

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
Roberts For Congress

ADDRESS (number and street) PO Box 437046
 Check if different than previously reported. (ACC)
Louisville KY 40253 7046

2. **FEC IDENTIFICATION NUMBER** C00435339
CITY **STATE** **ZIP CODE**
STATE **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
KY 03

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 10 01 2007 through 12 31 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 William Crosby

Signature of Treasurer Electronically Filed by William Crosby Date 06 16 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

Roberts For Congress

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	147355.02	258670.00
(b) Total Contribution Refunds (from Line 20(d)).....	450.00	550.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	146905.02	258120.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	115668.85	162983.66
(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)).....	115668.85	162983.66
8. Cash on Hand at Close of Reporting Period (from Line 27).....	95076.34	
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).....	87761.35	

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

Write or Type Committee Name
Roberts For Congress

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

42890.00

0.00

(ii) Unitemized.....

100965.02

0.00

(iii) TOTAL of contributions

143855.02

252718.35

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

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

3500.00

3500.00

(d) The Candidate.....

0.00

2451.65

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))

147355.02

258670.00

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)..... ▶

147355.02

258670.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	115668.85	162983.66
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.....	450.00	550.00
(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)).....	450.00	550.00
21. OTHER DISBURSEMENTS.....	60.00	60.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	116178.85	163593.66

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	63900.17
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	147355.02
25. SUBTOTAL (add Line 23 and Line 24).....	211255.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	116178.85
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	95076.34

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)
(Millionaires' Amendment)

Name of Candidate		Candidate ID Number	
Erwin Roberts		H8KY03146	
Name of Principal Campaign Committee		Committee ID Number	
Roberts For Congress		C C00435339	
Committee Address			
PO Box 437046			
City	State	ZIP	
Louisville	KY	40253-7046	
Report Covering Period (check one) <input type="checkbox"/> through June 30, or <input checked="" type="checkbox"/> through December 31 of the year preceding the year of the general election			
	Primary	General	
1. Gross receipts of authorized committees	258670.00	0.00	
2. Aggregate amount of contributions from personal funds of the candidate	2451.65	0.00	
3. Gross receipts minus the candidate's personal contributions	256218.35	0.00	

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

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

FOR LINE NUMBER: PAGE 6 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
Mr. F. G. Greenwell

Mailing Address 5517 Apache Road

City State Zip Code
Louisville KY 40207-1613

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

Name of Employer Occupation
Frost Brown & Todd Attorney

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

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

Transaction ID: A-C466

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Mr. William O. Fischer, Jr.

Mailing Address 1214 Holsworth Lane

City State Zip Code
Louisville KY 40222-6616

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

Name of Employer Occupation
Renaissance Development Real Estate Developer

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

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

Transaction ID: A-C470

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
MD Michael Bousamra, II

Mailing Address 7911 Albrecht Circle

City State Zip Code
Louisville KY 40241-5523

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

Name of Employer Occupation
UCSA Surgeon

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

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

Transaction ID: A-C484

Amount of Each Receipt this Period
250.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
Anthony Giancristofaro

Mailing Address 5 Quill Pen Way

City Warren State NJ Zip Code 07059-5517

FEC ID number of contributing federal political committee. C

Name of Employer Info. Requested by Campaign
Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

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

Transaction ID: A-C997

Amount of Each Receipt this Period 100.00

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

B. Full Name (Last, First, Middle Initial)
Jane F Hipp

Mailing Address 102 E Round Hill Road

City Greenville State SC Zip Code 29617-7032

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 ▼ 8600.00

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

Transaction ID: A-C1694

Amount of Each Receipt this Period 2300.00

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

C. Full Name (Last, First, Middle Initial)
Edwin L Jones, Jr.

Mailing Address 7035 Marching Duck Drive
Apt. E406

City Charlotte State NC Zip Code 28210-2239

FEC ID number of contributing federal political committee. C

Name of Employer Campaign will request
Occupation Campaign will request

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

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

Transaction ID: A-C1638

Amount of Each Receipt this Period 100.00

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

SUBTOTAL of Receipts This Page (optional) 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 8 / 77
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial) Edwin L Jones, Jr.		Date of Receipt MM / DD / YYYY 10 / 12 / 2007
Mailing Address 7035 Marching Duck Drive Apt. E406		Transaction ID: A-C1640
City Charlotte	State NC	Zip Code 28210-2239
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Campaign will request	Occupation Campaign will request	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

B.

Full Name (Last, First, Middle Initial) Josephine E Wood		Date of Receipt MM / DD / YYYY 10 / 12 / 2007
Mailing Address 1400 Enterprise Drive		Transaction ID: A-C1575
City Lynchburg	State VA	Zip Code 24502-5768
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Michael L Keiser		Date of Receipt MM / DD / YYYY 10 / 15 / 2007
Mailing Address 2450 N Lakeview Avenue		Transaction ID: A-C2491
City Chicago	State IL	Zip Code 60614-2878
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer R P G, Inc.	Occupation Business	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	700.00
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 9 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial)
Rhoda W Cobb

Mailing Address 7 Stuyvesant Road

City Asheville State NC Zip Code 28803-3022

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

Name of Employer Info. Requested by Campaign
Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 7

Transaction ID: A-C1666

Amount of Each Receipt this Period
500.00

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

B.

Full Name (Last, First, Middle Initial)
Nicholas Peay, Jr.

Mailing Address 2965 Fairmount Boulevard

City Cleveland Heights State OH Zip Code 44118-4060

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 ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 7

Transaction ID: A-C2083

Amount of Each Receipt this Period
250.00

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

C.

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

Mailing Address 684 Ridge Road

City Spring City State PA Zip Code 19475-3223

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
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 7

Transaction ID: A-C1407

Amount of Each Receipt this Period
300.00

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

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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

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

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

FOR LINE NUMBER: PAGE 10 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
Beverly V Smith
Mailing Address 337 Marcy Street
City State Zip Code
West Babylon NY 11704-3004
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Va H Northport Ny Retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 240.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 7
Transaction ID: A-C1178
Amount of Each Receipt this Period
20.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. D. K. Holloway
Mailing Address 1114 Glenlake Way
City State Zip Code
Louisville KY 40245-5222
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Quality Stone & Ready Mix VP
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 7
Transaction ID: A-C505
Amount of Each Receipt this Period
500.00
Individual Contribution
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mrs. Ruth M. Holloway
Mailing Address PO Box 43051
City State Zip Code
Middletown KY 40253-0051
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Retired Retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 7
Transaction ID: A-C508
Amount of Each Receipt this Period
500.00
Individual Contribution
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1020.00
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 / 77

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Nicholas J. McGrath

Mailing Address 1003 Old Harrods Creek Road

City State Zip Code
Louisville KY 40223-2542

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

Name of Employer Occupation
UPS Pilot

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: A-C503

Amount of Each Receipt this Period

250.00

Individual Contribution

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

B.

Full Name (Last, First, Middle Initial)
William R Engel

Mailing Address 7059 Coburn Lane

City State Zip Code
Johnston IA 50131-1253

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

Name of Employer Info. Requested by Campaign Occupation Info. Requested by Campaign

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: A-C2287

Amount of Each Receipt this Period

150.00

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

C.

