   |
|   | FEC ID number of contributing federal political committee. <b>C</b> | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer<br>Thomas & Hutton Engineering Co  | Occupation<br>Engineer  |  |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>500.00                                  |  |

|   |   |  |
|---|---|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Mr. William N. Searcy    | Date of Receipt<br>MM / DD / YYYY<br>09 / 22 / 2008  |
|   | Mailing Address PO Box 8002   | <b>Transaction ID:</b> 80926.C15673  |
|   | City State Zip Code<br>Savannah GA 31412                            | Amount of Each Receipt this Period<br>250.00   |
|   | FEC ID number of contributing federal political committee. <b>C</b> | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer<br>Brannen, Searcy & Smith LLP   | Occupation<br>Attorney  |  |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 | Election Cycle-to-Date ▼<br>250.00                                  |  |

|   |   |  |
|---|---|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>John B. Demere           | Date of Receipt<br>MM / DD / YYYY<br>09 / 05 / 2008  |
|   | Mailing Address 286 Turners Rock Road                               | <b>Transaction ID:</b> 80926.C15632  |
|   | City State Zip Code<br>Savannah GA 31410                            | Amount of Each Receipt this Period<br>1000.00  |
|   | FEC ID number of contributing federal political committee. <b>C</b> | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer<br>SunTrust  | Occupation<br>Executive   |  |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>1000.00                                 |  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>1750.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 27 / 95                 |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|   | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|   |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

|   |   |  |
|---|---|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Ms. Jean Gingras Denton  | Date of Receipt<br>MM / DD / YYYY<br>09 / 23 / 2008  |
|   | Mailing Address 15 Ninth Street, SE                                 | <b>Transaction ID:</b> 80926.C15705  |
|   | City State Zip Code<br>Washington DC 20003                          | Amount of Each Receipt this Period<br>1000.00  |
|   | FEC ID number of contributing federal political committee. <b>C</b> | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer<br>Innovative Federal Strategies   | Occupation<br>Partner   |  |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 | Election Cycle-to-Date ▼<br>2000.00                                 |  |

|   |   |  |
|---|---|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Mrs. Eleanor N. Duffie   | Date of Receipt<br>MM / DD / YYYY<br>09 / 05 / 2008  |
|   | Mailing Address 18 Shellwind Drive                                  | <b>Transaction ID:</b> 80926.C15626  |
|   | City State Zip Code<br>Savannah GA 31411                            | Amount of Each Receipt this Period<br>1000.00  |
|   | FEC ID number of contributing federal political committee. <b>C</b> | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer<br>Homemaker   | Occupation<br>Homemaker   |  |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>2000.00                                 |  |

|   |   |  |
|---|---|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Mr. Michael Hogan        | Date of Receipt<br>MM / DD / YYYY<br>09 / 05 / 2008  |
|   | Mailing Address 209 Winchester Dr.                                  | <b>Transaction ID:</b> 80926.C15624  |
|   | City State Zip Code<br>Savannah GA 31410                            | Amount of Each Receipt this Period<br>500.00   |
|   | FEC ID number of contributing federal political committee. <b>C</b> | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer<br>Information Requested   | Occupation<br>Hogans Marina   |  |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>500.00                                  |  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>2500.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 28 / 95                 |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|   | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|   |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

|           |  |  |
|-----------|--|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Mrs. Ann O. Duskin  | Date of Receipt<br>MM / DD / YYYY<br>08 / 07 / 2008  |
|           | Mailing Address 398 7th Avenue NE  | <b>Transaction ID:</b> 80926.C15607  |
|           | City Dawson State GA Zip Code 39842  | Amount of Each Receipt this Period<br>500.00   |
|           | FEC ID number of contributing federal political committee. <b>C</b>  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|           | Name of Employer Housewife Occupation Housewife<br>Receipt For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>500.00   |

|           |  |  |
|-----------|--|--|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Mr. James R. Tucker, Jr.  | Date of Receipt<br>MM / DD / YYYY<br>09 / 23 / 2008  |
|           | Mailing Address 6607 Chesterfield Avenue   | <b>Transaction ID:</b> 80926.C15698  |
|           | City Mc Lean State VA Zip Code 22101-5234  | Amount of Each Receipt this Period<br>250.00   |
|           | FEC ID number of contributing federal political committee. <b>C</b>  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|           | Name of Employer Akin Gump Strauss Hauer & Feld Occupation Attorney<br>Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 | Election Cycle-to-Date ▼<br>500.00   |

|           |  |  |
|-----------|--|--|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Mr. Michael C. Voisin   | Date of Receipt<br>MM / DD / YYYY<br>09 / 23 / 2008  |
|           | Mailing Address 116 East Ellendale Estates Drive   | <b>Transaction ID:</b> 80926.C15692  |
|           | City Houma State LA Zip Code 70360   | Amount of Each Receipt this Period<br>500.00   |
|           | FEC ID number of contributing federal political committee. <b>C</b>  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|           | Name of Employer Motivati Seafoods Occupation CEO<br>Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 | Election Cycle-to-Date ▼<br>1500.00  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>1250.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 95

(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)  
Friends of Jack Kingston

**A.**

Full Name (Last, First, Middle Initial)  
Mr. JC Burel

Mailing Address P.O. Box 905

City State Zip Code  
Tybee Island GA 31328-0905

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 18 / 2008

**Transaction ID:** 80926.C15681

Amount of Each Receipt this Period 250.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Luzy Boone

Mailing Address 411 Camellia Ave

City State Zip Code  
Douglas GA 31533-3301

FEC ID number of contributing federal political committee. C

Name of Employer Douglas Family Medicine Occupation Office Manager

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 07 / 07 / 2008

**Transaction ID:** 80708.C15572

Amount of Each Receipt this Period 300.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Sheryl Taylor

Mailing Address 261 Ira V Ln

City State Zip Code  
Ambrose GA 31512-3612

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 07 / 16 / 2008

**Transaction ID:** 80926.C15589

Amount of Each Receipt this Period 250.00

Receipt  
 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 30 / 95

(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)  
Friends of Jack Kingston

**A.**

Full Name (Last, First, Middle Initial)  
John Sacco

Mailing Address 3600 Pinehurst Dr

City Bakersfield State CA Zip Code 93306-3639

FEC ID number of contributing federal political committee. C

Name of Employer: Sierra Recycling & Demolition  
Occupation: owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 07 / 23 / 2008

**Transaction ID:** 80926.C15594

Amount of Each Receipt this Period 1000.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Rep. Jay Shaw

Mailing Address PO Box 245

City Lakeland State GA Zip Code 31635-0245

FEC ID number of contributing federal political committee. C

Name of Employer: Information Requested  
Occupation: Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 05 / 2008

**Transaction ID:** 80926.C15615

Amount of Each Receipt this Period 1000.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Ann Lee

Mailing Address RR 1 Box 3A

City Lakeland State GA Zip Code 31635-9701

FEC ID number of contributing federal political committee. C

Name of Employer: Information Requested  
Occupation: Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 05 / 2008

**Transaction ID:** 80926.C15617

Amount of Each Receipt this Period 1000.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 95  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Lydia R Hadwin  
Mailing Address 120 Winterberry Dr  
City Savannah State GA Zip Code 31406-6359  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Housewife Occupation Housewife  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt 09 / 05 / 2008  
Transaction ID: 80926.C15621  
Amount of Each Receipt this Period 500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Amos Timna  
Mailing Address 36 Cotton Xing W  
City Savannah State GA Zip Code 31411-1543  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Chatham OB GYN Occupation Medical Doctor  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt 09 / 05 / 2008  
Transaction ID: 80926.C15622  
Amount of Each Receipt this Period 500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Frank C Stanton  
Mailing Address 203 Wickersham Dr  
City Savannah State GA Zip Code 31411-1318  
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) ▼ 500.00  
Date of Receipt 09 / 05 / 2008  
Transaction ID: 80926.C15635  
Amount of Each Receipt this Period 500.00  
Receipt  
 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 32 / 95  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Charles W. Baines, Jr

Mailing Address 27 Modena Island Dr

City Savannah State GA Zip Code 31411-1005

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

Name of Employer Savannah Restaurants Corp Occupation Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 10 / 2008  
**Transaction ID:** 80926.C15657  
Amount of Each Receipt this Period 500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. John K. Dukes, Jr

Mailing Address 1204 Cloverhill Dr

City Valdosta State GA Zip Code 31602

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2008  
**Transaction ID:** 80926.C15667  
Amount of Each Receipt this Period 250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. Richard Miller

Mailing Address 16 Marsh Tower Lane

City Savannah State GA Zip Code 31411

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008

Election Cycle-to-Date ▼ 200.00

Date of Receipt 09 / 22 / 2008  
**Transaction ID:** 80926.C15675  
Amount of Each Receipt this Period 200.00

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

**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 33 / 95  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Frances B. Kane

Mailing Address 5 Spring Marsh Cir

City Savannah State GA Zip Code 31411

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008

Election Cycle-to-Date ▼ 2008

Date of Receipt 09 / 22 / 2008

Transaction ID: 80926.C15677

Amount of Each Receipt this Period 200.00

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

**B.** Full Name (Last, First, Middle Initial)  
Sybil Lasker

Mailing Address 2 Spring Marsh Cir

City Savannah State GA Zip Code 31411

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008

Election Cycle-to-Date ▼ 2008

Date of Receipt 09 / 18 / 2008

Transaction ID: 80926.C15688

Amount of Each Receipt this Period 500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Lynda G Beam

Mailing Address 312 Vernonburg Rd

City Savannah State GA Zip Code 31419

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008

Election Cycle-to-Date ▼ 2008

Date of Receipt 09 / 23 / 2008

Transaction ID: 80926.C15697

Amount of Each Receipt this Period 200.00

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

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

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

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

|   |   |              |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 34 / 95 |
|   | <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)  
Friends of Jack Kingston

|           |   |  |
|-----------|---|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Mr. Shawn H. Edwards   | Date of Receipt<br>MM / DD / YYYY<br>09 / 23 / 2008  |
|           | Mailing Address 1226 Rhode Island Ave NE  | <b>Transaction ID:</b> 80926.C15709  |
|           | City State Zip Code<br>Washington DC 20018  | Amount of Each Receipt this Period<br>500.00   |
|           | FEC ID number of contributing federal political committee. <b>C</b>   | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|           | Name of Employer: Cassidy & Associates    Occupation: VICE PRESIDENT<br>Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 | Election Cycle-to-Date ▼<br>500.00   |

|           |   |  |
|-----------|---|--|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Christine OConnor  | Date of Receipt<br>MM / DD / YYYY<br>09 / 23 / 2008  |
|           | Mailing Address 1276 N. Wayne St Unit 921   | <b>Transaction ID:</b> 80926.C15711  |
|           | City State Zip Code<br>Arlington VA 22201   | Amount of Each Receipt this Period<br>500.00   |
|           | FEC ID number of contributing federal political committee. <b>C</b>   | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|           | Name of Employer: Cassidy & Associates    Occupation: Government Relations<br>Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 | Election Cycle-to-Date ▼<br>500.00   |

|           |   |  |
|-----------|---|--|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Arthur D. Mason  | Date of Receipt<br>MM / DD / YYYY<br>09 / 23 / 2008  |
|           | Mailing Address 3302 Rolling Road   | <b>Transaction ID:</b> 80926.C15712  |
|           | City State Zip Code<br>Chevy Chase MD 20815   | Amount of Each Receipt this Period<br>500.00   |
|           | FEC ID number of contributing federal political committee. <b>C</b>   | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|           | Name of Employer: Cassidy & Associates    Occupation: VICE PRESIDENT<br>Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 | Election Cycle-to-Date ▼<br>500.00   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>1500.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 95  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Mr. Donald White

