

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
Brian Davis for Congress

ADDRESS (number and street) PO Box 1081
 Check if different than previously reported. (ACC)
Rochester MN 55903

2. **FEC IDENTIFICATION NUMBER** C00435545
CITY **STATE** **ZIP CODE**
STATE **DISTRICT**
3. **IS THIS REPORT** **NEW (N)** **OR** **AMENDED (A)**
MN 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 2007 through 09 30 2007

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

Signature of Treasurer Electronically Filed by Lori M. Lillienberg Date 04 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

Brian Davis for Congress

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	84270.75	104633.23
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	84270.75	104633.23
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	25373.64	28651.57
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	25373.64	28651.57
8. Cash on Hand at Close of Reporting Period (from Line 27).....	75881.66	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
 Brian Davis for Congress

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. RECEIPTS

COLUMN A
 Total This Period

COLUMN B
 Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

51728.00

56028.00

(ii) Unitemized.....

3269.00

3769.00

(iii) TOTAL of contributions

54997.00

59797.00

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

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

29273.75

44836.23

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

84270.75

104633.23

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

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

0.00

0.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0.00

0.00

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

84270.75

104633.23

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	25373.64	28651.57
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	100.00	100.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	25473.64	28751.57

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	17084.55
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	84270.75
25. SUBTOTAL (add Line 23 and Line 24).....	101355.30
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	25473.64
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	75881.66

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 39
(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)
Brian Davis for Congress

<p>A. Full Name (Last, First, Middle Initial) Richard Arend</p> <p>Mailing Address Po Box 574</p> <p>City State Zip Code Rochester MN 55903</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Employed Occupation Business Owner</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 09 / 17 / 2007</p> <p>Transaction ID: SA11AI.4209</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Douglas W Arthur</p> <p>Mailing Address 5701 Stoneacre Ct</p> <p>City State Zip Code Glen Allen VA 23059</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Virginia Commonwealth Uni- versi Occupation Physician</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 300.00</p>	<p>Date of Receipt 09 / 07 / 2007</p> <p>Transaction ID: SA11AI.4269</p> <p>Amount of Each Receipt this Period 300.00</p> <p>Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Ronald D Belec</p> <p>Mailing Address 855 N Greenleaf Ave</p> <p>City State Zip Code Gurnee IL 60031</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Autobody of The Glens Occupation Manager</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 205.00</p>	<p>Date of Receipt 09 / 14 / 2007</p> <p>Transaction ID: SA11AI.4225</p> <p>Amount of Each Receipt this Period 205.00</p> <p>Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	1505.00
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 6 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

A. Full Name (Last, First, Middle Initial)
Kashmira Adil Bharucha
Mailing Address 634 18th Ave SW

City State Zip Code
Rochester MN 55902

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Mayo Clinic Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 501.00

Date of Receipt 08 / 01 / 2007
Transaction ID: SA11AI.4348
 Amount of Each Receipt this Period 501.00
Contribution
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Arthur Birdseye
Mailing Address 3318 Salem Pt. Dr. SW

City State Zip Code
Rochester MN 55902

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self Employed Business Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 10 / 2007
Transaction ID: SA11AI.4335
 Amount of Each Receipt this Period 1000.00
Contribution
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Laurie E Blach
Mailing Address 5815 Alton Rd

City State Zip Code
Miami Beach FL 33140

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Mt. Sinai Medical Center Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 06 / 2007
Transaction ID: SA11AI.4283
 Amount of Each Receipt this Period 1000.00
Contribution
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2501.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 39
	<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)
Brian Davis for Congress

A.	Full Name (Last, First, Middle Initial) Ellen Boschwitz		Date of Receipt
	Mailing Address 330 Inland Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 19 / 2007
	City	State	Zip Code
	Plymouth	MN	55447
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4193
Name of Employer Home Value		Occupation	Amount of Each Receipt this Period
		Vice President	<input type="text"/> 2300.00
Receipt For: 2008		Election Cycle-to-Date ▼	Contribution
<input checked="" 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 type="checkbox"/> Other (specify) ▼		<input type="text"/> 2300.00	

B.	Full Name (Last, First, Middle Initial) Rudy Boschwitz		Date of Receipt
	Mailing Address 330 Inland Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 19 / 2007
	City	State	Zip Code
	Plymouth	MN	55447
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4191
Name of Employer Retired		Occupation	Amount of Each Receipt this Period
		US Senator	<input type="text"/> 2300.00
Receipt For: 2008		Election Cycle-to-Date ▼	Contribution
<input checked="" 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 type="checkbox"/> Other (specify) ▼		<input type="text"/> 2300.00	