Full Name (Last, First, Middle Initial)
D Patricia Jennett

Mailing Address 416 Deepwood Court

City State Zip Code
Naperville IL 60540-8140

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

Name of Employer Occupation
Self Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: A-C2485

Amount of Each Receipt this Period

100.00

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

SUBTOTAL of Receipts This Page (optional) ▶

500.00

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 12 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Roberts For Congress

A.	Full Name (Last, First, Middle Initial) Craig L Best		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
	Mailing Address 88 Rockport Road		Transaction ID: A-C914
	City Weston	State MA	Zip Code 02493-1450
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Info. Requested by Campaign Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Info. Requested by Campaign Election Cycle-to-Date ▼ 350.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Paul Mcgoldrick		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
	Mailing Address 106 Main Street		Transaction ID: A-C3545
	City Littleton	State NH	Zip Code 03561-4052
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Campaign will request Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Campaign will request Election Cycle-to-Date ▼ 300.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Herbert Siegel		Date of Receipt MM / DD / YYYY 10 / 19 / 2007
	Mailing Address 190 E 72nd Street		Transaction ID: A-C1079
	City New York	State NY	Zip Code 10021-4370
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Info. Requested by Campaign Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Info. Requested by Campaign Election Cycle-to-Date ▼ 1000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	1350.00
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 13 / 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Roberts For Congress

A.	Full Name (Last, First, Middle Initial) Richard A Bernstein	Date of Receipt MM / DD / YYYY 10 / 22 / 2007
	Mailing Address 18 Rockledge Road	Transaction ID: A-C3776
	City Rye State NY Zip Code 10580-1933	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer P&E Properties, Inc. Occupation Executive Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Stanford Z Rothschild	Date of Receipt MM / DD / YYYY 10 / 22 / 2007
	Mailing Address 1122 Kenilworth Drive	Transaction ID: A-C1493
	City Towson State MD Zip Code 21204-2139	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Info. Requested by Campaign Occupation Info. Requested by Campaign Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Virginia B Hallam	Date of Receipt MM / DD / YYYY 10 / 24 / 2007
	Mailing Address 11204 Old Club Road	Transaction ID: A-C1463
	City Rockville State MD Zip Code 20852-4535	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Info. Requested by Campaign Occupation Info. Requested by Campaign Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	1350.00
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 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
T F N Fanning

Mailing Address PO Box 607

City State Zip Code
Unionville PA 19375-0607

FEC ID number of contributing federal political committee. C

Name of Employer Info. Requested by Campaign
Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 7

Transaction ID: A-C1402

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Edwin L Jones, Jr.

Mailing Address 7035 Marching Duck Drive
Apt. E406

City State Zip Code
Charlotte NC 28210-2239

FEC ID number of contributing federal political committee. C

Name of Employer Campaign will request
Occupation Campaign will request

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 7

Transaction ID: A-C1639

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
John T Stirrup

Mailing Address 7914 Monterey Bay Drive

City State Zip Code
Jacksonville FL 32256-2934

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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 7

Transaction ID: A-C1785

Amount of Each Receipt this Period
200.00

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 15 / 77
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial)
Bruner H Strawbridge

Mailing Address 8116 Goshen Road

City Malvern State PA Zip Code 19355-3332

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

Name of Employer Info. Requested by Campaign
Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 10 / 25 / 2007
Transaction ID: A-C1395
Amount of Each Receipt this Period: 500.00

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

B.

Full Name (Last, First, Middle Initial)
Linda G Kendall

Mailing Address 2151 Laguna Street

City San Francisco State CA Zip Code 94115-2332

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

Name of Employer Info. Requested by Campaign
Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 10 / 30 / 2007
Transaction ID: A-C3274
Amount of Each Receipt this Period: 250.00

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

C.

Full Name (Last, First, Middle Initial)
Edwin A Seipp, Jr.

Mailing Address 49 Tuscaloosa Avenue

City Atherton State CA Zip Code 94027-4014

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: 10 / 30 / 2007
Transaction ID: A-C3261
Amount of Each Receipt this Period: 250.00

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

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

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

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

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

FOR LINE NUMBER: PAGE 16 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
Beverly V Smith
Mailing Address 337 Marcy Street
City State Zip Code
West Babylon NY 11704-3004
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Va H Northport Ny Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 7
Transaction ID: A-C1181
Amount of Each Receipt this Period
100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
George H Conrades
Mailing Address 344 Beacon Street
City State Zip Code
Boston MA 02116-1002
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Info. Requested by Campaign Info. Requested by Campaign
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7
Transaction ID: A-C3832
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
J Robert Dailey
Mailing Address 13 Stone Hill Drive N
City State Zip Code
Manhasset NY 11030-4439
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Retired Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7
Transaction ID: A-C1132
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1100.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 17 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
Jean B Masters

Mailing Address 1150 Oak Knoll Drive

City State Zip Code
Lake Forest IL 60045-3648

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

Name of Employer Campaign will request Occupation Campaign will request

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

Amount of Each Receipt this Period: 100.00

Transaction ID: A-C2446

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

B. Full Name (Last, First, Middle Initial)
Dorothy Boreman

Mailing Address 27825 Detroit Road Apt. 603

City State Zip Code
Westlake OH 44145-2191

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) ▼

Amount of Each Receipt this Period: 1000.00

Transaction ID: A-C2090

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

C. Full Name (Last, First, Middle Initial)
Jane F Hipp

Mailing Address 102 E Round Hill Road

City State Zip Code
Greenville SC 29617-7032

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) ▼

Amount of Each Receipt this Period: 2300.00

Transaction ID: A-C1693

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

SUBTOTAL of Receipts This Page (optional) ► **3400.00**

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 / 77

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial)
Edwin L Jones, Jr.

Mailing Address 7035 Marching Duck Drive
Apt. E406

City State Zip Code
Charlotte NC 28210-2239

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Campaign will request Campaign will request

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 01 / 2007

Transaction ID: A-C1641

Amount of Each Receipt this Period
100.00

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

B.

Full Name (Last, First, Middle Initial)
Viola M Panman

Mailing Address 1152 Calle Maria

City State Zip Code
San Marcos CA 92069-2103

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
None Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 01 / 2007

Transaction ID: A-C3159

Amount of Each Receipt this Period
100.00

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

C.

Full Name (Last, First, Middle Initial)
C Stedman Garber, Jr.

Mailing Address 823 Coachway

City State Zip Code
Annapolis MD 21401-6416

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Info. Requested by Campaign Info. Requested by Campaign

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 02 / 2007

Transaction ID: A-C3644

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) 450.00

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 / 77

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial)
Anthony Giancristofaro

Mailing Address 5 Quill Pen Way

City Warren State NJ Zip Code 07059-5517

FEC ID number of contributing federal political committee. C

Name of Employer Info. Requested by Campaign
Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
11 / 02 / 2007

Transaction ID: A-C998

Amount of Each Receipt this Period 200.00

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

B.

Full Name (Last, First, Middle Initial)
Robert Hromadnik

Mailing Address PO Box 562

City Osawatomie State KS Zip Code 66064-0562

FEC ID number of contributing federal political committee. C

Name of Employer Info. Requested by Campaign
Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt MM / DD / YYYY
11 / 05 / 2007

Transaction ID: A-C2584

Amount of Each Receipt this Period 250.00

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

C.