Mailing Address 10 Stargrass Retreat

City Savannah State GA Zip Code 31411

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008

Election Cycle-to-Date ▼ 1250.00

Date of Receipt 09 / 25 / 2008  
Transaction ID: 81006.C15720  
Amount of Each Receipt this Period 1250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Beverly White

Mailing Address 10 Stargrass Retreat

City Savannah State GA Zip Code 31411

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008

Election Cycle-to-Date ▼ 1250.00

Date of Receipt 09 / 25 / 2008  
Transaction ID: 81006.C15721  
Amount of Each Receipt this Period 1250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gregory Lagans

Mailing Address 3190 Fairview Park Drive Ste 350

City Falls Church State VA Zip Code 22042

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

Name of Employer Dyncorp Inernational LLC Occupation VP

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2008  
Transaction ID: 81006.C15722  
Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

**TOTAL** This Period (last page this line number only) ..... ► **75300.00**

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 95  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.**

Full Name (Last, First, Middle Initial)  
American Veterinary Medical Assoc PAC

Mailing Address 1910 Sunderland Place, NW

City State Zip Code  
Washington DC 20036-1642

FEC ID number of contributing federal political committee. **C** C00114132

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 9000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 9 / 2 3 / 2 0 0 8

**Transaction ID:** 80926.C15704

Amount of Each Receipt this Period  
2000.00

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

**B.**

Full Name (Last, First, Middle Initial)  
American Medical Association PAC

Mailing Address 1101 Vermont Avenue, NW

City State Zip Code  
Washington DC 20005-3521

FEC ID number of contributing federal political committee. **C** C00000422

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  
 0 7 / 3 0 / 2 0 0 8

**Transaction ID:** 80926.C15602

Amount of Each Receipt this Period  
1000.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Flowers Industries PAC

Mailing Address PO Box 1338

City State Zip Code  
Thomasville GA 31799-1338

FEC ID number of contributing federal political committee. **C** C00033555

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  
 0 7 / 3 0 / 2 0 0 8

**Transaction ID:** 80926.C15603

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 95  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
American Bankers Association PAC

Mailing Address 1120 Connecticut Avenue NW

City State Zip Code  
Washington DC 20036-3902

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
8500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

Transaction ID: 80926.C15646

Amount of Each Receipt this Period  
4000.00

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

**B.** Full Name (Last, First, Middle Initial)  
American Meat Institute PAC

Mailing Address 1150 Connecticut Ave., NW  
Suite 1200

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00024281

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 23 / 2008

Transaction ID: 80926.C15701

Amount of Each Receipt this Period  
3000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Lockheed Martin Employees PAC

Mailing Address 1550 Crystal Drive  
Crystal Square Two, Suite 300

City State Zip Code  
Arlington VA 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 15 / 2008

Transaction ID: 80926.C15596

Amount of Each Receipt this Period  
2000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **9000.00**

**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 38 / 95  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
National Beer Wholesalers Assoc. PAC

Mailing Address Craig A. Purser, NBWA PAC Treasure  
1100 King Street, Suite 600

City Alexandria State VA Zip Code 22314-2944

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt 07 / 07 / 2008  
**Transaction ID:** 80708.C15580  
 Amount of Each Receipt this Period 2500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Dealers Election Action Committee of

Mailing Address the National Automobile Dealers As  
8400 Westpark Drive

City Mc Lean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 07 / 23 / 2008  
**Transaction ID:** 80926.C15595  
 Amount of Each Receipt this Period 5000.00

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

**C.** Full Name (Last, First, Middle Initial)  
ConAgra Foods Good Gov. Association

Mailing Address One ConAgra Drive

City Omaha State NE Zip Code 68102-5001

FEC ID number of contributing federal political committee. **C** C00087874

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 09 / 29 / 2008  
**Transaction ID:** 81006.C15738  
 Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 8500.00

**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 39 / 95  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
The Coca-Cola Company

Mailing Address NonPartisan Committee For Good Gov  
800 Connecticut Avenue, NW #711

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00012468

Name of Employer The Coca-Cola Company Occupation Beverage Industry

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 23 / 2008  
**Transaction ID:** 80926.C15706  
 Amount of Each Receipt this Period 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
United Egg Association EGGPAC

Mailing Address Randy Green, Sr. Govt Relations Re  
One Massachusetts Ave., NW, Suite 8

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00172841

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 17 / 2008  
**Transaction ID:** 80926.C15669  
 Amount of Each Receipt this Period 500.00

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

**C.** Full Name (Last, First, Middle Initial)  
El Paso Corporation PAC

Mailing Address 555 11TH Street, NW  
Suite 750

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00093948

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 07 / 07 / 2008  
**Transaction ID:** 80708.C15582  
 Amount of Each Receipt this Period 1000.00

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

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

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Committee for Advancement of Cotton

Mailing Address P O Box 820292  
Mr. John Maquire

City Memphis State TN Zip Code 38182

FEC ID number of contributing federal political committee. **C** C00300426

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 6000.00

Date of Receipt 09 / 29 / 2008  
**Transaction ID:** 81006.C15737  
 Amount of Each Receipt this Period 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
United Egg Assn. EGGPAC

Mailing Address 1720 Windward Concourse #230  
Gene Gregory President Mike McGrif

City Alpharetta State GA Zip Code 30005-2291

FEC ID number of contributing federal political committee. **C** C00172841

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 4000.00

Date of Receipt 09 / 23 / 2008  
**Transaction ID:** 80926.C15707  
 Amount of Each Receipt this Period 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
National Turkey Federation PAC

Mailing Address Mr. Joel Brandenberger  
1225 New York Avenue NW, STE 400

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00076182

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 09 / 23 / 2008  
**Transaction ID:** 80926.C15715  
 Amount of Each Receipt this Period 1000.00

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

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

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



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

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Holland & Knight Committee for

Mailing Address Effective Government  
2099 Pennsylvania Ave., NW, Suite

City Washington State DC Zip Code 20006-5564

FEC ID number of contributing federal political committee. **C** C00171330

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 3144.00

Date of Receipt 09 / 17 / 2008  
**Transaction ID:** 81006.C15740  
 Amount of Each Receipt this Period 644.00  
 In-Kind  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
 Food for event

**B.** Full Name (Last, First, Middle Initial)  
Holland & Knight Committee for

Mailing Address Effective Government  
2099 Pennsylvania Ave., NW, Suite

City Washington State DC Zip Code 20006-5564

FEC ID number of contributing federal political committee. **C** C00171330

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 3344.00

Date of Receipt 09 / 17 / 2008  
**Transaction ID:** 81006.C15739  
 Amount of Each Receipt this Period 200.00  
 In-Kind  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
 Staff costs

**C.** Full Name (Last, First, Middle Initial)  
Holland & Knight Committee for

Mailing Address Effective Government  
2099 Pennsylvania Ave., NW, Suite

City Washington State DC Zip Code 20006-5564

FEC ID number of contributing federal political committee. **C** C00171330

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 6344.00

Date of Receipt 09 / 23 / 2008  
**Transaction ID:** 80926.C15694  
 Amount of Each Receipt this Period 3000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3844.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Associated General Contractors of  
Mailing Address America, Inc. PAC  
2300 Wilson Blvd., Ste 400  
City Arlington State VA Zip Code 22201  
FEC ID number of contributing federal political committee. **C** C00082917  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008  
Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 8  
Transaction ID: 81006.C15726  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
TYPAC, PAC of Tyson Foods, Inc.  
Mailing Address Ms. Sara Lilygren  
P. O. Box 2020  
City Springdale State AR Zip Code 72765  
FEC ID number of contributing federal political committee. **C** C00169821  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008  
Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 2 3 / 2 0 0 8  
Transaction ID: 80926.C15703  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
COALPAC  
Mailing Address National Mining Association  
101 Constitution Avenue NW Ste 500  
City Washington State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C** C00109819  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008  
Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 2 3 / 2 0 0 8  
Transaction ID: 80926.C15693  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

FOR LINE NUMBER: PAGE 43 / 95  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
USA Rice Federation PAC  
Mailing Address 4301 North Fairfax Drive , Suite 4  
City Arlington State VA Zip Code 22203  
FEC ID number of contributing federal political committee. **C** C00261958  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008  
Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 09 / 23 / 2008  
Transaction ID: 80926.C15690  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
General Dynamics Voluntary Political  
Mailing Address Contribution Plan  
2941 Fairview Park Drive Suite 100  
City Falls Church State VA Zip Code 22042-4523  
FEC ID number of contributing federal political committee. **C** C00078451  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 5000.00  
Date of Receipt 07 / 07 / 2008  
Transaction ID: 80708.C15583  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
General Dynamics Voluntary Political  
Mailing Address Contribution Plan  
2941 Fairview Park Drive Suite 100  
City Falls Church State VA Zip Code 22042-4523  
FEC ID number of contributing federal political committee. **C** C00078451  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 10000.00  
Date of Receipt 09 / 17 / 2008  
Transaction ID: 80926.C15666  
Amount of Each Receipt this Period 5000.00  
Receipt  
 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 44 / 95  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
BNSF Railpac

Mailing Address c/o Andy Basquin  
P. O. Box 961039

City Fort Worth State TX Zip Code 76161-0039

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 26 / 2008  
**Transaction ID:** 81006.C15724  
 Amount of Each Receipt this Period: 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Home Depot, Inc. PAC

Mailing Address c/o Heather Kennedy  
101 Constitution Ave., NW STE 800W

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 07 / 15 / 2008  
**Transaction ID:** 80926.C15593  
 Amount of Each Receipt this Period: 1500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Arch Chemicals, Inc. Government

Mailing Address Participation Fund  
Laura Tew 501 Merritt Seven

City Norwalk State CT Zip Code 06856

FEC ID number of contributing federal political committee. **C** C00345926

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 25 / 2008  
**Transaction ID:** 81006.C15719  
 Amount of Each Receipt this Period: 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3500.00

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

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

|   |   |              |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 45 / 95 |
|   | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d                |              |
|   | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 |              |