C.	Full Name (Last, First, Middle Initial) Lorraine Bradley		Date of Receipt
	Mailing Address 25 Wilton St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 09 / 2007
	City	State	Zip Code
	Princeton	NJ	08540
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4245
Name of Employer Oncura		Occupation	Amount of Each Receipt this Period
		Marketing Development	<input type="text"/> 300.00
Receipt For: 2008		Election Cycle-to-Date ▼	Contribution
<input checked="" 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 type="checkbox"/> Other (specify) ▼		<input type="text"/> 300.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 4900.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 8 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

A. Full Name (Last, First, Middle Initial)
Ivan A Brezovich

Mailing Address Dept of Radiology Oncology 619 S 1

City Birmingham State AL Zip Code 35294

FEC ID number of contributing federal political committee. C

Name of Employer University of AL - Birmin-
g. Occupation Medical Physicist

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y
09 / 07 / 2007

Transaction ID: SA11AI.4257

Amount of Each Receipt this Period 220.00

Contribution 220.00

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

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

Mailing Address 3017 Avalon Cove Ct SW

City Rochester State MN Zip Code 55902

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Accountant

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y
08 / 31 / 2007

Transaction ID: SA11AI.4317

Amount of Each Receipt this Period 1000.00

Contribution 1000.00

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

C. Full Name (Last, First, Middle Initial)
Jamie Cesaretti

Mailing Address 23 Prescott St

City Demarest State NJ Zip Code 07627

FEC ID number of contributing federal political committee. C

Name of Employer Mt. Sinai Hospital Occupation Physician

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y
09 / 04 / 2007

Transaction ID: SA11AI.4307

Amount of Each Receipt this Period 250.00

Contribution 250.00

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

SUBTOTAL of Receipts This Page (optional) 1470.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

<p>A. Full Name (Last, First, Middle Initial) Christine M Cha</p> <p>Mailing Address 2716 NW Avocet Lane</p> <p>City State Zip Code Portland OR 97229</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation The Oregon Clinic, P.C. Physician</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 09 / 07 / 2007</p> <p>Transaction ID: SA11AI.4261</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Phil Colletier</p> <p>Mailing Address 4622 151 st St</p> <p>City State Zip Code Urbandale IA 56323</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Mercy Medical Center Physician</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1150.00</p>	<p>Date of Receipt 09 / 05 / 2007</p> <p>Transaction ID: SA11AI.4295</p> <p>Amount of Each Receipt this Period 1150.00</p> <p>Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Emmett Davis</p> <p>Mailing Address 124 Sheridan Ct. E.</p> <p>City State Zip Code Waukegan IL 60085</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Waukegan Public Schools School Principal</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2300.00</p>	<p>Date of Receipt 09 / 07 / 2007</p> <p>Transaction ID: SA11AI.4279</p> <p>Amount of Each Receipt this Period 2100.00</p> <p>Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	4250.00
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 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

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

Mailing Address 124 Sheridan Ct. E.

City State Zip Code
Waukegan IL 60085

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

Name of Employer Occupation
Waukegan Public Schools Retired Reading Teacher

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

Date of Receipt
MM / DD / YYYY
09 / 07 / 2007

Transaction ID: SA11AI.4281

Amount of Each Receipt this Period
2100.00

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

B. Full Name (Last, First, Middle Initial)
Adam Dicker

Mailing Address 418 Silver Hill Road

City State Zip Code
Cherry Hill NJ 08002

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

Name of Employer Occupation
Thomas Jefferson Hospital Physician

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

Date of Receipt
MM / DD / YYYY
08 / 06 / 2007

Transaction ID: SA11AI.4341

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Rodney Ellis

Mailing Address 29289 Regency Circle

City State Zip Code
Westlake OH 44145

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

Name of Employer Occupation
Aultman Hospital Physician

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

Date of Receipt
MM / DD / YYYY
09 / 14 / 2007

Transaction ID: SA11AI.4223

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **2850.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

A. Full Name (Last, First, Middle Initial)
Gregg Franklin

Mailing Address 12700 Desert Sky Ave NE

City State Zip Code
Albuquerque NM 87111

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
New Mexico Cancer Center Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2007
Transaction ID: SA11AI.4333

Amount of Each Receipt this Period 250.00

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

B. Full Name (Last, First, Middle Initial)
James R Gray

Mailing Address 300 Walnut Dr

City State Zip Code
Nashville TN 37205

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self Employed Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 10 / 2007
Transaction ID: SA11AI.4243