Full Name (Last, First, Middle Initial)
Irving Rose

Mailing Address 23515 Woodlyne Drive

City Bingham Farms State MI Zip Code 48025-3458

FEC ID number of contributing federal political committee. C

Name of Employer Info. Requested by Campaign
Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
11 / 06 / 2007

Transaction ID: A-C2208

Amount of Each Receipt this Period 250.00

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

SUBTOTAL of Receipts This Page (optional) 700.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 20 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
C K Landry

Mailing Address 250 Boylston Street
Unit 6

City Boston State MA Zip Code 02116-3943

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

Name of Employer TA Associates, Inc. Occupation Investment manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 11 / 07 / 2007
Transaction ID: A-C896
 Amount of Each Receipt this Period 2300.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Philip M. Mueller

Mailing Address 11826 Elmscourt

City San Antonio State TX Zip Code 78230-2767

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 ▼ 250.00

Date of Receipt 11 / 07 / 2007
Transaction ID: A-C542
 Amount of Each Receipt this Period 250.00

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

C. Full Name (Last, First, Middle Initial)
Ray P Oden, Jr.

Mailing Address 702 Thora Boulevard

City Shreveport State LA Zip Code 71106-1824

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 ▼ 250.00

Date of Receipt 11 / 07 / 2007
Transaction ID: A-C2654
 Amount of Each Receipt this Period 250.00

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

SUBTOTAL of Receipts This Page (optional) ► 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 21 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
James W Galle

Mailing Address 7933 Chadwick Street

City State Zip Code
Prairie Village KS 66208-4055

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

Name of Employer Info. Requested by Campaign
Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt

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

Transaction ID: A-C2590

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
Ronald Carmicle

Mailing Address 7112 Gerber Avenue

City State Zip Code
Louisville KY 40214

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

Name of Employer Info. Requested by Campaign
Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: A-C544

Amount of Each Receipt this Period
1000.00

Individual Contribution

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

C. Full Name (Last, First, Middle Initial)
Francis P Murphy

Mailing Address 126 Manzanita Way

City State Zip Code
Salinas CA 93908-8740

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

Name of Employer Info. Requested by Campaign
Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt

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

Transaction ID: A-C3246

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

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 / 77

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial)
E Sanchez

Mailing Address 523 W Highland Boulevard

City State Zip Code
San Antonio TX 78210-3813

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

Name of Employer Occupation
Info. Requested by Campaign Info. Requested by Campaign

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: A-C2854

Amount of Each Receipt this Period

250.00

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

B.

Full Name (Last, First, Middle Initial)
Mr. Will W. Ward

Mailing Address 5801 Orion Road

City State Zip Code
Louisville KY 40222-5936

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

Name of Employer Occupation
Community Medical Associates Physician

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: A-C545

Amount of Each Receipt this Period

500.00

Individual Contribution

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

C.

Full Name (Last, First, Middle Initial)
Mr. Kenneth J. Allen

Mailing Address 320 Park Avenue

City State Zip Code
Carrollton KY 41008-8304

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

Name of Employer Occupation
Peabody Energy VP

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: A-C550

Amount of Each Receipt this Period

500.00

Individual 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 23 / 77

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial)
James W Galle

Mailing Address 7933 Chadwick Street

City State Zip Code
Prairie Village KS 66208-4055

FEC ID number of contributing federal political committee. C

Name of Employer Info. Requested by Campaign
Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt MM / DD / YYYY
11 / 19 / 2007

Transaction ID: A-C2591

Amount of Each Receipt this Period 250.00

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

B.

Full Name (Last, First, Middle Initial)
Jane F Hipp

Mailing Address 102 E Round Hill Road

City State Zip Code
Greenville SC 29617-7032

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 ▼ 8600.00

Date of Receipt MM / DD / YYYY
11 / 19 / 2007

Transaction ID: A-C1692

Amount of Each Receipt this Period 4000.00

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

C.

Full Name (Last, First, Middle Initial)
Leo W Seal, Jr.

Mailing Address PO Box 4019

City State Zip Code
Gulfport MS 39502-4019

FEC ID number of contributing federal political committee. C

Name of Employer Info. Requested by Campaign
Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
11 / 19 / 2007

Transaction ID: A-C2043

Amount of Each Receipt this Period 250.00

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

SUBTOTAL of Receipts This Page (optional) 4500.00

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 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
Beverly V Smith
Mailing Address 337 Marcy Street
City State Zip Code
West Babylon NY 11704-3004
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Va H Northport Ny Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00
Date of Receipt: 11 / 19 / 2007
Transaction ID: A-C1179
Amount of Each Receipt this Period: 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Paul Mcgoldrick
Mailing Address 106 Main Street
City State Zip Code
Littleton NH 03561-4052
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Campaign will request Campaign will request
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt: 11 / 20 / 2007
Transaction ID: A-C3546
Amount of Each Receipt this Period: 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Jean B Masters
Mailing Address 1150 Oak Knoll Drive
City State Zip Code
Lake Forest IL 60045-3648
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Campaign will request Campaign will request
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt: 11 / 26 / 2007
Transaction ID: A-C2445
Amount of Each Receipt this Period: 50.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 250.00
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 / 77
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial) J Douglas Robinson		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>1</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	6	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	2	6	/	2	0	0	7													
Mailing Address 4 Christopher Circle		Transaction ID: A-C1227																				
City New Hartford	State NY	Zip Code 13413-3002																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>250.00</td></tr> </table>	250.00																			
250.00																						
Name of Employer Info. Requested by Campaign Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Info. Requested by Campaign Election Cycle-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>250.00</td></tr> </table>	250.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																			
250.00																						

B.

Full Name (Last, First, Middle Initial) Elizabeth J Schafer		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>1</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	6	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	2	6	/	2	0	0	7													
Mailing Address 610 1st Street		Transaction ID: A-C3175																				
City Coronado	State CA	Zip Code 92118-1202																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>500.00</td></tr> </table>	500.00																			
500.00																						
Name of Employer Self Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Election Cycle-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>500.00</td></tr> </table>	500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																			
500.00																						

C.

Full Name (Last, First, Middle Initial) D Patricia Jennett		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>1</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	7	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	2	7	/	2	0	0	7													
Mailing Address 416 Deepwood Court		Transaction ID: A-C2484																				
City Naperville	State IL	Zip Code 60540-8140																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>150.00</td></tr> </table>	150.00																			
150.00																						
Name of Employer Self Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Election Cycle-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>250.00</td></tr> </table>	250.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																			
250.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"> <tr><td style="text-align: right;">900.00</td></tr> </table>	900.00
900.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td></tr> </table>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
Viola M Panman
Mailing Address 1152 Calle Maria
City San Marcos State CA Zip Code 92069-2103
FEC ID number of contributing federal political committee. C
Name of Employer None Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
300.00

Date of Receipt MM / DD / YYYY
11 / 27 / 2007
Transaction ID: A-C3160
Amount of Each Receipt this Period
100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Roy J Starrak
Mailing Address 7133 Us Highway 84
City Coleman State TX Zip Code 76834-8327
FEC ID number of contributing federal political committee. C
Name of Employer Info. Requested by Campaign Occupation Info. Requested by Campaign
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
300.00

Date of Receipt MM / DD / YYYY
11 / 27 / 2007
Transaction ID: A-C2788
Amount of Each Receipt this Period
300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John T Stirrup
Mailing Address 7914 Monterey Bay Drive
City Jacksonville State FL Zip Code 32256-2934
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) ▼
300.00

Date of Receipt MM / DD / YYYY
11 / 27 / 2007
Transaction ID: A-C1786
Amount of Each Receipt this Period
100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 500.00

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 / 77

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey B. Compton

Mailing Address 13427 Shady Creek Circle

City State Zip Code
Louisville KY 40299-4579

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

Name of Employer Occupation
Boneal, Inc. Business Development

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: A-C563

Amount of Each Receipt this Period

250.00

Individual Contribution

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

B.

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

Mailing Address 87 Tanglewylde Avenue

City State Zip Code
Bronxville NY 10708-3220

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

Name of Employer Occupation
Info. Requested by Campaign Info. Requested by Campaign

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: A-C4003

Amount of Each Receipt this Period

250.00

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

C.