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)  
Friends of Jack Kingston

|   |  |                                     |  |
|---|--|-------------------------------------|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>National Cable & Telecommunications |                                     | Date of Receipt  |
|   | Mailing Address Association PAC<br>25 Massachusetts Ave., NW Suite 10          |                                     | <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y<br>09 / 23 / 2008 |
|   | City Washington  | State DC                            | Zip Code 20001   |
|   | FEC ID number of contributing federal political committee. <b>C</b> C00010082  |                                     | <b>Transaction ID:</b> 80926.C15713  |
|   | Name of Employer   |                                     | Occupation   |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 |  | Election Cycle-to-Date ▼<br>2000.00 | Amount of Each Receipt this Period<br>1000.00  |
|   |  |                                     | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)           |

|   |   |                                     |  |
|---|---|-------------------------------------|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Branch Banking & Trust Company PAC |                                     | Date of Receipt  |
|   | Mailing Address Richard A. Moreau<br>P. O. Box 1290                           |                                     | <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y<br>07 / 07 / 2008 |
|   | City Winston Salem  | State NC                            | Zip Code 27102-1290  |
|   | FEC ID number of contributing federal political committee. <b>C</b> C00075291 |                                     | <b>Transaction ID:</b> 80708.C15563  |
|   | Name of Employer  |                                     | Occupation   |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Election Cycle-to-Date ▼<br>2000.00 | Amount of Each Receipt this Period<br>2000.00  |
|   |   |                                     | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)           |

|   |   |                                     |  |
|---|---|-------------------------------------|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>AGSH&F Civic Action Committee      |                                     | Date of Receipt  |
|   | Mailing Address 1333 New Hampshire Avenue NW                                  |                                     | <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y<br>09 / 23 / 2008 |
|   | City Washington   | State DC                            | Zip Code 20036   |
|   | FEC ID number of contributing federal political committee. <b>C</b> C00104901 |                                     | <b>Transaction ID:</b> 80926.C15699  |
|   | Name of Employer  |                                     | Occupation   |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 |   | Election Cycle-to-Date ▼<br>1500.00 | Amount of Each Receipt this Period<br>750.00   |
|   |   |                                     | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)           |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>3750.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

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

|   |   |
|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: <span style="float: right;">PAGE 46 / 95</span><br>(check only one)<br><input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d<br><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)  
Friends of Jack Kingston

|  |  |
|--|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Kraft Foods Global, Inc. PAC</p> <p>Mailing Address 101 Constitution Avenue NW<br/>Suite 400 West</p> <p>City Washington State DC Zip Code 20001</p> <p>FEC ID number of contributing federal political committee. <b>C</b> C00077701</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2008<br/> <input type="checkbox"/> Primary   <input type="checkbox"/> General<br/> <input checked="" type="checkbox"/> Other (specify) ▼<br/>                 General 2008</p> <p>Election Cycle-to-Date ▼ 2000.00</p> | <p>Date of Receipt<br/>                 M M / D D / Y Y Y Y<br/>                 0 9 / 2 3 / 2 0 0 8</p> <p><b>Transaction ID:</b> 80926.C15708</p> <p>Amount of Each Receipt this Period<br/>                 1000.00</p> <p>Receipt<br/> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> |
|--|--|

|  |  |
|--|--|
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Fish Pac</p> <p>Mailing Address 7918 Jones Branch Drive<br/>Suite 700</p> <p>City Mc Lean State VA Zip Code 22102-3319</p> <p>FEC ID number of contributing federal political committee. <b>C</b> C00101204</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2008<br/> <input type="checkbox"/> Primary   <input type="checkbox"/> General<br/> <input checked="" type="checkbox"/> Other (specify) ▼<br/>                 General 2008</p> <p>Election Cycle-to-Date ▼ 3000.00</p> | <p>Date of Receipt<br/>                 M M / D D / Y Y Y Y<br/>                 0 9 / 2 6 / 2 0 0 8</p> <p><b>Transaction ID:</b> 81006.C15734</p> <p>Amount of Each Receipt this Period<br/>                 2000.00</p> <p>Receipt<br/> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> |
|--|--|

|  |  |
|--|--|
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Associated Builders &amp; Contractors PAC</p> <p>Mailing Address 4250 Fairfax Dr Fl 9<br/>9th Floor</p> <p>City Arlington State VA Zip Code 22203-1665</p> <p>FEC ID number of contributing federal political committee. <b>C</b> C00010421</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2008<br/> <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p> | <p>Date of Receipt<br/>                 M M / D D / Y Y Y Y<br/>                 0 7 / 0 7 / 2 0 0 8</p> <p><b>Transaction ID:</b> 80708.C15581</p> <p>Amount of Each Receipt this Period<br/>                 1000.00</p> <p>Receipt<br/> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> |
|--|--|

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | 4000.00 |
| <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 47 / 95  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Pilgrims Pride PAC  
 Mailing Address 4845 US Highway 271 North  
 City State Zip Code  
 Pittsburg TX 75686  
 FEC ID number of contributing federal political committee. **C** C00113902  
 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  
 0 7 / 1 6 / 2 0 0 8  
**Transaction ID:** 80926.C15592  
 Amount of Each Receipt this Period  
 2500.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Committee for the Advancement of  
 Mailing Address Southeast Cotton  
 139 Prominence Court Suite 110  
 City State Zip Code  
 Dawsonville GA 30534  
 FEC ID number of contributing federal political committee. **C** C00300426  
 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  
 0 8 / 1 8 / 2 0 0 8  
**Transaction ID:** 80926.C15611  
 Amount of Each Receipt this Period  
 2500.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Genesee & Wyoming Inc PAC  
 Mailing Address 204 N George Street Ste 230  
 City State Zip Code  
 York PA 17401  
 FEC ID number of contributing federal political committee. **C** C00289058  
 Name of Employer Occupation  
 Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008  
 Election Cycle-to-Date ▼ 1000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 9 / 2 3 / 2 0 0 8  
**Transaction ID:** 80926.C15691  
 Amount of Each Receipt this Period  
 1000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 95  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Bunge North America Inc PAC  
Mailing Address 750 First St NE Ste 1070

City State Zip Code  
Washington DC 20002

FEC ID number of contributing federal political committee. **C** C00401687

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 9 / 2 3 / 2 0 0 8

**Transaction ID:** 80926.C15700

Amount of Each Receipt this Period  
2000.00

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

**B.** Full Name (Last, First, Middle Initial)  
The Society of the Plastics Ind PAC  
Mailing Address 1667 K St NW Ste 1000

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00309716

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 9 / 2 3 / 2 0 0 8

**Transaction ID:** 80926.C15702

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
K & L Gates LLP PAC  
Mailing Address 1601 K Street NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00395970

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 9 / 2 3 / 2 0 0 8

**Transaction ID:** 80926.C15714

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00

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



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

|   |   |              |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 49 / 95 |
|   | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d<br><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)  
Friends of Jack Kingston

**A.**

|   |                                     |  |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br>Ven-Pac  |                                     | Date of Receipt<br>MM / DD / YYYY<br>09 / 25 / 2008  |
| Mailing Address P.O. Box 83142  |                                     | <b>Transaction ID:</b> 81006.C15723  |
| City<br>Washington Grove  | State<br>MD                         | Zip Code<br>20880  |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00369660  |                                     | Amount of Each Receipt this Period<br>1000.00  |
| Name of Employer  | Occupation                          | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 | Election Cycle-to-Date ▼<br>1000.00 |  |

**B.**

|   |                                     |  |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br>Rayonier Inc Good Government Committee   |                                     | Date of Receipt<br>MM / DD / YYYY<br>09 / 26 / 2008  |
| Mailing Address 221 N. Hogan St PMB 329<br>Attn: Scott Winer  |                                     | <b>Transaction ID:</b> 81006.C15729  |
| City<br>Jacksonville  | State<br>FL                         | Zip Code<br>32202-4201   |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00451757  |                                     | Amount of Each Receipt this Period<br>1000.00  |
| Name of Employer  | Occupation                          | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 | Election Cycle-to-Date ▼<br>1000.00 |  |

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2000.00  |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 64094.00 |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 95  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

A.

Full Name (Last, First, Middle Initial)  
Skidaway Island Republican Club

Mailing Address c/o Dick Eckberg  
48 Cotton Crossing

City Savannah State GA Zip Code 31411

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2008

Transaction ID: 80926.C15678

Amount of Each Receipt this Period  
1000.00

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

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

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

|   |  |  |
|---|--|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: <span style="float: right;">PAGE 51 / 95</span> |  |
|   | (check only one)   |  |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b                                     | <input type="checkbox"/> 11c           |
| <input type="checkbox"/> 12   | <input type="checkbox"/> 13a                                     | <input checked="" type="checkbox"/> 14 |
|   |  | <input type="checkbox"/> 15            |

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

|   |   |                          |   |
|---|---|--------------------------|---|
| <b>A.</b>                                   | Full Name (Last, First, Middle Initial)<br>Internal Revenue Service |                          | Date of Receipt   |
|   | Mailing Address Department of the Treasury                          |                          | <input type="text" value="07"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>                             |
|   | City  | State                    | Zip Code  |
|   | ATLANTA   | GA                       | 39901-  |
|   | FEC ID number of contributing federal political committee.          |                          | Transaction ID: 80926.C15587  |
|   | C   |                          | Amount of Each Receipt this Period  |
| Name of Employer                            |   | Occupation               | Offsets to Operating Expenditure<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008                           |   | Election Cycle-to-Date ▼ |   |
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General                                    |                          |   |
| <input type="checkbox"/> Other (specify) ▼  |   | 2957.41                  | Note: Refund of overpayment o   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>2957.41</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <b>2957.41</b> |

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

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

FOR LINE NUMBER: PAGE 52 / 95  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.**

Full Name (Last, First, Middle Initial)  
The Savannah Bank

Mailing Address 25 Bull Street

City Savannah State GA Zip Code 31401-

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 1252.68

Date of Receipt 07 / 31 / 2008  
**Transaction ID:** 81008.C15750  
 Amount of Each Receipt this Period 90.57  
 Interest Received  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
The Savannah Bank

Mailing Address 25 Bull Street

City Savannah State GA Zip Code 31401-

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 1338.16

Date of Receipt 08 / 31 / 2008  
**Transaction ID:** 81008.C15751  
 Amount of Each Receipt this Period 85.48  
 Interest Received  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
The Savannah Bank