Amount of Each Receipt this Period 250.00

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

C. Full Name (Last, First, Middle Initial)
Peter Grimm

Mailing Address 1630 E. Boston Terrace

City State Zip Code
Seattle WA 98112

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Swedish Medical Center Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 05 / 2007
Transaction ID: SA11AI.4299

Amount of Each Receipt this Period 1000.00

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

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

A. Full Name (Last, First, Middle Initial)
Randy Heysek
Mailing Address Po Box 5469
City State Zip Code
Plant City FL 33563
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Central Florida Cancer Inst. Physician
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt MM / DD / YYYY
09 / 07 / 2007
Transaction ID: SA11AI.4277
Amount of Each Receipt this Period 500.00
Contribution
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Arica Hirsch
Mailing Address 9201 Ridgeway Ave.
City State Zip Code
Evanston IL 60203
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Radiation Oncology Consultants Physician
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt MM / DD / YYYY
09 / 26 / 2007
Transaction ID: SA11AI.4161
Amount of Each Receipt this Period 300.00
Contribution
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Eric M Horwitz
Mailing Address Fox Chase Cancer Center
333 Cottman Avenue
City State Zip Code
Philadelphia PA 19111
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Fox Chase Cancer Center Physician
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt MM / DD / YYYY
09 / 17 / 2007
Transaction ID: SA11AI.4205
Amount of Each Receipt this Period 250.00
Contribution
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1050.00
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

A. Full Name (Last, First, Middle Initial)
Orest A Hrynewych

Mailing Address 2325 W. Rice St.

City State Zip Code
Chicago IL 60622

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

Name of Employer Sargent Lundy LLC Occupation Engineer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Date of Receipt: 09 / 17 / 2007
Transaction ID: SA11AI.4203
 Amount of Each Receipt this Period: 250.00
 Contribution: 250.00

B. Full Name (Last, First, Middle Initial)
Geoffrey S Ibbott

Mailing Address 3329 HarbourBreeze Ln

City State Zip Code
Pearland TX 77584

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

Name of Employer MD Andersen Occupation Medical Physicist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Date of Receipt: 09 / 07 / 2007
Transaction ID: SA11AI.4267
 Amount of Each Receipt this Period: 250.00
 Contribution: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Moulds Jefferson

Mailing Address 1752 17th St NW

City State Zip Code
Washington DC 20009

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

Name of Employer Mayo Clinic Occupation Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Date of Receipt: 08 / 06 / 2007
Transaction ID: SA11AI.4339
 Amount of Each Receipt this Period: 500.00
 Contribution: 500.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 39

(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)
Brian Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Peter Johnstone

Mailing Address 2853 Hawthorne Dr NE

City Atlanta State GA Zip Code 30345

FEC ID number of contributing federal political committee. C

Name of Employer Emory University Occupation Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2007

Transaction ID: SA11AI.4155

Amount of Each Receipt this Period 250.00

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

B.

Full Name (Last, First, Middle Initial)
Lane Jones

Mailing Address 1304 Wonder World Dr

City San Marcus State TX Zip Code 78666

FEC ID number of contributing federal political committee. C

Name of Employer Center For Cancer Care Occupation Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 07 / 2007

Transaction ID: SA11AI.4275

Amount of Each Receipt this Period 250.00

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

C.

Full Name (Last, First, Middle Initial)
Daniel Kane

Mailing Address 1430 Montclair PI

City Los Altos State CA Zip Code 94024

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Entrepreneur

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 18 / 2007

Transaction ID: SA11AI.4201

Amount of Each Receipt this Period 250.00

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

SUBTOTAL of Receipts This Page (optional) 750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 39

(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)
Brian Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Brian D Kavanagh

Mailing Address 5535 S Berry Lane

City State Zip Code
Greenwood Village CO 80111

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

Name of Employer
University Of Colorado

Occupation
Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 06 / 2007

Transaction ID: SA11AI.4289

Amount of Each Receipt this Period

250.00

Contribution

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

B.

Full Name (Last, First, Middle Initial)
Patrick A Kupelian

Mailing Address 1310 Temple Grove Court

City State Zip Code
Winter Park FL 32789

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

Name of Employer
MDACC Orlando

Occupation
Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 04 / 2007

Transaction ID: SA11AI.4311

Amount of Each Receipt this Period

500.00

Contribution

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

C.