Full Name (Last, First, Middle Initial)
Jean B Masters

Mailing Address 1150 Oak Knoll Drive

City State Zip Code
Lake Forest IL 60045-3648

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

Name of Employer Occupation
Campaign will request Campaign will request

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: A-C2447

Amount of Each Receipt this Period

100.00

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

SUBTOTAL of Receipts This Page (optional) ▶

600.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
Francis P Murphy

Mailing Address 126 Manzanita Way

City Salinas State CA Zip Code 93908-8740

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

Name of Employer Info. Requested by Campaign
Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

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

Transaction ID: A-C3245

Amount of Each Receipt this Period
200.00

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

B. Full Name (Last, First, Middle Initial)
Albert N Walcutt

Mailing Address 1859 E 63rd Street

City Cleveland State OH Zip Code 44103-3832

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

Name of Employer Info. Requested by Campaign
Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: A-C4042

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Josephine E Wood

Mailing Address 1400 Enterprise Drive

City Lynchburg State VA Zip Code 24502-5768

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

Name of Employer Retired
Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: A-C1576

Amount of Each Receipt this Period
200.00

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

SUBTOTAL of Receipts This Page (optional) ► **650.00**

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 / 77
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Mark Schroeder

Mailing Address 10 Augustus Lane

City State Zip Code
Greenwich CT 06830-7040

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

Name of Employer Deloitte Occupation CPA

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 7

Transaction ID: A-C591

Amount of Each Receipt this Period
500.00

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

B.

Full Name (Last, First, Middle Initial)
Marjorie Davis

Mailing Address 6 Huckleberry Lane

City State Zip Code
Augusta ME 04330-6022

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

Name of Employer Self Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: A-C953

Amount of Each Receipt this Period
1000.00

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

C.

Full Name (Last, First, Middle Initial)
Robert J Dole

Mailing Address 700 New Hampshire Avenue NW

City State Zip Code
Washington DC 20037-2407

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

Name of Employer Alston & Bird Occupation Special Counsel

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: A-C1432

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 77
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Fred G. Karem

Mailing Address 490 Woodlake Way

City Lexington State KY Zip Code 40502-2570

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) ▼

500.00

Date of Receipt 12 / 07 / 2007

Transaction ID: A-C587

Amount of Each Receipt this Period 500.00

Individual Contribution

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

B.

Full Name (Last, First, Middle Initial)
Mr. William E. Lawrence

Mailing Address 13511 Terrace Creek Drive Apt. 101

City Louisville State KY Zip Code 40245-5812

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) ▼

250.00

Date of Receipt 12 / 07 / 2007

Transaction ID: A-C581

Amount of Each Receipt this Period 250.00

Individual Contribution

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

C.

Full Name (Last, First, Middle Initial)
Paul Mcgoldrick

Mailing Address 106 Main Street

City Littleton State NH Zip Code 03561-4052

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

Name of Employer Campaign will request Occupation Campaign will request

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

300.00

Date of Receipt 12 / 07 / 2007

Transaction ID: A-C3544

Amount of Each Receipt this Period 100.00

Individual Contribution

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
Neal Cooley

Mailing Address PO Box 54

City State Zip Code
Alberville AL 35950-0001

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) ▼ 250.00

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

Transaction ID: A-C3687

Amount of Each Receipt this Period 250.00

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

B. Full Name (Last, First, Middle Initial)
Edwin A Seipp, Jr.

Mailing Address 49 Tuscaloosa Avenue

City State Zip Code
Atherton CA 94027-4014

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) ▼ 500.00

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

Transaction ID: A-C3260

Amount of Each Receipt this Period 250.00

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

C. Full Name (Last, First, Middle Initial)
John Slanga

Mailing Address 684 Ridge Road

City State Zip Code
Spring City PA 19475-3223

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) ▼ 400.00

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

Transaction ID: A-C1408

Amount of Each Receipt this Period 100.00

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

SUBTOTAL of Receipts This Page (optional) 600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 32 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
Warren B Williamson

Mailing Address 350 W Colorado Boulevard
Suite 230

City Pasadena State CA Zip Code 91105-1855

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 12 / 12 / 2007
Transaction ID: A-C3095
 Amount of Each Receipt this Period 500.00

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

B. Full Name (Last, First, Middle Initial)
Beverly V Smith

Mailing Address 337 Marcy Street

City West Babylon State NY Zip Code 11704-3004

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

Name of Employer Va H Northport Ny Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 240.00

Date of Receipt 12 / 14 / 2007
Transaction ID: A-C1180
 Amount of Each Receipt this Period 20.00

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

C. Full Name (Last, First, Middle Initial)
Campbell Steward

Mailing Address 65 Asbury Street

City Topsfield State MA Zip Code 01983-1501

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

Name of Employer Info. Requested by Campaign Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 12 / 14 / 2007
Transaction ID: A-C889
 Amount of Each Receipt this Period 250.00

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

SUBTOTAL of Receipts This Page (optional) ► **770.00**

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 / 77
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Roberts For Congress

<p>A. Full Name (Last, First, Middle Initial) Elizabeth Glasgow</p> <p>Mailing Address 2620 S Yorktown Avenue</p> <p>City State Zip Code Tulsa OK 74114-4228</p> <p>FEC ID number of contributing federal political committee. C</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;"> Name of Employer Info. Requested by Campaign Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> <td style="width: 70%;"> Occupation Info. Requested by Campaign Election Cycle-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">2300.00</div> </td> </tr> </table>	Name of Employer Info. Requested by Campaign Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Info. Requested by Campaign Election Cycle-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">2300.00</div>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 2 / 1 7 / 2 0 0 7</td> </tr> </table> </p> <p>Transaction ID: A-C2699</p> <p>Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">2300.00</div> </p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M M / D D / Y Y Y Y	1 2 / 1 7 / 2 0 0 7
Name of Employer Info. Requested by Campaign Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Info. Requested by Campaign Election Cycle-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">2300.00</div>				
M M / D D / Y Y Y Y					
1 2 / 1 7 / 2 0 0 7					

<p>B. Full Name (Last, First, Middle Initial) Stuart B Scudder</p> <p>Mailing Address 1916 259th Place</p> <p>City State Zip Code Lomita CA 90717-3213</p> <p>FEC ID number of contributing federal political committee. C</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;"> Name of Employer Info. Requested by Campaign Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> <td style="width: 70%;"> Occupation Info. Requested by Campaign Election Cycle-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div> </td> </tr> </table>	Name of Employer Info. Requested by Campaign Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Info. Requested by Campaign Election Cycle-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 2 / 1 7 / 2 0 0 7</td> </tr> </table> </p> <p>Transaction ID: A-C3082</p> <p>Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div> </p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M M / D D / Y Y Y Y	1 2 / 1 7 / 2 0 0 7
Name of Employer Info. Requested by Campaign Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Info. Requested by Campaign Election Cycle-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div>				
M M / D D / Y Y Y Y					
1 2 / 1 7 / 2 0 0 7					

<p>C. Full Name (Last, First, Middle Initial) Josephine E Wood</p> <p>Mailing Address 1400 Enterprise Drive</p> <p>City State Zip Code Lynchburg VA 24502-5768</p> <p>FEC ID number of contributing federal political committee. C</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;"> Name of Employer Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> <td style="width: 70%;"> Occupation Retired Election Cycle-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div> </td> </tr> </table>	Name of Employer Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Election Cycle-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 2 / 1 7 / 2 0 0 7</td> </tr> </table> </p> <p>Transaction ID: A-C1577</p> <p>Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">200.00</div> </p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M M / D D / Y Y Y Y	1 2 / 1 7 / 2 0 0 7
Name of Employer Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Election Cycle-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div>				
M M / D D / Y Y Y Y					
1 2 / 1 7 / 2 0 0 7					

SUBTOTAL of Receipts This Page (optional)	<div style="border: 1px solid black; padding: 2px;">3000.00</div>
TOTAL This Period (last page this line number only)	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Melanie L. Emery

Mailing Address 609 Brown Street

City State Zip Code
Vine Grove KY 40175-1122

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
One Source Lighting Office Manager