Mailing Address 25 Bull Street

City Savannah State GA Zip Code 31401-

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 1449.56

Date of Receipt 09 / 30 / 2008  
**Transaction ID:** 81008.C15752  
 Amount of Each Receipt this Period 111.40  
 Interest Received  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **287.45**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 53 / 95 |
|   | <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)  
Friends of Jack Kingston

|   |  |                                    |   |
|---|--|------------------------------------|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>SunTrust Bank, Savannah, N.A. |                                    | Date of Receipt<br>MM / DD / YYYY<br>08 / 31 / 2008   |
|   | Mailing Address P.O. Box 8668  |                                    | Transaction ID: 81009.C15769  |
|   | City<br>Savannah   | State<br>GA                        | Zip Code<br>31412-  |
|   | FEC ID number of contributing federal political committee.<br>C          |                                    | Amount of Each Receipt this Period<br>34.47   |
| Name of Employer  |  | Occupation                         | Interest Received   |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 |  | Election Cycle-to-Date ▼<br>166.44 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

|   |  |                                    |   |
|---|--|------------------------------------|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>SunTrust Bank, Savannah, N.A. |                                    | Date of Receipt<br>MM / DD / YYYY<br>09 / 30 / 2008   |
|   | Mailing Address P.O. Box 8668  |                                    | Transaction ID: 81008.C15767  |
|   | City<br>Savannah   | State<br>GA                        | Zip Code<br>31412-  |
|   | FEC ID number of contributing federal political committee.<br>C          |                                    | Amount of Each Receipt this Period<br>34.55   |
| Name of Employer  |  | Occupation                         | Interest Received   |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 |  | Election Cycle-to-Date ▼<br>200.99 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

|   |   |                                      |   |
|---|---|--------------------------------------|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Darby Bank & Trust Company |                                      | Date of Receipt<br>MM / DD / YYYY<br>07 / 31 / 2008   |
|   | Mailing Address 300 Bull Street, Suite A                              |                                      | Transaction ID: 81008.C15755  |
|   | City<br>Savannah  | State<br>GA                          | Zip Code<br>31401-  |
|   | FEC ID number of contributing federal political committee.<br>C       |                                      | Amount of Each Receipt this Period<br>46.86   |
| Name of Employer  |   | Occupation                           | Interest Received   |
| Receipt For: 2008<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>General 2008 |   | Election Cycle-to-Date ▼<br>16947.89 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 115.88 |
| <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 54 / 95  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Darby Bank & Trust Company  
Mailing Address 300 Bull Street, Suite A  
City Savannah State GA Zip Code 31401-  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008  
Election Cycle-to-Date ▼ 16994.72  
Date of Receipt 07 / 31 / 2008  
Transaction ID: 81008.C15753  
Amount of Each Receipt this Period 46.83  
Interest Received  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Darby Bank & Trust Company  
Mailing Address 300 Bull Street, Suite A  
City Savannah State GA Zip Code 31401-  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008  
Election Cycle-to-Date ▼ 18186.86  
Date of Receipt 07 / 31 / 2008  
Transaction ID: 81009.C15768  
Amount of Each Receipt this Period 1192.14  
Interest Received  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Darby Bank & Trust Company  
Mailing Address 300 Bull Street, Suite A  
City Savannah State GA Zip Code 31401-  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
General 2008  
Election Cycle-to-Date ▼ 18436.53  
Date of Receipt 08 / 30 / 2008  
Transaction ID: 81008.C15757  
Amount of Each Receipt this Period 249.67  
Interest Received  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1488.64  
**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 55 / 95  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Darby Bank & Trust Company

Mailing Address 300 Bull Street, Suite A

City Savannah State GA Zip Code 31401-

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 19086.42

Date of Receipt: 08 / 31 / 2008  
**Transaction ID:** 81008.C15756  
 Amount of Each Receipt this Period: 649.89  
 Interest Received  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Darby Bank & Trust Company

Mailing Address 300 Bull Street, Suite A

City Savannah State GA Zip Code 31401-

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 19131.81

Date of Receipt: 09 / 30 / 2008  
**Transaction ID:** 81008.C15758  
 Amount of Each Receipt this Period: 45.39  
 Interest Received  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Darby Bank & Trust Company

Mailing Address 300 Bull Street, Suite A

City Savannah State GA Zip Code 31401-

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼ 19374.44

Date of Receipt: 09 / 30 / 2008  
**Transaction ID:** 81008.C15759  
 Amount of Each Receipt this Period: 242.63  
 Interest Received  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **937.91**

**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 56 / 95  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

**A.** Full Name (Last, First, Middle Initial)  
Mass Mutual

Mailing Address Annuity Service Center Hub  
PO Box 9067

City Springfield State MA Zip Code 01102-9067

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼  
11546.39

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 31 / 2008

**Transaction ID:** 81008.C15766

Amount of Each Receipt this Period  
860.22

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

**B.** Full Name (Last, First, Middle Initial)  
Mass Mutual

Mailing Address Annuity Service Center Hub  
PO Box 9067

City Springfield State MA Zip Code 01102-9067

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼  
12018.84

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 31 / 2008

**Transaction ID:** 81008.C15762

Amount of Each Receipt this Period  
472.45

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

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

Mailing Address Annuity Service Center Hub  
PO Box 9067

City Springfield State MA Zip Code 01102-9067

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 General 2008

Election Cycle-to-Date ▼  
12636.52

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2008

**Transaction ID:** 81008.C15764

Amount of Each Receipt this Period  
617.68

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1950.35**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|   |  |  |
|---|--|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: <span style="float: right;">PAGE 57 / 95</span> |  |
|   | (check only one)   |  |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b                                     | <input type="checkbox"/> 11c           |
| <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)  
Friends of Jack Kingston

|   |  |                                     |   |
|---|--|-------------------------------------|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>First National Bank |                                     | Date of Receipt   |
|   | Mailing Address 5225 Abercorn St                               |                                     | <input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2008"/> |
|   | City   | State                               | Zip Code  |
|   | Savannah   | GA                                  | 31405-  |
|   | FEC ID number of contributing federal political committee.     |                                     | Transaction ID: 81008.C15761  |
|   | C  |                                     | Amount of Each Receipt this Period  |
| Name of Employer                                      |  | Occupation                          | <input type="text" value="86.09"/>  |
| Receipt For: 2008                                     |  | Election Cycle-to-Date ▼            | Interest Received   |
| <input type="checkbox"/> Primary                      | <input type="checkbox"/> General                               |                                     | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)         |
| <input checked="" type="checkbox"/> Other (specify) ▼ | General 2008   | <input type="text" value="586.72"/> |   |

|  |                                      |
|--|--------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text" value="86.09"/>   |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text" value="4866.32"/> |

# 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)  
Friends of Jack Kingston

A.

Full Name (Last, First, Middle Initial)  
United WebWorks

Mailing Address 30 West Broughton Street

City Savannah State GA Zip Code 31401-

Purpose of Disbursement web site hosting  
Candidate Name

001  
Category/  
Type

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

Transaction ID: 80926.E7094  
Date of Disbursement

07 / 25 / 2008

Amount of Each Disbursement this Period

760.00

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

WEB SITE HOSTING

B.

Full Name (Last, First, Middle Initial)  
Susan West

Mailing Address 12 Hibernia Road

City Savannah State GA Zip Code 31411-

Purpose of Disbursement Office Supplies  
Candidate Name

001  
Category/  
Type

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

Transaction ID: 81006.E7164  
Date of Disbursement

09 / 08 / 2008

Amount of Each Disbursement this Period

55.84

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

OFFICE SUPPLIES

C.

Full Name (Last, First, Middle Initial)  
Alee Oriental Band

Mailing Address PO Box 13932

City Savannah State GA Zip Code 31416-0932

Purpose of Disbursement Advertising  
Candidate Name

004  
Category/  
Type

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

Transaction ID: 80926.E7107  
Date of Disbursement

08 / 20 / 2008

Amount of Each Disbursement this Period

250.00

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

ADVERTISING

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

1065.84

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)  
Friends of Jack Kingston

**A.**

Full Name (Last, First, Middle Initial)  
Automatic Data Processing

Mailing Address 5800 Windward Parkway

City Alpharetta State GA Zip Code 30005-

Purpose of Disbursement

Payroll Taxes

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 80926.E7069

Date of Disbursement

07 / 31 / 2008

Amount of Each Disbursement this Period

843.09

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

PAYROLL TAXES

**B.**

Full Name (Last, First, Middle Initial)  
Myrlene Free

Mailing Address 13010 Largo Drive

City Savannah State GA Zip Code 31419-2804

Purpose of Disbursement

Payroll

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 80926.E7145

Date of Disbursement

09 / 15 / 2008

Amount of Each Disbursement this Period

66.64

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

PAYROLL

**C.**

Full Name (Last, First, Middle Initial)  
Savannah Area Young Republicans

Mailing Address Allison Quinn  
1706 Senwick Village Dr

City Savannah State GA Zip Code 31419-

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81009.E7204

Date of Disbursement

07 / 01 / 2008

Amount of Each Disbursement this Period

165.37

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

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

1075.10

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 60 / 95

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <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)  
Friends of Jack Kingston

|           |  |  |
|-----------|--|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Kennickell Printing<br><br>Mailing Address 1700 East President Street<br><br>City Savannah State GA Zip Code 31404-0313<br><br>Purpose of Disbursement Office supplies<br>Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span><br>Category/Type<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: | Transaction ID: 81006.E7166<br>Date of Disbursement<br>09 / 08 / 2008<br><br>Amount of Each Disbursement this Period<br>233.26<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>OFFICE SUPPLIES |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Alexandra Tabarrok<br><br>Mailing Address 223 Steele Wood Dr<br><br>City Richmond Hill State GA Zip Code 31324-4747<br><br>Purpose of Disbursement supplies<br>Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span><br>Category/Type<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District:            | Transaction ID: 81006.E7181<br>Date of Disbursement<br>09 / 10 / 2008<br><br>Amount of Each Disbursement this Period<br>84.17<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>SUPPLIES         |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Christopher Crawford<br><br>Mailing Address 512 E. 56th Street<br><br>City Savannah State GA Zip Code 31405-<br><br>Purpose of Disbursement office supplies<br>Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span><br>Category/Type<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District:            | Transaction ID: 81006.E7185<br>Date of Disbursement<br>09 / 05 / 2008<br><br>Amount of Each Disbursement this Period<br>769.56<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>OFFICE SUPPLIES |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>1086.99</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  |

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)  
Friends of Jack Kingston

A.

Full Name (Last, First, Middle Initial)  
Hancock Askew & Co., LLP

Mailing Address P. O. Box 2486  
100 Riverview Drive

City Savannah State GA Zip Code 31402-2486

Purpose of Disbursement  
Accounting fees  
Candidate Name

001  
Category/  
Type

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

Transaction ID: 80926.E7084  
Date of Disbursement

07 / 07 / 2008

Amount of Each Disbursement this Period

1785.00

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

ACCOUNTING FEES

B.

Full Name (Last, First, Middle Initial)  
Comcast Cable

Mailing Address 145 Park of Commerce Drive

City Savannah State GA Zip Code 31405-

Purpose of Disbursement  
monthly internet  
Candidate Name

001  
Category/  
Type

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

Transaction ID: 80926.E7122  
Date of Disbursement

08 / 27 / 2008

Amount of Each Disbursement this Period

95.00

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

MONTHLY INTERNET

C.