Full Name (Last, First, Middle Initial)
W Robert Lee

Mailing Address 220 Silver Creek Trail

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer
Duke University

Occupation
Professor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 16 / 2007

Transaction ID: SA11AI.4215

Amount of Each Receipt this Period

500.00

Contribution

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

SUBTOTAL of Receipts This Page (optional) ▶

1250.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

<p>A. Full Name (Last, First, Middle Initial) Daniel Low</p> <p>Mailing Address 18 Sherwyn Lane</p> <p>City State Zip Code St. Louis MO 63141</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Washington University Medical Physicist</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt 09 / 22 / 2007</p> <p>Transaction ID: SA11AI.4175</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Arul Mahadevan</p> <p>Mailing Address 3289 Chalfant Road</p> <p>City State Zip Code Shaker Heights OH 44120</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Cleveland Clinic Physician</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt 09 / 13 / 2007</p> <p>Transaction ID: SA11AI.4229</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Alvaro A Martinez</p> <p>Mailing Address 1375 trowbridge road</p> <p>City State Zip Code Bloomfield Hills MI 48304</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation William Beaumont Hospital MD</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 700.00</p>	<p>Date of Receipt 09 / 26 / 2007</p> <p>Transaction ID: SA11AI.4163</p> <p>Amount of Each Receipt this Period 700.00</p> <p>Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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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 17 / 39

(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)
Brian Davis for Congress

A.

Full Name (Last, First, Middle Initial)
John M Martinez

Mailing Address 1320 Hunters Trail

City State Zip Code
Hope Mills NC 28348

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
US Army Pilot

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 201.00

Date of Receipt M M / D D / Y Y Y Y
09 / 05 / 2007

Transaction ID: SA11AI.4297

Amount of Each Receipt this Period 201.00

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

B.

Full Name (Last, First, Middle Initial)
Timothy P Mate

Mailing Address 5420 143rd Avenue SE

City State Zip Code
Bellevue WA 98006

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Swedish Medical Center Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
09 / 21 / 2007

Transaction ID: SA11AI.4179

Amount of Each Receipt this Period 1000.00

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

C.

Full Name (Last, First, Middle Initial)
Byron C May

Mailing Address 6 Spring Creek Wynd

City State Zip Code
Kingsport TN 37664

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SW VA Regional Cancer Ctr Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
09 / 07 / 2007

Transaction ID: SA11AI.4259

Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) 2201.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 39

(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)
Brian Davis for Congress

A.

Full Name (Last, First, Middle Initial)
James Maze

Mailing Address P.o. Box 3066

City State Zip Code
Lake Charles LA 70602

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Lake Charles Memorial Hos- Physician
pital

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2007

Transaction ID: SA11AI.4301

Amount of Each Receipt this Period
1000.00

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

B.

Full Name (Last, First, Middle Initial)
Eric R Meier

Mailing Address 9615 NE 14th St

City State Zip Code
Bellevue WA 98004

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Calypto Medical Inc. CEO

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

Date of Receipt
M M / D D / Y Y Y Y
08 / 31 / 2007

Transaction ID: SA11AI.4315

Amount of Each Receipt this Period
1000.00

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

C.

Full Name (Last, First, Middle Initial)
Thomas E Merchant

Mailing Address 2282 Jefferson Avenue

City State Zip Code
Memphis TN 38104

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
St. Jude Children's Hospi- Physician
tal

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2007

Transaction ID: SA11AI.4233

Amount of Each Receipt this Period
1000.00

Contribution
 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

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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)
Brian Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Gregory Merrick

Mailing Address 38 Aaron Woods

City State Zip Code
Wheeling WV 26003

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

Name of Employer Occupation
Schiffler Oncology Center Physician

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	/	2	1	/	2	0	0	7

Transaction ID: SA11AI.4356

Amount of Each Receipt this Period
1000.00

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

B.

Full Name (Last, First, Middle Initial)
Jeff M Michalski

Mailing Address 29 Fieldstone Trail

City State Zip Code
Ladue MO 63124

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

Name of Employer Occupation
Washington University Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	1	/	2	0	0	7

Transaction ID: SA11AI.4177

Amount of Each Receipt this Period
750.00

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

C.

Full Name (Last, First, Middle Initial)
Brian Moran

Mailing Address 815 Pasquinelli Drive

City State Zip Code
Westmont IL 60559

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

Name of Employer Occupation
Chicago Prostate Cancer Center Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	6	/	2	0	0	7

Transaction ID: SA11AI.4287

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional) ► **4050.00**

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

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 20 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