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

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

Transaction ID: A-C604

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Ronald R Mostero

Mailing Address 505 Chiswick Road

City State Zip Code
Palos Verdes Estat CA 90274-1826

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

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

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

Transaction ID: A-C3066

Amount of Each Receipt this Period
400.00

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

C. Full Name (Last, First, Middle Initial)
Leslie Rose

Mailing Address 330 S Ocean Boulevard
Apt. 3B

City State Zip Code
Palm Beach FL 33480-4263

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Info. Requested by Campaign Info. Requested by Campaign

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

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

Transaction ID: A-C1876

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) 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 35 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
Kingdon Gould, Jr.
Mailing Address 1725 Desales Street NW

City Washington State DC Zip Code 20036-4406

FEC ID number of contributing federal political committee. C

Name of Employer PMI Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
12 / 20 / 2007
Transaction ID: A-C1430
 Amount of Each Receipt this Period 1000.00

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

B. Full Name (Last, First, Middle Initial)
Viola M Panman
Mailing Address 1152 Calle Maria

City San Marcos State CA Zip Code 92069-2103

FEC ID number of contributing federal political committee. C

Name of Employer None Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
12 / 20 / 2007
Transaction ID: A-C3161
 Amount of Each Receipt this Period 100.00

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

C. Full Name (Last, First, Middle Initial)
Craig L Best
Mailing Address 88 Rockport Road

City Weston State MA Zip Code 02493-1450

FEC ID number of contributing federal political committee. C

Name of Employer Info. Requested by Campaign Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt MM / DD / YYYY
12 / 26 / 2007
Transaction ID: A-C913
 Amount of Each Receipt this Period 100.00

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

SUBTOTAL of Receipts This Page (optional) 1200.00

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 36 / 77
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial) William R Engel		Date of Receipt MM / DD / YYYY 12 / 26 / 2007
Mailing Address 7059 Coburn Lane		Transaction ID: A-C2286
City Johnston	State IA	Zip Code 50131-1253
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Info. Requested by Campaign Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Info. Requested by Campaign Election Cycle-to-Date ▼ 250.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial) Virginia B Hallam		Date of Receipt MM / DD / YYYY 12 / 26 / 2007
Mailing Address 11204 Old Club Road		Transaction ID: A-C1462
City Rockville	State MD	Zip Code 20852-4535
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Info. Requested by Campaign Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Info. Requested by Campaign Election Cycle-to-Date ▼ 300.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial) Margaret Buisson		Date of Receipt MM / DD / YYYY 12 / 27 / 2007
Mailing Address PO Box 197029		Transaction ID: A-C605
City Louisville	State KY	Zip Code 40259-7029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Buisson Investment Corp	Occupation CEO	Individual Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

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: PAGE 37 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Wayne Knewasser

Mailing Address 12506 Valley Pine Drive

City State Zip Code
Louisville KY 40299-4138

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

Name of Employer Occupation
Premier Home Care Inc. VP Public Relations/Gov't Affairs

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

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

Transaction ID: A-C608

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
Ms. Michele Weaver

Mailing Address 9105 Loch Lea Lane

City State Zip Code
Louisville KY 40291-1446

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

Name of Employer Occupation
University of Louisville Program Assistant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: A-C606

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address PO Box 562

City State Zip Code
Osawatomie KS 66064-0562

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

Name of Employer Occupation
Info. Requested by Campaign Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

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

Transaction ID: A-C2583

Amount of Each Receipt this Period
200.00

Individual Contribution
 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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 77
(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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial)
Kathryn Johnston

Mailing Address 139 Horton

City State Zip Code
Kyle TX 78640-4304

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

Name of Employer Info. Requested by Campaign
Occupation Info. Requested by Campaign

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: A-C4185

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Jahleel Woodbridge

Mailing Address 13120 Lavon Court

City State Zip Code
Hot Springs SD 57747-7120

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

Name of Employer Self
Occupation Semi-retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: A-C2417

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Mr. Barry Oxley

Mailing Address 6305 Rockingham Court

City State Zip Code
Prospect KY 40059-9341

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

Name of Employer Lincoln Heritage Council
Occupation CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: A-C623

Amount of Each Receipt this Period
500.00

Individual 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) ► **42890.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 / 77
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial) Freedom's Defense Fund		Date of Receipt MM / DD / YYYY 11 / 08 / 2007
Mailing Address 115 15th Street NW Suite 410		Transaction ID: A-C541
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00401786		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	PAC Contribution
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial) Black Republican PAC		Date of Receipt MM / DD / YYYY 12 / 06 / 2007
Mailing Address 4128 Pepsi Place		Transaction ID: A-C580
City Chantilly	State VA	Zip Code 20151-1501
FEC ID number of contributing federal political committee. C C00437053		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	PAC Contribution
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

FOR LINE NUMBER: (check only one)

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

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)
Roberts For Congress

<p>A. Full Name (Last, First, Middle Initial) Cingular Wireless</p> <p>Mailing Address PO Box 538641</p> <p>City Atlanta State GA Zip Code 30353-8641</p> <p>Purpose of Disbursement Cell Phone Bill</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-460 Date of Disbursement 10 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 126.72</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Reliable Rentals</p> <p>Mailing Address 7331 New Lagrange Road</p> <p>City Louisville State KY Zip Code 40222-4811</p> <p>Purpose of Disbursement Fundraising: Catering Rentals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-459 Date of Disbursement 10 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 300.76</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) The Silver Spoon</p> <p>Mailing Address 604 S 3rd Street Suite 300</p> <p>City Louisville State KY Zip Code 40202-2402</p> <p>Purpose of Disbursement Fundraising: Catering & Valet Parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-461 Date of Disbursement 10 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 1800.20</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) ▶

2227.68

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

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)
Roberts For Congress

A.	Full Name (Last, First, Middle Initial) Pay Pal Mailing Address 2211 N 1st Street City San Jose State CA Zip Code 95131-2021 Purpose of Disbursement Monthly Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-513 Date of Disbursement 10 / 03 / 2007 Amount of Each Disbursement this Period 30.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Sampan Mailing Address 202 Ash Street City Utica State IN Zip Code 47130-9408 Purpose of Disbursement Paraphernalia: 100 tshirts Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-474 Date of Disbursement 10 / 04 / 2007 Amount of Each Disbursement this Period 606.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Complete Campaigns Mailing Address 610 Gateway Center Way Suite K City San Diego State CA Zip Code 92102-4548 Purpose of Disbursement Monthly Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-485 Date of Disbursement 10 / 09 / 2007 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1136.85

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

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)
Roberts For Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) United Alliance</p> <p>Mailing Address 1800 W. Muhammad Ali Blve. Suite 2B</p> <p>City Louisville State KY Zip Code 40203</p> <p>Purpose of Disbursement Other: Sponsor for 2nd Annual Kentuck</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-487</p> <p>Date of Disbursement 10 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</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) Pay Pal</p> <p>Mailing Address 2211 N 1st Street</p> <p>City San Jose State CA Zip Code 95131-2021</p> <p>Purpose of Disbursement Monthly Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-514</p> <p>Date of Disbursement 10 / 10 / 2007</p> <p>Amount of Each Disbursement this Period 30.00</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) ADP Employer Services</p> <p>Mailing Address 500 W 7th Street</p> <p>City Cincinnati State OH Zip Code 45203-1543</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 State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-488</p> <p>Date of Disbursement 10 / 12 / 2007</p> <p>Amount of Each Disbursement this Period 391.23</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)	921.23
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