Full Name (Last, First, Middle Initial)  
Susan West

Mailing Address 12 Hibernia Road

City Savannah State GA Zip Code 31411-

Purpose of Disbursement  
Payroll  
Candidate Name

001  
Category/  
Type

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

Transaction ID: 80926.E7153  
Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

449.94

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

PAYROLL

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

2329.94

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)  
Friends of Jack Kingston

|           |  |   |                          |
|-----------|--|---|--------------------------|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Christopher Crawford<br><br>Mailing Address 512 E. 56th Street<br><br>City Savannah State GA Zip Code 31405-<br><br>Purpose of Disbursement Payroll<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                    | Transaction ID: 80926.E7154<br>Date of Disbursement<br>09 / 30 / 2008<br><br>Amount of Each Disbursement this Period<br>855.55<br><br><input type="checkbox"/> Refund or Disposal of Excess<br>Contributions Required Under<br>11 C.F.R. 400.53<br><br>PAYROLL                | 001<br>Category/<br>Type |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Uncle Bobs Self Storage<br><br>Mailing Address 10901 Abercorn Ext.<br><br>City Savannah State GA Zip Code 31419-<br><br>Purpose of Disbursement Monthly storage rental<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: 80926.E7103<br>Date of Disbursement<br>08 / 20 / 2008<br><br>Amount of Each Disbursement this Period<br>187.90<br><br><input type="checkbox"/> Refund or Disposal of Excess<br>Contributions Required Under<br>11 C.F.R. 400.53<br><br>MONTHLY STORAGE RENTAL | 001<br>Category/<br>Type |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Jack Kingston<br><br>Mailing Address 207 Fiddlers Bend<br><br>City Savannah State GA Zip Code 31406-5238<br><br>Purpose of Disbursement supplies<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                       | Transaction ID: 81008.E7203<br>Date of Disbursement<br>07 / 07 / 2008<br><br>Amount of Each Disbursement this Period<br>10.00<br><br><input type="checkbox"/> Refund or Disposal of Excess<br>Contributions Required Under<br>11 C.F.R. 400.53<br><br>SUPPLIES                | 001<br>Category/<br>Type |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1053.45 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | <br>    |

**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)  
Friends of Jack Kingston

**A.**

Full Name (Last, First, Middle Initial)  
Automatic Data Processing

Mailing Address 5800 Windward Parkway

City Alpharetta State GA Zip Code 30005-

Purpose of Disbursement  
payroll taxes

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80926.E7112

Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

887.25

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

PAYROLL TAXES

**B.**

Full Name (Last, First, Middle Initial)  
United WebWorks

Mailing Address 30 West Broughton Street

City Savannah State GA Zip Code 31401-

Purpose of Disbursement  
web site hosting

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80926.E7099

Date of Disbursement

08 / 04 / 2008

Amount of Each Disbursement this Period

599.88

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

WEB SITE HOSTING

**C.**

Full Name (Last, First, Middle Initial)  
Susan West

Mailing Address 12 Hibernia Road

City Savannah State GA Zip Code 31411-

Purpose of Disbursement  
office supplies

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80926.E7091

Date of Disbursement

07 / 17 / 2008

Amount of Each Disbursement this Period

17.04

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

OFFICE SUPPLIES

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

1504.17

**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)  
Friends of Jack Kingston

|           |  |   |  |
|-----------|--|---|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Linda T. Jinks<br><br>Mailing Address 2033 Julienton Drive<br><br>City Townsend State GA Zip Code 31331-9208<br><br>Purpose of Disbursement Payroll<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼                 | <b>Transaction ID:</b> 80926.E7068<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 7 / 3 1 / 2 0 0 8 | Amount of Each Disbursement this Period<br>557.32<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br><b>PAYROLL</b>       |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Automatic Data Processing<br><br>Mailing Address 5800 Windward Parkway<br><br>City Alpharetta State GA Zip Code 30005-<br><br>Purpose of Disbursement Payroll Taxes<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> 80710.E7067<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 7 / 1 5 / 2 0 0 8 | Amount of Each Disbursement this Period<br>101.97<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br><b>PAYROLL TAXES</b> |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Monroe Marketing<br><br>Mailing Address P. O. Box 14558<br><br>City Savannah State GA Zip Code 31416-1558<br><br>Purpose of Disbursement advertising<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼                | <b>Transaction ID:</b> 80926.E7075<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 7 / 1 7 / 2 0 0 8 | Amount of Each Disbursement this Period<br>688.95<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br><b>ADVERTISING</b>   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>1348.24</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)  
Friends of Jack Kingston

|           |  |   |                          |
|-----------|--|---|--------------------------|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>The Shops @ Isle of Hope, LLC<br><br>Mailing Address 1102 Mohawk Street<br>Suite A2<br><br>City Savannah State GA Zip Code 31419-<br><br>Purpose of Disbursement<br>September Rent<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> 80926.E7102<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 8 / 1 1 / 2 0 0 8<br><br>Amount of Each Disbursement this Period<br>250.00<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>SEPTEMBER RENT           | 001<br>Category/<br>Type |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Alexandra Tabarrok<br><br>Mailing Address 223 Steele Wood Dr<br><br>City Richmond Hill State GA Zip Code 31324-4747<br><br>Purpose of Disbursement<br>Advertising reimbursement<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼    | <b>Transaction ID:</b> 80926.E7104<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 8 / 1 1 / 2 0 0 8<br><br>Amount of Each Disbursement this Period<br>35.00<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>ADVERTISING REIMBURSEMENT | 004<br>Category/<br>Type |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Susan West<br><br>Mailing Address 12 Hibernia Road<br><br>City Savannah State GA Zip Code 31411-<br><br>Purpose of Disbursement<br>payroll<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   | <b>Transaction ID:</b> 80926.E7130<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 8 / 1 5 / 2 0 0 8<br><br>Amount of Each Disbursement this Period<br>421.31<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>PAYROLL                  | 001<br>Category/<br>Type |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>706.31</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)

PAGE 66 / 95

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <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)  
Friends of Jack Kingston

|           |   |   |
|-----------|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Automatic Data Processing<br><br>Mailing Address 5800 Windward Parkway<br><br>City Alpharetta State GA Zip Code 30005-<br><br>Purpose of Disbursement payroll taxes<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: 80926.E7150<br>Date of Disbursement<br>09 / 30 / 2008<br><br>Amount of Each Disbursement this Period<br>1013.65<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>PAYROLL TAXES |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Linda T. Jinks<br><br>Mailing Address 2033 Julienton Drive<br><br>City Townsend State GA Zip Code 31331-9208<br><br>Purpose of Disbursement postage<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                 | Transaction ID: 80926.E7083<br>Date of Disbursement<br>07 / 23 / 2008<br><br>Amount of Each Disbursement this Period<br>42.00<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>POSTAGE         |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Automatic Data Processing<br><br>Mailing Address 5800 Windward Parkway<br><br>City Alpharetta State GA Zip Code 30005-<br><br>Purpose of Disbursement payroll fees<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  | Transaction ID: 80926.E7118<br>Date of Disbursement<br>08 / 15 / 2008<br><br>Amount of Each Disbursement this Period<br>60.24<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>PAYROLL FEES    |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1115.89 |
| <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)  
Friends of Jack Kingston

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>The Hartford</p> <p>Mailing Address P. O. Box 620</p> <p>City New Hartford State NY Zip Code 13413-</p> <p>Purpose of Disbursement workers comp insurance</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>  | <p><b>Transaction ID:</b> 80926.E7110</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="254.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>WORKERS COMP INSURANCE</b></p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Alexandra Tabarrok</p> <p>Mailing Address 223 Steele Wood Dr</p> <p>City Richmond Hill State GA Zip Code 31324-4747</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> 80926.E7151</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1394.19"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL</b></p>               |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Alexandra Tabarrok</p> <p>Mailing Address 223 Steele Wood Dr</p> <p>City Richmond Hill State GA Zip Code 31324-4747</p> <p>Purpose of Disbursement mileage</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> 81006.E7183</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>MILEAGE</b></p>                 |

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

**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)  
Friends of Jack Kingston

|           |  |  |
|-----------|--|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Comcast Cable<br><br>Mailing Address 145 Park of Commerce Drive<br><br>City Savannah State GA Zip Code 31405-<br><br>Purpose of Disbursement monthly internet service<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  | Transaction ID: 80926.E7121<br>Date of Disbursement<br>08 / 04 / 2008<br><br>Amount of Each Disbursement this Period<br>95.00<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>MONTHLY INTERNET SERVICE |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Holland & Knight Committee for<br><br>Mailing Address Effective Government<br>2099 Pennsylvania Ave., NW, Suite<br><br>City Washington State DC Zip Code 20006-5564<br><br>Purpose of Disbursement Staff costs<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: 81006.C15739IK<br>Date of Disbursement<br>09 / 17 / 2008<br><br>Amount of Each Disbursement this Period<br>200.00<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>IN KIND: STAFF COSTS |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Chatham County Water & Sewer Department<br><br>Mailing Address 124 Bull Street<br><br>City Savannah State GA Zip Code 31401-3758<br><br>Purpose of Disbursement utilitites<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                                     | Transaction ID: 80926.E7129<br>Date of Disbursement<br>08 / 20 / 2008<br><br>Amount of Each Disbursement this Period<br>54.73<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>UTILITITES               |

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

**349.73**

**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)  
Friends of Jack Kingston

|   |  |
|---|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Georgia Power Co.</p> <p>Mailing Address 128 E. Broughton St.</p> <p>City Savannah State GA Zip Code 31401-</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> 80926.E7095</p> <p>Date of Disbursement<br/>07 / 17 / 2008</p> <p>Amount of Each Disbursement this Period<br/>62.39</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>UTILITIES</b></p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Timothy Wessinger</p> <p>Mailing Address 504 heritage Place</p> <p>City Valdosta State GA Zip Code 31602-</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>     | <p><b>Transaction ID:</b> 80926.E7152</p> <p>Date of Disbursement<br/>09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period<br/>920.94</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL</b></p>  |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Jack Kingston</p> <p>Mailing Address 207 Fiddlers Bend</p> <p>City Savannah State GA Zip Code 31406-5238</p> <p>Purpose of Disbursement travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>       | <p><b>Transaction ID:</b> 81008.E7202</p> <p>Date of Disbursement<br/>07 / 07 / 2008</p> <p>Amount of Each Disbursement this Period<br/>196.73</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>TRAVEL</b></p>   |

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

1180.06

**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)  
Friends of Jack Kingston

A.

Full Name (Last, First, Middle Initial)  
Alexandra Tabarrok

Mailing Address 223 Steele Wood Dr

City Richmond Hill State GA Zip Code 31324-4747

Purpose of Disbursement  
payroll

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80926.E7132  
Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

1394.19

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

PAYROLL

B.