A. Full Name (Last, First, Middle Initial)
Meena S Moran
Mailing Address 3 Guilford Point Drive
City Guilford State CT Zip Code 06437
FEC ID number of contributing federal political committee. **C**
Name of Employer Yale University Occupation Radiation Oncologist
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
400.00
Date of Receipt 09 / 10 / 2007
Transaction ID: SA11AI.4241
Amount of Each Receipt this Period 400.00
Contribution
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
John Morris
Mailing Address 5830 Heather Dr SW
City Rochester State MN Zip Code 55902
FEC ID number of contributing federal political committee. **C**
Name of Employer Mayo Clinic Occupation Physician
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
550.00
Date of Receipt 08 / 10 / 2007
Transaction ID: SA11AI.4362
Amount of Each Receipt this Period 550.00
In-kind - Air Travel
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John Morris
Mailing Address 5830 Heather Dr SW
City Rochester State MN Zip Code 55902
FEC ID number of contributing federal political committee. **C**
Name of Employer Mayo Clinic Occupation Physician
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
900.00
Date of Receipt 08 / 17 / 2007
Transaction ID: SA11AI.4365
Amount of Each Receipt this Period 350.00
In-kind - Air Travel
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1300.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 21 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

A. Full Name (Last, First, Middle Initial)
Lance A Mynderse

Mailing Address 820 3rd St. SW

City State Zip Code
Rochester MN 55902

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Mayo Foundation Physician

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2007

Transaction ID: SA11AI.4151

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Mark Neeb

Mailing Address 2491 Hawk Hill Lane SW

City State Zip Code
Rochester MN 55902

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Affiliated Medical Group Business Owner

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 15 / 2007

Transaction ID: SA11AI.4217

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Kerry Olsen

Mailing Address 2520 Northridge Ln NE

City State Zip Code
Rochester MN 55906

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Mayo Clinic Physician

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

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2007

Transaction ID: SA11AI.4327

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) 750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

A. Full Name (Last, First, Middle Initial)
Michael Papagikos
 Mailing Address 3607 St. Francis Dr.
 City State Zip Code
 Wilmington NC 28409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 New Hanover Radiation Oncology Physician
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Contribution
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 Date of Receipt: 09 / 14 / 2007
 Transaction ID: SA11AI.4221
 Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Anuj V Peddada
 Mailing Address 11 El Encanto Dr.
 City State Zip Code
 Colorado Springs CO 80906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Radiation Oncologist PC Physician
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Contribution
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 Date of Receipt: 09 / 19 / 2007
 Transaction ID: SA11AI.4189
 Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Alan Pollack
 Mailing Address 1521 Scrope Road
 City State Zip Code
 Rydal PA 19046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Fox Chase Cancer Center Physician
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Contribution
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 Date of Receipt: 09 / 14 / 2007
 Transaction ID: SA11AI.4227
 Amount of Each Receipt this Period: 500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

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

Mailing Address Dept of Radiation Oncology 270-05

City State Zip Code
New Hyde Park NY 11040

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

Name of Employer Occupation
New York Prostate Institute Physician

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

Date of Receipt
MM / DD / YYYY
08 / 22 / 2007

Transaction ID: SA11AI.4325

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Bradley R Prestidge

Mailing Address 10924 Reyes Canyons

City State Zip Code
Helotes TX 78023

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

Name of Employer Occupation
Texas Cancer Clinic Radiation Oncologist

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

Date of Receipt
MM / DD / YYYY
09 / 08 / 2007

Transaction ID: SA11AI.4247

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Adam Raben

Mailing Address 10 School Rd

City State Zip Code
Wilmington DE 19803

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

Name of Employer Occupation
Christiana Health Care Physician

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

Date of Receipt
MM / DD / YYYY
09 / 04 / 2007

Transaction ID: SA11AI.4309

Amount of Each Receipt this Period
500.00

Contribution
 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 24 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

<p>A. Full Name (Last, First, Middle Initial) Greg M Rasp</p> <p>Mailing Address 3768 Grand Oak Trail</p> <p>City State Zip Code Dayton OH 45440</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Dayton Physicians, LLC Occupation Physician</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 09 / 26 / 2007</p> <p>Transaction ID: SA11AI.4159</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Dan R Reed</p> <p>Mailing Address 9991 E. Peregrine Pl</p> <p>City State Zip Code Scottsdale AZ 85262</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Arizona Oncology Services Occupation Physician</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt 09 / 25 / 2007</p> <p>Transaction ID: SA11AI.4167</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) John Remick</p> <p>Mailing Address 3232 Fox Hollow Ct SW</p> <p>City State Zip Code Rochester MN 55902</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Employed Occupation Business Owner</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 09 / 17 / 2007</p> <p>Transaction ID: SA11AI.4211</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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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 Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 39
	(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)
Brian Davis for Congress