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)
Roberts For Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) ADP Employer Services</p> <p>Mailing Address 500 W 7th Street</p> <p>City Cincinnati State OH Zip Code 45203-1543</p> <p>Purpose of Disbursement Workers Comp</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-489</p> <p>Date of Disbursement 10 / 12 / 2007</p> <p>Amount of Each Disbursement this Period 18.85</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) ADP Employer Services</p> <p>Mailing Address 500 W 7th Street</p> <p>City Cincinnati State OH Zip Code 45203-1543</p> <p>Purpose of Disbursement 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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-490</p> <p>Date of Disbursement 10 / 12 / 2007</p> <p>Amount of Each Disbursement this Period 60.00</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) Miss Stephanie T. Boswell</p> <p>Mailing Address 10046 Willow Brook Circle</p> <p>City Louisville State KY Zip Code 40223-5390</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-491</p> <p>Date of Disbursement 10 / 12 / 2007</p> <p>Amount of Each Disbursement this Period 887.27</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) ▶

966.12

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

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)
Roberts For Congress

A.	Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell Mailing Address 10046 Willow Brook Circle City Louisville State KY Zip Code 40223-5390 Purpose of Disbursement Reimbursement for overhead Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-492 Date of Disbursement 10 / 12 / 2007 Amount of Each Disbursement this Period 30.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell Mailing Address 10046 Willow Brook Circle City Louisville State KY Zip Code 40223-5390 Purpose of Disbursement Reimbursement for Parking Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-493 Date of Disbursement 10 / 12 / 2007 Amount of Each Disbursement this Period 46.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell Mailing Address 10046 Willow Brook Circle City Louisville State KY Zip Code 40223-5390 Purpose of Disbursement Reimbursement for fundraising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-494 Date of Disbursement 10 / 12 / 2007 Amount of Each Disbursement this Period 38.39 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	114.39
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial)
Miss Stephanie T. Boswell

Mailing Address 10046 Willow Brook Circle

City Louisville State KY Zip Code 40223-5390

Purpose of Disbursement
Reimbursement for office suppl
Candidate Name

001
Category/
Type

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

Transaction ID: B-E-495
Date of Disbursement

10 / 12 / 2007

Amount of Each Disbursement this Period

68.88

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

B.

Full Name (Last, First, Middle Initial)
Miss Stephanie T. Boswell

Mailing Address 10046 Willow Brook Circle

City Louisville State KY Zip Code 40223-5390

Purpose of Disbursement
Reimbursement for postage
Candidate Name

001
Category/
Type

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

Transaction ID: B-E-496
Date of Disbursement

10 / 12 / 2007

Amount of Each Disbursement this Period

82.00

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

C.

Full Name (Last, First, Middle Initial)
Pay Pal

Mailing Address 2211 N 1st Street

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement
Online Processing Fees
Candidate Name

001
Category/
Type

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

Transaction ID: B-E-512
Date of Disbursement

10 / 18 / 2007

Amount of Each Disbursement this Period

2.06

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

SUBTOTAL of Disbursements This Page (optional) ▶

152.94

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

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)
Roberts For Congress

<p>A. Full Name (Last, First, Middle Initial) Forms Management Inc.</p> <p>Mailing Address 5805 Flagstone Court</p> <p>City Louisville State KY Zip Code 40219-2401</p> <p>Purpose of Disbursement Lapel Labels</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-518 Date of Disbursement 10 / 22 / 2007</p> <p>Amount of Each Disbursement this Period 225.72</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Sir Speedy Printing</p> <p>Mailing Address 832 S 6th Street</p> <p>City Louisville State KY Zip Code 40203-2124</p> <p>Purpose of Disbursement thank you notes & envelopes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-519 Date of Disbursement 10 / 22 / 2007</p> <p>Amount of Each Disbursement this Period 267.12</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Pay Pal</p> <p>Mailing Address 2211 N 1st Street</p> <p>City San Jose State CA Zip Code 95131-2021</p> <p>Purpose of Disbursement Online Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-548 Date of Disbursement 10 / 24 / 2007</p> <p>Amount of Each Disbursement this Period 1.62</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)	494.46
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

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)
Roberts For Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) ADP Employer Services</p> <p>Mailing Address 500 W 7th Street</p> <p>City Cincinnati State OH Zip Code 45203-1543</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-526</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="368.35"/></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) ADP Employer Services</p> <p>Mailing Address 500 W 7th Street</p> <p>City Cincinnati State OH Zip Code 45203-1543</p> <p>Purpose of Disbursement Workers Comp</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-527</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="18.85"/></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) ADP Employer Services</p> <p>Mailing Address 500 W 7th Street</p> <p>City Cincinnati State OH Zip Code 45203-1543</p> <p>Purpose of Disbursement 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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-528</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="51.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="438.20"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></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

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)
Roberts For Congress

A.	Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell <hr/> Mailing Address 10046 Willow Brook Circle <hr/> City Louisville State KY Zip Code 40223-5390 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-520 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">887.27</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	6		2	0	7		887.27
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	6		2	0	7															
887.27																							
B.	Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell <hr/> Mailing Address 10046 Willow Brook Circle <hr/> City Louisville State KY Zip Code 40223-5390 <hr/> Purpose of Disbursement Reimbursement for Overhead Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-521 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">32.54</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	6		2	0	7		32.54
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	6		2	0	7															
32.54																							
C.	Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell <hr/> Mailing Address 10046 Willow Brook Circle <hr/> City Louisville State KY Zip Code 40223-5390 <hr/> Purpose of Disbursement Reimbursement for Parking Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-522 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">3.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	6		2	0	7		3.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	6		2	0	7															
3.00																							

SUBTOTAL of Disbursements This Page (optional) ▶	<table border="1"> <tr> <td style="text-align: right;">922.81</td> </tr> </table>	922.81
922.81		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td style="text-align: right;"> </td> </tr> </table>	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial)
Miss Stephanie T. Boswell

Mailing Address 10046 Willow Brook Circle

City State Zip Code
Louisville KY 40223-5390

Purpose of Disbursement
Reimbursement for Mileage

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-523
Date of Disbursement

10 / 26 / 2007

Amount of Each Disbursement this Period

33.13

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

B.

Full Name (Last, First, Middle Initial)
Miss Stephanie T. Boswell

Mailing Address 10046 Willow Brook Circle

City State Zip Code
Louisville KY 40223-5390

Purpose of Disbursement
Reimbursement for Office Suppl

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-524
Date of Disbursement

10 / 26 / 2007

Amount of Each Disbursement this Period

65.12

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

C.

Full Name (Last, First, Middle Initial)
Miss Stephanie T. Boswell

Mailing Address 10046 Willow Brook Circle

City State Zip Code
Louisville KY 40223-5390

Purpose of Disbursement
Reimbursement for 2 tickets to

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-525
Date of Disbursement

10 / 26 / 2007

Amount of Each Disbursement this Period

100.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

198.25

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

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)
Roberts For Congress

A.	Full Name (Last, First, Middle Initial) United States Postal Service <hr/> Mailing Address 119 N Evergreen Road <hr/> City Louisville State KY Zip Code 40243-1439 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-530 Date of Disbursement 10 / 29 / 2007 <hr/> Amount of Each Disbursement this Period 369.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Access National Bank <hr/> Mailing Address 4221 Walney Road <hr/> City Chantilly State VA Zip Code 20151-2987 <hr/> Purpose of Disbursement Service Charge for Direct Mail Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-4222 Date of Disbursement 10 / 31 / 2007 <hr/> Amount of Each Disbursement this Period 100.47 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) BMW Direct Inc. <hr/> Mailing Address 1155 15th Street NW Suite 410 <hr/> City Washington State DC Zip Code 20005-2748 <hr/> Purpose of Disbursement Overhead for Fundraising Mail Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-4203 Date of Disbursement 10 / 31 / 2007 <hr/> Amount of Each Disbursement this Period 4940.55 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

5410.02

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

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)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial)
Colortree

Mailing Address 2519 Brittons Hill Road

City Richmond State VA Zip Code 23230-2503

Purpose of Disbursement
Fundraising: BMW Direct Mail

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-476

Date of Disbursement

10 / 31 / 2007

Amount of Each Disbursement this Period

1193.81

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

B.