Full Name (Last, First, Middle Initial)  
Christopher Crawford

Mailing Address 512 E. 56th Street

City Savannah State GA Zip Code 31405-

Purpose of Disbursement  
payroll

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80926.E7125  
Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

855.55

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

PAYROLL

C.

Full Name (Last, First, Middle Initial)  
Cavalier Telephone

Mailing Address formerly known as Talk America  
PO Box 2837

City Omaha State NE Zip Code 68103-2837

Purpose of Disbursement  
telephone

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80926.E7123  
Date of Disbursement

08 / 20 / 2008

Amount of Each Disbursement this Period

330.46

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

TELEPHONE

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

2580.20

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)  
Friends of Jack Kingston

A.

Full Name (Last, First, Middle Initial)  
Jack Kingston

Mailing Address 207 Fiddlers Bend

City Savannah State GA Zip Code 31406-5238

Purpose of Disbursement  
supplies

Candidate Name

007  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 81008.E7197  
Date of Disbursement

09 / 10 / 2008

Amount of Each Disbursement this Period

225.00

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

SUPPLIES

B.

Full Name (Last, First, Middle Initial)  
ALLTEL

Mailing Address P. O. Box 530533

City Atlanta State GA Zip Code 30353-0533

Purpose of Disbursement  
telephone

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 81006.E7188  
Date of Disbursement

09 / 05 / 2008

Amount of Each Disbursement this Period

109.88

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

TELEPHONE

C.

Full Name (Last, First, Middle Initial)  
Mr. Rickey Elliott

Mailing Address 445 Brandon Street

City Baxley State GA Zip Code 31513-

Purpose of Disbursement  
Event expense

Candidate Name

007  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 81006.E7169  
Date of Disbursement

09 / 17 / 2008

Amount of Each Disbursement this Period

575.00

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

EVENT EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

909.88

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)  
Friends of Jack Kingston

A.

Full Name (Last, First, Middle Initial)  
Susan West

Mailing Address 12 Hibernia Road

City Savannah State GA Zip Code 31411-

Purpose of Disbursement  
postage

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 80926.E7082  
Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

46.02

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

POSTAGE

B.

Full Name (Last, First, Middle Initial)  
Linda T. Jinks

Mailing Address 2033 Julienton Drive

City Townsend State GA Zip Code 31331-9208

Purpose of Disbursement  
fundraising expenses

Candidate Name

003  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 80926.E7115  
Date of Disbursement

08 / 26 / 2008

Amount of Each Disbursement this Period

100.00

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

FUNDRAISING EXPENSES

C.

Full Name (Last, First, Middle Initial)  
United WebWorks

Mailing Address 30 West Broughton Street

City Savannah State GA Zip Code 31401-

Purpose of Disbursement  
web site hosting

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 80926.E7124  
Date of Disbursement

08 / 27 / 2008

Amount of Each Disbursement this Period

1155.00

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

WEB SITE HOSTING

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

1301.02

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)  
Friends of Jack Kingston

|           |  |                          |  |
|-----------|--|--------------------------|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Automatic Data Processing<br>Mailing Address 5800 Windward Parkway<br>City Alpharetta State GA Zip Code 30005-<br>Purpose of Disbursement payroll taxes<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼             | 001<br>Category/<br>Type | Transaction ID: 80926.E7111<br>Date of Disbursement<br>08 / 15 / 2008<br>Amount of Each Disbursement this Period<br>111.60<br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br>PAYROLL TAXES         |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Automatic Data Processing<br>Mailing Address 5800 Windward Parkway<br>City Alpharetta State GA Zip Code 30005-<br>Purpose of Disbursement Payroll Processing Fee<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼    | 001<br>Category/<br>Type | Transaction ID: 80926.E7070<br>Date of Disbursement<br>07 / 31 / 2008<br>Amount of Each Disbursement this Period<br>66.18<br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br>PAYROLL PROCESSING FEE |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Cavalier Telephone<br>Mailing Address formerly known as Talk America<br>PO Box 2837<br>City Omaha State NE Zip Code 68103-2837<br>Purpose of Disbursement telephone<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 001<br>Category/<br>Type | Transaction ID: 81006.E7190<br>Date of Disbursement<br>09 / 17 / 2008<br>Amount of Each Disbursement this Period<br>331.34<br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br>TELEPHONE             |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 509.12      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Automatic Data Processing</p> <p>Mailing Address 5800 Windward Parkway</p> <p>City Alpharetta State GA Zip Code 30005-</p> <p>Purpose of Disbursement Payroll Taxes</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>    | <p><b>Transaction ID:</b> 80926.E7142</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="132.51"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL TAXES</b></p>   |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Kennickell Printing</p> <p>Mailing Address 1700 East President Street</p> <p>City Savannah State GA Zip Code 31404-0313</p> <p>Purpose of Disbursement office supplies</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> 81006.E7167</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="977.87"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>OFFICE SUPPLIES</b></p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Susan West</p> <p>Mailing Address 12 Hibernia Road</p> <p>City Savannah State GA Zip Code 31411-</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>                                | <p><b>Transaction ID:</b> 80926.E7131</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="361.17"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL</b></p>         |

|   |   |
|---|---|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p><input type="text" value="1471.55"/></p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> | <p><input type="text" value=""/></p>        |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

|           |  |  |                          |
|-----------|--|--|--------------------------|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Alexandra Tabarrok<br><br>Mailing Address 223 Steele Wood Dr<br><br>City Richmond Hill State GA Zip Code 31324-4747<br><br>Purpose of Disbursement supplies<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                            | <b>Transaction ID:</b> 81006.E7182<br><b>Date of Disbursement</b><br>09 / 17 / 2008<br><br>Amount of Each Disbursement this Period<br>58.12<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br><b>SUPPLIES</b>          | 001<br>Category/<br>Type |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Hancock Askew & Co., LLP<br><br>Mailing Address P. O. Box 2486<br>100 Riverview Drive<br><br>City Savannah State GA Zip Code 31402-2486<br><br>Purpose of Disbursement Accounting Fees<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> 80926.E7085<br><b>Date of Disbursement</b><br>07 / 17 / 2008<br><br>Amount of Each Disbursement this Period<br>2861.62<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br><b>ACCOUNTING FEES</b> | 001<br>Category/<br>Type |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Jack Kingston<br><br>Mailing Address 207 Fiddlers Bend<br><br>City Savannah State GA Zip Code 31406-5238<br><br>Purpose of Disbursement travel<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   | <b>Transaction ID:</b> 81008.E7200<br><b>Date of Disbursement</b><br>08 / 12 / 2008<br><br>Amount of Each Disbursement this Period<br>2620.36<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br><b>TRAVEL</b>          | 002<br>Category/<br>Type |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 5540.10 |
| <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)  
Friends of Jack Kingston

|           |   |   |   |
|-----------|---|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Jack Kingston<br><br>Mailing Address 207 Fiddlers Bend<br><br>City Savannah State GA Zip Code 31406-5238<br><br>Purpose of Disbursement travel<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼                               | <b>Transaction ID:</b> 81008.E7199<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 9 / 1 0 / 2 0 0 8 | Amount of Each Disbursement this Period<br>141.03<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>TRAVEL                |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>ALLTEL<br><br>Mailing Address P. O. Box 530533<br><br>City Atlanta State GA Zip Code 30353-0533<br><br>Purpose of Disbursement telephone<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼                                     | <b>Transaction ID:</b> 80926.E7092<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 7 / 0 7 / 2 0 0 8 | Amount of Each Disbursement this Period<br>109.84<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>TELEPHONE             |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Automatic Data Processing<br><br>Mailing Address 5800 Windward Parkway<br><br>City Alpharetta State GA Zip Code 30005-<br><br>Purpose of Disbursement payroll processing fee<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> 81009.E7205<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 7 / 0 2 / 2 0 0 8 | Amount of Each Disbursement this Period<br>59.16<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>PAYROLL PROCESSING FEE |

|  |  |               |  |
|--|--|---------------|--|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      |  | <b>310.03</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)  
Friends of Jack Kingston

|           |   |   |
|-----------|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Monroe Marketing<br><hr/> Mailing Address P. O. Box 14558<br><hr/> City Savannah State GA Zip Code 31416-1558<br><hr/> Purpose of Disbursement Advertising<br>Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">004</span><br>Category/Type<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>State: District:                       | Transaction ID: 80926.E7105<br>Date of Disbursement<br><span style="border: 1px solid black; padding: 2px;">08</span> / <span style="border: 1px solid black; padding: 2px;">11</span> / <span style="border: 1px solid black; padding: 2px;">2008</span><br><hr/> Amount of Each Disbursement this Period<br><span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">15000.00</span><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br>ADVERTISING  |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Alexandra Tabarrok<br><hr/> Mailing Address 223 Steele Wood Dr<br><hr/> City Richmond Hill State GA Zip Code 31324-4747<br><hr/> Purpose of Disbursement office supplies<br>Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span><br>Category/Type<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>State: District:         | Transaction ID: 81009.E7208<br>Date of Disbursement<br><span style="border: 1px solid black; padding: 2px;">08</span> / <span style="border: 1px solid black; padding: 2px;">11</span> / <span style="border: 1px solid black; padding: 2px;">2008</span><br><hr/> Amount of Each Disbursement this Period<br><span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">39.87</span><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br>OFFICE SUPPLIES |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>The Shops @ Isle of Hope, LLC<br><hr/> Mailing Address 1102 Mohawk Street Suite A2<br><hr/> City Savannah State GA Zip Code 31419-<br><hr/> Purpose of Disbursement October Rent<br>Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span><br>Category/Type<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>State: District: | Transaction ID: 81006.E7157<br>Date of Disbursement<br><span style="border: 1px solid black; padding: 2px;">09</span> / <span style="border: 1px solid black; padding: 2px;">17</span> / <span style="border: 1px solid black; padding: 2px;">2008</span><br><hr/> Amount of Each Disbursement this Period<br><span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">250.00</span><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br>OCTOBER RENT   |