A.	Full Name (Last, First, Middle Initial) Leland Rogers	Date of Receipt MM / DD / YYYY 09 / 05 / 2007
	Mailing Address 904 S. Military Drive	Transaction ID: SA11AI.4293
	City State Zip Code Salt Lake City UT 84108	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation GammaWest Brachytherapy Radiation Oncologist	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Dan Sadleir	Date of Receipt MM / DD / YYYY 09 / 06 / 2007
	Mailing Address 1708 S. Highland	Transaction ID: SA11AI.4291
	City State Zip Code Arlington Heights IL 60005	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Bank Financial Analyst	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) James Sadleir	Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 1708 S. Highland	Transaction ID: SA11AI.4183
	City State Zip Code Arlington Heights IL 60005	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Self Employed Chiropractor	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

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: (check only one)	PAGE 26 / 39
	<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)
Brian Davis for Congress

A.	Full Name (Last, First, Middle Initial) Christopher J Schultz	Date of Receipt MM / DD / YYYY 09 / 07 / 2007
	Mailing Address 3850 Charter Point Court	Transaction ID: SA11AI.4265
	City State Zip Code Brookfield WI 53045	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Medical College of Wisconsin Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) David J Schwartz	Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 2766 Oshkosh Lane NW	Transaction ID: SA11AI.4181
	City State Zip Code Rochester MN 55901	Amount of Each Receipt this Period 201.00
	FEC ID number of contributing federal political committee. C	Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Therapeutic Radiologists, Inc. Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 201.00	

C.	Full Name (Last, First, Middle Initial) Thomas G Shanahan	Date of Receipt MM / DD / YYYY 09 / 07 / 2007
	Mailing Address 32 West Farview Lane	Transaction ID: SA11AI.4253
	City State Zip Code Springfield IL 62711	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer University Radiologist Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1100.00	

SUBTOTAL of Receipts This Page (optional)	▶	1701.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 27 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

A. Full Name (Last, First, Middle Initial)
Daniel X Shasha

Mailing Address 359 W. 116th St

City State Zip Code
New York NY 10026

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

Name of Employer Occupation
Beth Israel Physician

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

Date of Receipt
MM / DD / YYYY
09 / 04 / 2007

Transaction ID: SA11AI.4303

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 26 W 53rd St

City State Zip Code
Kansas city MO 64112

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

Name of Employer Occupation
Therapeutic Radiologist of KC Physician

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

Date of Receipt
MM / DD / YYYY
08 / 06 / 2007

Transaction ID: SA11AI.4344

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Robert Speyer

Mailing Address 75 14th Street Unit 3910

City State Zip Code
Atlanta GA 30309

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

Name of Employer Occupation
Georgia Tech Professor of Ceramic Engineering

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

Date of Receipt
MM / DD / YYYY
09 / 08 / 2007

Transaction ID: SA11AI.4249

Amount of Each Receipt this Period
500.00

Contribution
 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 28 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

<p>A. Full Name (Last, First, Middle Initial) Richard G Stock</p> <p>Mailing Address 771 West End Ave 5D</p> <p>City State Zip Code New York NY 11025</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Mt. Sinai Medical Center Physician</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2007</p> <p>Transaction ID: SA11AI.4305</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) Michael A Stutz</p> <p>Mailing Address 633 Thatcher Avenue</p> <p>City State Zip Code River Forest IL 60305</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Associated Radiologists Physician</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2007</p> <p>Transaction ID: SA11AI.4263</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) Gregory P Swanson</p> <p>Mailing Address 3638 Hunters Cliff</p> <p>City State Zip Code San Antonio TX 78230</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Uthscsa Physician</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007</p> <p>Transaction ID: SA11AI.4153</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	1250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 39

(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)
Brian Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Patrick Sweeney

Mailing Address 10450 S. Hoyne

City State Zip Code
Chicago IL 60643

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Lutheran General Hospital Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
09 / 14 / 2007

Transaction ID: SA11AI.4219

Amount of Each Receipt this Period 250.00

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

B.

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

Mailing Address 7321 172nd St

City State Zip Code
Edmonds VA 98026

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Swedish Medical Center Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt M M / D D / Y Y Y Y
09 / 07 / 2007

Transaction ID: SA11AI.4273

Amount of Each Receipt this Period 2000.00

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

C.

Full Name (Last, First, Middle Initial)
Charles Thomas

Mailing Address 1622 Foley Ct.

City State Zip Code
Portland OR 97229

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Ohsu Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
09 / 11 / 2007

Transaction ID: SA11AI.4231

Amount of Each Receipt this Period 250.00

Contribution
 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
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 39

(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)
Brian Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Paul A Walker

Mailing Address 3692 Tanglewood Drive

City State Zip Code
Springdale AR 72764

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
BrachySciences Sales Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 850.00

Date of Receipt 09 / 16 / 2007

Transaction ID: SA11AI.4213

Amount of Each Receipt this Period 850.00

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

B.