Full Name (Last, First, Middle Initial)
Colortree

Mailing Address 2519 Brittons Hill Road

City Richmond State VA Zip Code 23230-2503

Purpose of Disbursement
Fundraising: BMW Direct Mail

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-477

Date of Disbursement

10 / 31 / 2007

Amount of Each Disbursement this Period

1433.21

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

C.

Full Name (Last, First, Middle Initial)
Consolidated Mailing Services

Mailing Address 504 Shaw Road

City Sterling State VA Zip Code 20166-9436

Purpose of Disbursement
Fundraising: BMW Direct Mail

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-478

Date of Disbursement

10 / 31 / 2007

Amount of Each Disbursement this Period

6543.02

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

SUBTOTAL of Disbursements This Page (optional) ▶

9170.04

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
Roberts For Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Patriot Partners, Inc.</p> <p>Mailing Address 1155 15th Street NW</p> <p>City Washington State DC Zip Code 20005-2706</p> <p>Purpose of Disbursement Fundraising: BMW Direct Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-479</p> <p>Date of Disbursement 10 / 31 / 2007</p> <p>Amount of Each Disbursement this Period 492.39</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) Patriot Partners, Inc.</p> <p>Mailing Address 1155 15th Street NW</p> <p>City Washington State DC Zip Code 20005-2706</p> <p>Purpose of Disbursement Fundraising: BMW Direct Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-480</p> <p>Date of Disbursement 10 / 31 / 2007</p> <p>Amount of Each Disbursement this Period 13436.95</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) Patriot Partners, Inc.</p> <p>Mailing Address 1155 15th Street NW</p> <p>City Washington State DC Zip Code 20005-2706</p> <p>Purpose of Disbursement Fundraising: BMW Direct Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-481</p> <p>Date of Disbursement 10 / 31 / 2007</p> <p>Amount of Each Disbursement this Period 2077.20</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) ▶

16006.54

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

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)
Roberts For Congress

<p>A. Full Name (Last, First, Middle Initial) Pay Pal</p> <p>Mailing Address 2211 N 1st Street</p> <p>City San Jose State CA Zip Code 95131-2021</p> <p>Purpose of Disbursement Monthly 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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-549</p> <p>Date of Disbursement 11 / 03 / 2007</p> <p>Amount of Each Disbursement this Period 30.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) BMW Direct Inc.</p> <p>Mailing Address 1155 15th Street NW Suite 410</p> <p>City Washington State DC Zip Code 20005-2748</p> <p>Purpose of Disbursement Overhead for Fundraising Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-4204</p> <p>Date of Disbursement 11 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 726.26</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Century Data Systems Corp</p> <p>Mailing Address 1155 15th Street NW Suite 410</p> <p>City Washington State DC Zip Code 20005-2748</p> <p>Purpose of Disbursement Fundraising: BMW Direct Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-475</p> <p>Date of Disbursement 11 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 1459.29</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) ▶

2215.55

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Roberts For Congress

A.	Full Name (Last, First, Middle Initial) Legacy Lists, Inc. - Brokerage	Transaction ID: B-E-4205 Date of Disbursement
	Mailing Address 1155 15th Street NW Suite 410	<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City Washington State DC Zip Code 20005-2748	Amount of Each Disbursement this Period
	Purpose of Disbursement Overhead for Direct Mail Fundr Candidate Name	<input type="text" value="5323.69"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type: <input type="text" value="001"/>

B.	Full Name (Last, First, Middle Initial) Legacy Lists, Inc. - Management	Transaction ID: B-E-4206 Date of Disbursement
	Mailing Address 1155 15th Street NW Suite 410	<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City Washington State DC Zip Code 20005-2748	Amount of Each Disbursement this Period
	Purpose of Disbursement Overhead for Direct Mail Fundr Candidate Name	<input type="text" value="1090.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type: <input type="text" value="001"/>

C.	Full Name (Last, First, Middle Initial) Patriot Partners, Inc.	Transaction ID: B-E-4207 Date of Disbursement
	Mailing Address 1155 15th Street NW	<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City Washington State DC Zip Code 20005-2706	Amount of Each Disbursement this Period
	Purpose of Disbursement Overhead for Direct Mail Fundr Candidate Name	<input type="text" value="3034.25"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type: <input type="text" value="001"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9447.94"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)
Roberts For Congress

A.	Full Name (Last, First, Middle Initial) Cingular Wireless	Transaction ID: B-E-532 Date of Disbursement 11 / 08 / 2007
	Mailing Address PO Box 538641	Amount of Each Disbursement this Period 126.64
	City Atlanta State GA Zip Code 30353-8641	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Cell Phone Bill Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) Complete Campaigns	Transaction ID: B-E-535 Date of Disbursement 11 / 08 / 2007
	Mailing Address 610 Gateway Center Way Suite K	Amount of Each Disbursement this Period 500.00
	City San Diego State CA Zip Code 92102-4548	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Monthly fee Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) Red Tree Design	Transaction ID: B-E-533 Date of Disbursement 11 / 08 / 2007
	Mailing Address 4156 Westport Road	Amount of Each Disbursement this Period 93.75
	City Louisville State KY Zip Code 40207-2705	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Update web with radio interview Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

SUBTOTAL of Disbursements This Page (optional)	720.39
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

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)
Roberts For Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Sir Speedy Printing</p> <p>Mailing Address 832 S 6th Street</p> <p>City Louisville State KY Zip Code 40203-2124</p> <p>Purpose of Disbursement Fundraising: 4000 BREs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-534</p> <p>Date of Disbursement 11 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 756.10</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) ADP Employer Services</p> <p>Mailing Address 500 W 7th Street</p> <p>City Cincinnati State OH Zip Code 45203-1543</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 State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-537</p> <p>Date of Disbursement 11 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 354.85</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) ADP Employer Services</p> <p>Mailing Address 500 W 7th Street</p> <p>City Cincinnati State OH Zip Code 45203-1543</p> <p>Purpose of Disbursement Workers Comp</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-538</p> <p>Date of Disbursement 11 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 18.85</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) ▶

1129.80

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

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)
Roberts For Congress

A.	Full Name (Last, First, Middle Initial) ADP Employer Services	Transaction ID: B-E-539 Date of Disbursement
	Mailing Address 500 W 7th Street	<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2007"/>
	City Cincinnati State OH Zip Code 45203-1543	Amount of Each Disbursement this Period
	Purpose of Disbursement Processing Fee	<input type="text" value="51.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell	Transaction ID: B-E-536 Date of Disbursement
	Mailing Address 10046 Willow Brook Circle	<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2007"/>
	City Louisville State KY Zip Code 40223-5390	Amount of Each Disbursement this Period
	Purpose of Disbursement Administrative/Salary/Overhead: Salary	<input type="text" value="887.27"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) United States Postal Service	Transaction ID: B-E-543 Date of Disbursement
	Mailing Address 119 N Evergreen Road	<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>
	City Louisville State KY Zip Code 40243-1439	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage for Transy, UK & Churc	<input type="text" value="369.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1307.27"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)
Roberts For Congress

<p>A. Full Name (Last, First, Middle Initial) BMW Direct Inc.</p> <p>Mailing Address 1155 15th Street NW Suite 410</p> <p>City Washington State DC Zip Code 20005-2748</p> <p>Purpose of Disbursement Overhead for Direct Mail Fundr Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-4208 Date of Disbursement 11 / 14 / 2007</p> <p>Amount of Each Disbursement this Period 5746.13</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Patriot Partners, Inc.</p> <p>Mailing Address 1155 15th Street NW</p> <p>City Washington State DC Zip Code 20005-2706</p> <p>Purpose of Disbursement Overhead for Direct Mail Fundr Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-4209 Date of Disbursement 11 / 14 / 2007</p> <p>Amount of Each Disbursement this Period 12976.93</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Catterton Printing</p> <p>Mailing Address 100 Post Office Road</p> <p>City Waldorf State MD Zip Code 20602-2767</p> <p>Purpose of Disbursement Overhead for Direct Mail Fundr Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-4210 Date of Disbursement 11 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 5718.36</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) ▶