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

**15289.87**

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Petty Cash Fund   | Transaction ID: 80926.E7120<br>Date of Disbursement<br>08 / 11 / 2008  |
|    | Mailing Address 7360 Skidaway Road, #5   | Amount of Each Disbursement this Period<br>135.57  |
|    | City Savannah State GA Zip Code 31406-   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |
|    | Purpose of Disbursement petty cash disbursement<br>Candidate Name  | 001<br>Category/Type   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    |  | PETTY CASH DISBURSEMENT  |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Aristotle   | Transaction ID: 80926.E7079<br>Date of Disbursement<br>07 / 23 / 2008  |
|    | Mailing Address 205 Pennsylvania Ave SE  | Amount of Each Disbursement this Period<br>2250.00   |
|    | City Washington State DC Zip Code 20003-1164   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |
|    | Purpose of Disbursement computer support<br>Candidate Name   | 001<br>Category/Type   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    |  | COMPUTER SUPPORT   |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Uncle Bobs Self Storage   | Transaction ID: 80926.E7074<br>Date of Disbursement<br>07 / 17 / 2008  |
|    | Mailing Address 10901 Abercorn Ext.  | Amount of Each Disbursement this Period<br>187.90  |
|    | City Savannah State GA Zip Code 31419-   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |
|    | Purpose of Disbursement monthly storage rental<br>Candidate Name   | 001<br>Category/Type   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    |  | MONTHLY STORAGE RENTAL   |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | 2573.47 |
| <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)  
Friends of Jack Kingston

|           |  |   |                          |
|-----------|--|---|--------------------------|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Hancock Askew & Co., LLP<br><br>Mailing Address P. O. Box 2486<br>100 Riverview Drive<br><br>City Savannah State GA Zip Code 31402-2486<br><br>Purpose of Disbursement accounting fees<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> 80926.E7117<br><b>Date of Disbursement</b><br>08 / 25 / 2008<br><br>Amount of Each Disbursement this Period<br>2515.00<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br><b>ACCOUNTING FEES</b>      | 001<br>Category/<br>Type |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Automatic Data Processing<br><br>Mailing Address 5800 Windward Parkway<br><br>City Alpharetta State GA Zip Code 30005-<br><br>Purpose of Disbursement Payroll Processing Fee<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼           | <b>Transaction ID:</b> 80710.E7066<br><b>Date of Disbursement</b><br>07 / 15 / 2008<br><br>Amount of Each Disbursement this Period<br>67.24<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br><b>PAYROLL PROCESSING FEE</b> | 001<br>Category/<br>Type |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Speedi-Sign of So. Ga., Inc.<br><br>Mailing Address 901 Barnard Street<br><br>City Savannah State GA Zip Code 31401-<br><br>Purpose of Disbursement Campaign Signs<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                     | <b>Transaction ID:</b> 80926.E7106<br><b>Date of Disbursement</b><br>08 / 27 / 2008<br><br>Amount of Each Disbursement this Period<br>3274.20<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br><b>CAMPAIGN SIGNS</b>       | 006<br>Category/<br>Type |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>5856.44</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)

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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)  
Friends of Jack Kingston

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Petty Cash Fund</p> <p>Mailing Address 7360 Skidaway Road, #5</p> <p>City Savannah State GA Zip Code 31406-</p> <p>Purpose of Disbursement petty cash disbursement</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>           | <p><b>Transaction ID:</b> 81006.E7165</p> <p>Date of Disbursement<br/>09 / 17 / 2008</p> <p>Amount of Each Disbursement this Period<br/>185.49</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PETTY CASH DISBURSEMENT</b></p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Susan West</p> <p>Mailing Address 12 Hibernia Road</p> <p>City Savannah State GA Zip Code 31411-</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>                                      | <p><b>Transaction ID:</b> 80926.E7144</p> <p>Date of Disbursement<br/>09 / 15 / 2008</p> <p>Amount of Each Disbursement this Period<br/>449.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL</b></p>                 |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Automatic Data Processing</p> <p>Mailing Address 5800 Windward Parkway</p> <p>City Alpharetta State GA Zip Code 30005-</p> <p>Purpose of Disbursement Payroll Processing 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> 80926.E7143</p> <p>Date of Disbursement<br/>09 / 15 / 2008</p> <p>Amount of Each Disbursement this Period<br/>62.22</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL PROCESSING FEE</b></p>   |

|  |               |
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| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>697.66</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)  
Friends of Jack Kingston

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>Holland & Knight Committee for  | Transaction ID: 81006.C15740IK<br>Date of Disbursement<br>09 / 17 / 2008                                  |
|    | Mailing Address Effective Government<br>2099 Pennsylvania Ave., NW, Suite  | Amount of Each Disbursement this Period<br>644.00   |
|    | City Washington State DC Zip Code 20006-5564   | <input type="checkbox"/> Refund or Disposal of Excess<br>Contributions Required Under<br>11 C.F.R. 400.53 |
|    | Purpose of Disbursement Food for event<br>Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | IN KIND: FOOD FOR EVENT   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼    |   |

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|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>Valdosta Daily Times  | Transaction ID: 80926.E7109<br>Date of Disbursement<br>08 / 27 / 2008                                     |
|    | Mailing Address P.O. Box 968   | Amount of Each Disbursement this Period<br>300.00   |
|    | City Valdosta State GA Zip Code 31603-   | <input type="checkbox"/> Refund or Disposal of Excess<br>Contributions Required Under<br>11 C.F.R. 400.53 |
|    | Purpose of Disbursement Advertising<br>Candidate Name  |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | ADVERTISING   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼    |   |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>Georgia Power Co.   | Transaction ID: 80926.E7127<br>Date of Disbursement<br>08 / 12 / 2008                                     |
|    | Mailing Address 128 E. Broughton St.   | Amount of Each Disbursement this Period<br>87.58  |
|    | City Savannah State GA Zip Code 31401-   | <input type="checkbox"/> Refund or Disposal of Excess<br>Contributions Required Under<br>11 C.F.R. 400.53 |
|    | Purpose of Disbursement utilities<br>Candidate Name  |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | UTILITIES   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼    |   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>1031.58</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)

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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)  
Friends of Jack Kingston

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Christopher Crawford</p> <p>Mailing Address 512 E. 56th Street</p> <p>City Savannah State GA Zip Code 31405-</p> <p>Purpose of Disbursement<br/>mileage reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> 80926.E7126<br/><b>Date of Disbursement</b><br/>08 / 13 / 2008</p> <p>Amount of Each Disbursement this Period<br/>500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>MILEAGE REIMBURSEMENT</b></p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Susan West</p> <p>Mailing Address 12 Hibernia Road</p> <p>City Savannah State GA Zip Code 31411-</p> <p>Purpose of Disbursement<br/>office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>                   | <p><b>Transaction ID:</b> 81009.E7207<br/><b>Date of Disbursement</b><br/>08 / 11 / 2008</p> <p>Amount of Each Disbursement this Period<br/>17.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>OFFICE SUPPLIES</b></p>        |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Linda T. Jinks</p> <p>Mailing Address 2033 Julienton Drive</p> <p>City Townsend State GA Zip Code 31331-9208</p> <p>Purpose of Disbursement<br/>parking fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>           | <p><b>Transaction ID:</b> 81008.E7196<br/><b>Date of Disbursement</b><br/>09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period<br/>6.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PARKING FEE</b></p>             |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>523.95</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)

PAGE 83 / 95

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <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)  
Friends of Jack Kingston

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>Cavalier Telephone  | Transaction ID: 80926.E7093<br>Date of Disbursement<br>07 / 23 / 2008                               |
|    | Mailing Address<br>formerly known as Talk America<br>PO Box 2837   | Amount of Each Disbursement this Period<br>331.42   |
|    | City Omaha State NE Zip Code 68103-2837  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|    | Purpose of Disbursement<br>telephone<br>Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | TELEPHONE   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼       |   |
|    | Category/Type<br>001   |   |

|    |  |   |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>Linda T. Jinks  | Transaction ID: 81008.E7193<br>Date of Disbursement<br>09 / 09 / 2008                               |
|    | Mailing Address<br>2033 Julienton Drive  | Amount of Each Disbursement this Period<br>1436.28  |
|    | City Townsend State GA Zip Code 31331-9208   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|    | Purpose of Disbursement<br>luncheon expenses<br>Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | LUNCHEON EXPENSES   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼       |   |
|    | Category/Type<br>007   |   |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>Christopher Crawford  | Transaction ID: 80926.E7072<br>Date of Disbursement<br>07 / 31 / 2008                               |
|    | Mailing Address<br>512 E. 56th Street  | Amount of Each Disbursement this Period<br>855.55   |
|    | City Savannah State GA Zip Code 31405-   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|    | Purpose of Disbursement<br>Payroll<br>Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | PAYROLL   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼       |   |
|    | Category/Type<br>001   |   |

|  |         |
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| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 2623.25 |
| <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)  
Friends of Jack Kingston

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>Automatic Data Processing<br><br>Mailing Address 5800 Windward Parkway<br><br>City Alpharetta State GA Zip Code 30005-<br>Purpose of Disbursement payroll fees<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                     | Transaction ID: 80926.E7119<br>Date of Disbursement<br>08 / 29 / 2008<br><br>Amount of Each Disbursement this Period<br>66.18<br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>PAYROLL FEES            |
| B. | Full Name (Last, First, Middle Initial)<br>Petty Cash Fund<br><br>Mailing Address 7360 Skidaway Road, #5<br><br>City Savannah State GA Zip Code 31406-<br>Purpose of Disbursement petty cash disbursement<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                     | Transaction ID: 81009.E7206<br>Date of Disbursement<br>09 / 30 / 2008<br><br>Amount of Each Disbursement this Period<br>64.00<br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>PETTY CASH DISBURSEMENT |
| C. | Full Name (Last, First, Middle Initial)<br>Hancock Askew & Co., LLP<br><br>Mailing Address P. O. Box 2486<br>100 Riverview Drive<br><br>City Savannah State GA Zip Code 31402-2486<br>Purpose of Disbursement Accounting fees<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: 81006.E7168<br>Date of Disbursement<br>09 / 08 / 2008<br><br>Amount of Each Disbursement this Period<br>1675.00<br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>ACCOUNTING FEES       |

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

1805.18

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)  
Friends of Jack Kingston

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>Susan West<br><br>Mailing Address 12 Hibernia Road<br><br>City Savannah State GA Zip Code 31411-<br><br>Purpose of Disbursement office supplies<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                        | Transaction ID: 80926.E7098<br>Date of Disbursement<br>08 / 04 / 2008<br><br>Amount of Each Disbursement this Period<br>36.75<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>OFFICE SUPPLIES         |
| B. | Full Name (Last, First, Middle Initial)<br>Jack Kingston<br><br>Mailing Address 207 Fiddlers Bend<br><br>City Savannah State GA Zip Code 31406-5238<br><br>Purpose of Disbursement meals<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                          | Transaction ID: 81008.E7198<br>Date of Disbursement<br>09 / 10 / 2008<br><br>Amount of Each Disbursement this Period<br>461.93<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>MEALS                  |
| C. | Full Name (Last, First, Middle Initial)<br>Uncle Bobs Self Storage<br><br>Mailing Address 10901 Abercorn Ext.<br><br>City Savannah State GA Zip Code 31419-<br><br>Purpose of Disbursement Monthly storage rental<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: 81006.E7156<br>Date of Disbursement<br>09 / 17 / 2008<br><br>Amount of Each Disbursement this Period<br>187.90<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>MONTHLY STORAGE RENTAL |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>686.58</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)  
Friends of Jack Kingston

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Linda T. Jinks</p> <p>Mailing Address 2033 Julienton Drive</p> <p>City Townsend State GA Zip Code 31331-9208</p> <p>Purpose of Disbursement officed supplies</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> 81008.E7194</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="52.52"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>OFFICED SUPPLIES</b></p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Alexandra Tabarrok</p> <p>Mailing Address 223 Steele Wood Dr</p> <p>City Richmond Hill State GA Zip Code 31324-4747</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>   | <p><b>Transaction ID:</b> 80926.E7071</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1394.19"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL</b></p>        |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Alexandra Tabarrok</p> <p>Mailing Address 223 Steele Wood Dr</p> <p>City Richmond Hill State GA Zip Code 31324-4747</p> <p>Purpose of Disbursement Meals</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>     | <p><b>Transaction ID:</b> 81006.E7186</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="55.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>MEALS</b></p>            |

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

**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)  
Friends of Jack Kingston

A.