Full Name (Last, First, Middle Initial)
Kent Wallner

Mailing Address Puget Sound VA 1660 S. Columbian W

City State Zip Code
Seattle WA 98108

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Veteran's Hospital Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 11 / 2007

Transaction ID: SA11AI.4235

Amount of Each Receipt this Period 500.00

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

C.

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

Mailing Address 5132 Nicklaus Dr. NW

City State Zip Code
Rochester MN 55901

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Mayo Clinic Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 08 / 02 / 2007

Transaction ID: SA11AI.4346

Amount of Each Receipt this Period 500.00

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

SUBTOTAL of Receipts This Page (optional) 1850.00

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

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Yoshiya Yamada

Mailing Address 450 East 63 Street Apt 8L

City State Zip Code
New York NY 10021

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

Name of Employer Mskcc Occupation MD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2007

Transaction ID: SA11AI.4165

Amount of Each Receipt this Period
 350.00

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

350.00

SUBTOTAL of Receipts This Page (optional)	▶	350.00
TOTAL This Period (last page this line number only)	▶	51728.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 39
(check only one)

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

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Brian James Davis

Mailing Address 839 Amber Ridge Ln SW

City State Zip Code
Rochester MN 55902

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

Name of Employer
Mayo Clinic

Occupation
Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

15587.48

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 21 / 2007

Transaction ID: SA11D.4402

Amount of Each Receipt this Period
25.00

In-kind - Parade Fee

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

B.

Full Name (Last, First, Middle Initial)
Brian James Davis

Mailing Address 839 Amber Ridge Ln SW

City State Zip Code
Rochester MN 55902

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

Name of Employer
Mayo Clinic

Occupation
Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

16837.48

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 16 / 2007

Transaction ID: SA11D.4370

Amount of Each Receipt this Period
1250.00

In-kind - Fundraising Consulting

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

C.

Full Name (Last, First, Middle Initial)
Brian James Davis

Mailing Address 839 Amber Ridge Ln SW

City State Zip Code
Rochester MN 55902

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

Name of Employer
Mayo Clinic

Occupation
Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

17180.73

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 24 / 2007

Transaction ID: SA11D.4372

Amount of Each Receipt this Period
343.25

In-kind - Fundraising Consulting

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

SUBTOTAL of Receipts This Page (optional) ► **1618.25**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

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

Mailing Address 839 Amber Ridge Ln SW

City State Zip Code
Rochester MN 55902

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

Name of Employer Occupation
Mayo Clinic Physician

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

Date of Receipt
MM / DD / YYYY
09 / 30 / 2007

Transaction ID: SA11D.4369

Amount of Each Receipt this Period
24600.00

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

41780.73

B. Full Name (Last, First, Middle Initial)
Brian James Davis

Mailing Address 839 Amber Ridge Ln SW

City State Zip Code
Rochester MN 55902

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

Name of Employer Occupation
Mayo Clinic Physician

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

Date of Receipt
MM / DD / YYYY
09 / 30 / 2007

Transaction ID: SA11D.4407

Amount of Each Receipt this Period
3055.50

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

44836.23

SUBTOTAL of Receipts This Page (optional) ► **27655.50**

TOTAL This Period (last page this line number only) ► **29273.75**

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)
Brian Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Charles' Political Works

Mailing Address 210 2nd Ave NW #7

City Stewartville State MN Zip Code 55902

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB17.4375

Date of Disbursement

09 / 19 / 2007

Amount of Each Disbursement this Period

250.00

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

B.

Full Name (Last, First, Middle Initial)
Brian James Davis

Mailing Address 839 Amber Ridge Ln SW

City Rochester State MN Zip Code 55902

Purpose of Disbursement
In-kind - Parade Fee

Candidate Name
Brian James Davis

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: MN District: 01

Transaction ID: SB17.4403

Date of Disbursement

07 / 21 / 2007

Amount of Each Disbursement this Period

25.00

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

C.

Full Name (Last, First, Middle Initial)
Brian James Davis

Mailing Address 839 Amber Ridge Ln SW

City Rochester State MN Zip Code 55902

Purpose of Disbursement
In-kind - Fundraising Consulting

Candidate Name
Brian James Davis

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: MN District: 01

Transaction ID: SB17.4371

Date of Disbursement

08 / 16 / 2007

Amount of Each Disbursement this Period

1250.00

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

SUBTOTAL of Disbursements This Page (optional)

1525.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Brian James Davis

Transaction ID: SB17.4373
Date of Disbursement

Mailing Address 839 Amber Ridge Ln SW

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	7	7

City Rochester State MN Zip Code 55902

Amount of Each Disbursement this Period

343.25

Purpose of Disbursement
In-kind - Fundraising Consulting

--

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

Candidate Name
Brian James Davis

Category/Type

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: MN District: 01

B.

Full Name (Last, First, Middle Initial)
Brian James Davis

Transaction ID: SB17.4408
Date of Disbursement

Mailing Address 839 Amber Ridge Ln SW

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	7	7

City Rochester State MN Zip Code 55902

Amount of Each Disbursement this Period

3055.50

Purpose of Disbursement
In-kind - Mileage Expense

--

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

Candidate Name
Brian James Davis

Category/Type

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: MN District: 01

C.

Full Name (Last, First, Middle Initial)
Maelstrom Solutions Corp.

Transaction ID: SB17.4409
Date of Disbursement

Mailing Address 250 N Sunny Slope Suite 300

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	7	7

City Battlefield State WI Zip Code 53005

Amount of Each Disbursement this Period

70.50

Purpose of Disbursement
Credit Card Processing

--

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

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

3469.25

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Maelstrom Solutions Corp.

Transaction ID: SB17.4411
Date of Disbursement

Mailing Address 250 N Sunny Slope
Suite 300

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	7	

City State Zip Code
Battlefield WI 53005

Amount of Each Disbursement this Period

2060.82

Purpose of Disbursement
Credit Card Processing

--

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) ▼

State: District:

B.

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

Transaction ID: SB17.4364
Date of Disbursement

Mailing Address 5830 Heather Dr SW

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

City State Zip Code
Rochester MN 55902

Amount of Each Disbursement this Period

550.00

Purpose of Disbursement
In-kind - Air Travel

--

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

Candidate Name

--

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

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

Transaction ID: SB17.4366
Date of Disbursement

Mailing Address 5830 Heather Dr SW

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

City State Zip Code
Rochester MN 55902

Amount of Each Disbursement this Period

350.00

Purpose of Disbursement
In-kind - Air Travel

--

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

Candidate Name

--

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

2960.82

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

A.	Full Name (Last, First, Middle Initial) E. Roland	Transaction ID: SB17.4376 Date of Disbursement 07 / 27 / 2007
	Mailing Address 9001 Lakeview Rd	Amount of Each Disbursement this Period 600.00
	City Bloomington State MN Zip Code 55438	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Consulting Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) E. Roland	Transaction ID: SB17.4378 Date of Disbursement 09 / 04 / 2007
	Mailing Address 9001 Lakeview Rd	Amount of Each Disbursement this Period 1250.00
	City Bloomington State MN Zip Code 55438	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Consulting Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) E. Roland	Transaction ID: SB17.4379 Date of Disbursement 09 / 12 / 2007
	Mailing Address 9001 Lakeview Rd	Amount of Each Disbursement this Period 282.00
	City Bloomington State MN Zip Code 55438	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel Expense Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2132.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Brian Davis for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) E. Roland</p> <p>Mailing Address 9001 Lakeview Rd</p> <p>City Bloomington State MN Zip Code 55438</p> <p>Purpose of Disbursement Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5291</p> <p>Date of Disbursement 09 / 13 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) E. Roland</p> <p>Mailing Address 9001 Lakeview Rd</p> <p>City Bloomington State MN Zip Code 55438</p> <p>Purpose of Disbursement Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5292</p> <p>Date of Disbursement 09 / 14 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) E. Roland</p> <p>Mailing Address 9001 Lakeview Rd</p> <p>City Bloomington State MN Zip Code 55438</p> <p>Purpose of Disbursement Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4380</p> <p>Date of Disbursement 09 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER: (check only one)

<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)
Brian Davis for Congress

A.	Full Name (Last, First, Middle Initial) Raymond Smalley	Transaction ID: SB17.4381 Date of Disbursement 08 / 27 / 2007
	Mailing Address PO Box 22	Amount of Each Disbursement this Period 250.00
	City Sherrodsville State OH Zip Code 44675	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement IT Consulting Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Victory Enterprises	Transaction ID: SB17.4385 Date of Disbursement 07 / 03 / 2007
	Mailing Address 5200 SW 30th St, Ste 7	Amount of Each Disbursement this Period 3971.94
	City Davenport State IA Zip Code 55903	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement GOTV Consulting/Campaign Materials Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Victory Enterprises	Transaction ID: SB17.4383 Date of Disbursement 09 / 11 / 2007
	Mailing Address 5200 SW 30th St, Ste 7	Amount of Each Disbursement this Period 7630.82
	City Davenport State IA Zip Code 55903	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement GOTV Consulting/Campaign Materials Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	11852.76
TOTAL This Period (last page this line number only)	24939.83