Full Name (Last, First, Middle Initial)  
Ramelles Flowers & Gifts

Transaction ID: 80926.E7080  
Date of Disbursement

Mailing Address 2007 Abercorn Street

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 3 |   | 2 | 0 | 0 | 8 |

City Savannah State GA Zip Code 31401-

Amount of Each Disbursement this Period

|       |
|-------|
| 47.08 |
|-------|

Purpose of Disbursement  
Flowers

|     |
|-----|
| 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:  Primary  General  Other (specify) ▼

FLOWERS

State: District:

B.

Full Name (Last, First, Middle Initial)  
Petty Cash Fund

Transaction ID: 80926.E7113  
Date of Disbursement

Mailing Address 7360 Skidaway Road, #5

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

City Savannah State GA Zip Code 31406-

Amount of Each Disbursement this Period

|       |
|-------|
| 46.62 |
|-------|

Purpose of Disbursement  
petty cash disbursement

|     |
|-----|
| 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:  Primary  General  Other (specify) ▼

PETTY CASH DISBURSEMENT

State: District:

C.

Full Name (Last, First, Middle Initial)  
Susan West

Transaction ID: 80710.E7065  
Date of Disbursement

Mailing Address 12 Hibernia Road

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 5 |   | 2 | 0 | 0 | 8 |

City Savannah State GA Zip Code 31411-

Amount of Each Disbursement this Period

|        |
|--------|
| 398.40 |
|--------|

Purpose of Disbursement  
Payroll

|     |
|-----|
| 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:  Primary  General  Other (specify) ▼

PAYROLL

State: District:

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

|        |
|--------|
| 492.10 |
|--------|

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

|  |
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|  |
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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)  
Friends of Jack Kingston

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Linda T. Jinks</p> <p>Mailing Address 2033 Julienton Drive</p> <p>City Townsend State GA Zip Code 31331-9208</p> <p>Purpose of Disbursement office supplies</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>                      | <p><b>Transaction ID:</b> 80926.E7116</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="83.41"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>OFFICE SUPPLIES</b></p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Office Depot</p> <p>Mailing Address P. O. Box 689020<br/>Dept. 56- 4100929347</p> <p>City Des Moines State IA Zip Code 50368-9020</p> <p>Purpose of Disbursement office supplies</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> 81006.E7184</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="80.06"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>OFFICE SUPPLIES</b></p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Linda T. Jinks</p> <p>Mailing Address 2033 Julienton Drive</p> <p>City Townsend State GA Zip Code 31331-9208</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>                              | <p><b>Transaction ID:</b> 80926.E7133</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="557.32"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL</b></p>        |

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

**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)  
Friends of Jack Kingston

|   |  |
|---|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Linda T. Jinks</p> <p>Mailing Address 2033 Julienton Drive</p> <p>City Townsend State GA Zip Code 31331-9208</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>                          | <p><b>Transaction ID:</b> 80926.E7114</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="42.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>POSTAGE</b></p>                |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Automatic Data Processing</p> <p>Mailing Address 5800 Windward Parkway</p> <p>City Alpharetta State GA Zip Code 30005-</p> <p>Purpose of Disbursement Payroll Processing 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> 80926.E7149</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="68.16"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL PROCESSING FEE</b></p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Kennickell Printing</p> <p>Mailing Address 1700 East President Street</p> <p>City Savannah State GA Zip Code 31404-0313</p> <p>Purpose of Disbursement Office Supplies</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>       | <p><b>Transaction ID:</b> 80926.E7141</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="552.72"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>OFFICE SUPPLIES</b></p>       |

|   |  |
|---|--|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p><input type="text" value="662.88"/></p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> | <p><input type="text" value=""/></p>       |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

|           |   |   |   |
|-----------|---|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Linda T. Jinks<br><br>Mailing Address 2033 Julienton Drive<br><br>City Townsend State GA Zip Code 31331-9208<br>Purpose of Disbursement Payroll<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> 80926.E7155<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 9 / 3 0 / 2 0 0 8 | Amount of Each Disbursement this Period<br>557.32<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>PAYROLL |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Susan West<br><br>Mailing Address 12 Hibernia Road<br><br>City Savannah State GA Zip Code 31411-<br>Purpose of Disbursement Payroll<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼             | <b>Transaction ID:</b> 80926.E7073<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 7 / 3 1 / 2 0 0 8 | Amount of Each Disbursement this Period<br>185.52<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>PAYROLL |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Linda T. Jinks<br><br>Mailing Address 2033 Julienton Drive<br><br>City Townsend State GA Zip Code 31331-9208<br>Purpose of Disbursement mileage<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> 81008.E7195<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 9 / 0 9 / 2 0 0 8 | Amount of Each Disbursement this Period<br>44.04<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>MILEAGE  |

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

786.88

**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)  
Friends of Jack Kingston

|           |   |  |
|-----------|---|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Jack Kingston<br><br>Mailing Address 207 Fiddlers Bend<br><br>City Savannah State GA Zip Code 31406-5238<br><br>Purpose of Disbursement supplies<br>Candidate Name _____<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: _____ District: _____<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                      | Transaction ID: 81008.E7201<br>Date of Disbursement<br>08 / 12 / 2008<br><br>Amount of Each Disbursement this Period<br>185.49<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>SUPPLIES  |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>ALLTEL<br><br>Mailing Address P. O. Box 530533<br><br>City Atlanta State GA Zip Code 30353-0533<br><br>Purpose of Disbursement Telephone<br>Candidate Name _____<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: _____ District: _____<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                              | Transaction ID: 80926.E7100<br>Date of Disbursement<br>08 / 04 / 2008<br><br>Amount of Each Disbursement this Period<br>109.88<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>TELEPHONE |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Office Depot<br><br>Mailing Address P. O. Box 689020<br>Dept. 56- 4100929347<br><br>City Des Moines State IA Zip Code 50368-9020<br><br>Purpose of Disbursement _____<br>Candidate Name _____<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: _____ District: _____<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: 81009.E7209<br>Date of Disbursement<br>08 / 25 / 2008<br><br>Amount of Each Disbursement this Period<br>222.19<br><br><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                  |

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

517.56

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

62875.71

# 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)  
Friends of Jack Kingston

A.

Full Name (Last, First, Middle Initial)  
Old Savannah City Mission

Mailing Address 2414 Bull Street

City Savannah State GA Zip Code 31401-

Purpose of Disbursement  
Donation

Candidate Name

012  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80926.E7078

Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

1000.00

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

B.

Full Name (Last, First, Middle Initial)  
Goddard for Congress

Mailing Address PO Box 9460

City Warner Robins State GA Zip Code 31095-

Purpose of Disbursement  
REFUND OF EXCESS CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81010.E7216

Date of Disbursement

07 / 16 / 2008

Amount of Each Disbursement this Period

-1000.00

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

C.

Full Name (Last, First, Middle Initial)  
Coverdale Leadership Institute

Mailing Address 2021 Cresthaven Walk

City Woodstock State GA Zip Code 30189-6716

Purpose of Disbursement  
Donation

Candidate Name

012  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80926.E7076

Date of Disbursement

07 / 23 / 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) ▶

**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 93 / 95

|                          |     |                          |     |                          |     |                                     |     |
|--------------------------|-----|--------------------------|-----|--------------------------|-----|-------------------------------------|-----|
| <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)  
Friends of Jack Kingston

A.

Full Name (Last, First, Middle Initial)  
Committee to Elect John Stone

Transaction ID: 80926.E7108

Date of Disbursement

Mailing Address 6409 Abercorn St Ste C

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 6 |   | 2 | 0 | 0 | 8 |

City Savannah State GA Zip Code 31405-5796

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement  
CONGRESS/GA/12

Category/  
Type

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

Candidate Name  
COMMITTEE TO ELECT JOHN STONE

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Congress/GA/12

State: District:

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

|         |
|---------|
| 1000.00 |
|---------|

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

|         |
|---------|
| 2000.00 |
|---------|

# 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 checked="" type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

A.

Full Name (Last, First, Middle Initial)  
Robert B. Baker

Transaction ID: 81008.E7191  
Date of Disbursement

Mailing Address 100 Morgan Industrial Blvd.

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 9 |   | 2 | 0 | 0 | 8 |

City State Zip Code  
Garden City GA 31408-

Amount of Each Disbursement this Period

|        |
|--------|
| 200.00 |
|--------|

Purpose of Disbursement  
Refund of Contribution 010 excess contri  
Candidate Name

|                   |
|-------------------|
| 010               |
| Category/<br>Type |

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

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

B.

Full Name (Last, First, Middle Initial)  
Dale C. Critz, Jr.

Transaction ID: 80926.E7146  
Date of Disbursement

Mailing Address 5 Grimball River Road

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 4 |   | 2 | 0 | 0 | 8 |

City State Zip Code  
Savannah GA 31406-

Amount of Each Disbursement this Period

|        |
|--------|
| 200.00 |
|--------|

Purpose of Disbursement  
Refund of Contribution 010 Excess contri  
Candidate Name

|                   |
|-------------------|
| 010               |
| Category/<br>Type |

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

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

C.

Full Name (Last, First, Middle Initial)  
Robert S. Jepson

Transaction ID: 80926.E7148  
Date of Disbursement

Mailing Address 8 Shellworth Crossing

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 4 |   | 2 | 0 | 0 | 8 |

City State Zip Code  
Savannah GA 31411-2135

Amount of Each Disbursement this Period

|        |
|--------|
| 200.00 |
|--------|

Purpose of Disbursement  
Refund of Contribution 010 excess contri  
Candidate Name

|                   |
|-------------------|
| 010               |
| Category/<br>Type |

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

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

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

|        |
|--------|
| 600.00 |
|--------|

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)

PAGE 95 / 95

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

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NAME OF COMMITTEE (In Full)  
Friends of Jack Kingston

A.

Full Name (Last, First, Middle Initial)  
Philip Solomons, Jr.

Mailing Address 31 E. 49 Street

City Savannah State GA Zip Code 31405-

Purpose of Disbursement  
Refund of Contribution 010 excess contri

Candidate Name

010  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

General 2008

Transaction ID: 80926.E7147

Date of Disbursement

09 / 24 / 2008

Amount of Each Disbursement this Period

200.00

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

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

200.00

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

800.00