24441.42

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

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

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

FOR LINE NUMBER: (check only one)

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

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)
Roberts For Congress

A.	Full Name (Last, First, Middle Initial) Consolidated Mailing Services	Transaction ID: B-E-4211 Date of Disbursement
	Mailing Address 504 Shaw Road	<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
	City Sterling State VA Zip Code 20166-9436	Amount of Each Disbursement this Period
	Purpose of Disbursement Overhead for Direct Mail Fundr Candidate Name	<input type="text" value="1337.89"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type: <input type="text" value="001"/>

B.	Full Name (Last, First, Middle Initial) Patriot Partners, Inc.	Transaction ID: B-E-4212 Date of Disbursement
	Mailing Address 1155 15th Street NW	<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
	City Washington State DC Zip Code 20005-2706	Amount of Each Disbursement this Period
	Purpose of Disbursement Overhead for Direct Mail Fundr Candidate Name	<input type="text" value="4897.75"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type: <input type="text" value="001"/>

C.	Full Name (Last, First, Middle Initial) ADP Employer Services	Transaction ID: B-E-558 Date of Disbursement
	Mailing Address 500 W 7th Street	<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
	City Cincinnati State OH Zip Code 45203-1543	Amount of Each Disbursement this Period
	Purpose of Disbursement Workers Comp Candidate Name	<input type="text" value="5.54"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type: <input type="text" value="001"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6241.18"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)
Roberts For Congress

<p>A. Full Name (Last, First, Middle Initial) ADP Employer Services</p> <p>Mailing Address 500 W 7th Street</p> <p>City Cincinnati State OH Zip Code 45203-1543</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 State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-559</p> <p>Date of Disbursement 11 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 354.85</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) ADP Employer Services</p> <p>Mailing Address 500 W 7th Street</p> <p>City Cincinnati State OH Zip Code 45203-1543</p> <p>Purpose of Disbursement Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-560</p> <p>Date of Disbursement 11 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 51.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell</p> <p>Mailing Address 10046 Willow Brook Circle</p> <p>City Louisville State KY Zip Code 40223-5390</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-557</p> <p>Date of Disbursement 11 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 887.27</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) ▶

1293.12

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

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)
Roberts For Congress

<p>A. Full Name (Last, First, Middle Initial) BMW Direct Inc.</p> <p>Mailing Address 1155 15th Street NW Suite 410</p> <p>City Washington State DC Zip Code 20005-2748</p> <p>Purpose of Disbursement Overhead for Direct Mail Fundr</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-4214</p> <p>Date of Disbursement 11 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 1717.23</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Catterton Printing</p> <p>Mailing Address 100 Post Office Road</p> <p>City Waldorf State MD Zip Code 20602-2767</p> <p>Purpose of Disbursement Overhead for Direct Mail Fundr</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-4215</p> <p>Date of Disbursement 11 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 975.39</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Patriot Partners, Inc.</p> <p>Mailing Address 1155 15th Street NW</p> <p>City Washington State DC Zip Code 20005-2706</p> <p>Purpose of Disbursement Overhead for Direct Mail Fundr</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-4216</p> <p>Date of Disbursement 11 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 713.67</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) ▶

3406.29

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

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)
Roberts For Congress

A.	Full Name (Last, First, Middle Initial) Access National Bank	Transaction ID: B-E-4223 Date of Disbursement
	Mailing Address 4221 Walney Road	<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
	City Chantilly State VA Zip Code 20151-2987	Amount of Each Disbursement this Period
	Purpose of Disbursement Service Charge for Direct Mail	<input type="text" value="186.99"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type <input type="text" value="001"/>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) BMW Direct Inc.	Transaction ID: B-E-4217 Date of Disbursement
	Mailing Address 1155 15th Street NW Suite 410	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
	City Washington State DC Zip Code 20005-2748	Amount of Each Disbursement this Period
	Purpose of Disbursement Overhead for Direct Mail Fundr	<input type="text" value="4425.96"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type <input type="text" value="001"/>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Pay Pal	Transaction ID: B-E-596 Date of Disbursement
	Mailing Address 2211 N 1st Street	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
	City San Jose State CA Zip Code 95131-2021	Amount of Each Disbursement this Period
	Purpose of Disbursement Monthly Fee	<input type="text" value="30.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type <input type="text" value="001"/>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4642.95"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial)
Colortree

Mailing Address 2519 Brittons Hill Road

City Richmond State VA Zip Code 23230-2503

Purpose of Disbursement
Overhead for Direct Mail Fundr

Candidate Name

001
Category/
Type

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

State: District:

Transaction ID: B-E-4218
Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

1807.31

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

B.

Full Name (Last, First, Middle Initial)
Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151-1501

Purpose of Disbursement
Overhead for Direct Mail Fundr

Candidate Name

001
Category/
Type

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

State: District:

Transaction ID: B-E-4219
Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

1057.00

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

C.

Full Name (Last, First, Middle Initial)
ADP Employer Services

Mailing Address 500 W 7th Street

City Cincinnati State OH Zip Code 45203-1543

Purpose of Disbursement
Payroll Taxes

Candidate Name

001
Category/
Type

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

State: District:

Transaction ID: B-E-575
Date of Disbursement

12 / 07 / 2007

Amount of Each Disbursement this Period

354.85

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

SUBTOTAL of Disbursements This Page (optional) ▶

3219.16

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

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)
Roberts For Congress

<p>A. Full Name (Last, First, Middle Initial) ADP Employer Services</p> <p>Mailing Address 500 W 7th Street</p> <p>City Cincinnati State OH Zip Code 45203-1543</p> <p>Purpose of Disbursement Workers Comp. Category/Type <input type="text" value="001"/></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B-E-576</p> <p>Date of Disbursement <input type="text" value="12"/> <input type="text" value="07"/> <input type="text" value="2007"/></p> <p>Amount of Each Disbursement this Period <input type="text" value="5.54"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) ADP Employer Services</p> <p>Mailing Address 500 W 7th Street</p> <p>City Cincinnati State OH Zip Code 45203-1543</p> <p>Purpose of Disbursement Processing Fee Category/Type <input type="text" value="001"/></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B-E-577</p> <p>Date of Disbursement <input type="text" value="12"/> <input type="text" value="07"/> <input type="text" value="2007"/></p> <p>Amount of Each Disbursement this Period <input type="text" value="51.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Cingular Wireless</p> <p>Mailing Address PO Box 538641</p> <p>City Atlanta State GA Zip Code 30353-8641</p> <p>Purpose of Disbursement Cell Phone Bill Category/Type <input type="text" value="001"/></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B-E-568</p> <p>Date of Disbursement <input type="text" value="12"/> <input type="text" value="07"/> <input type="text" value="2007"/></p> <p>Amount of Each Disbursement this Period <input type="text" value="126.64"/></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) ▶

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

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)
Roberts For Congress

<p>A. Complete Campaigns</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement Monthly Fee Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-567 Date of Disbursement 12 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Patriot Partners, Inc.</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 1155 15th Street NW</p> <p>City Washington State DC Zip Code 20005-2706</p> <p>Purpose of Disbursement Overhead for Direct Mail Fundr Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-4220 Date of Disbursement 12 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 9300.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Miss Stephanie T. Boswell</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 10046 Willow Brook Circle</p> <p>City Louisville State KY Zip Code 40223-5390</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-569 Date of Disbursement 12 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 887.27</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) ▶

10687.27

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

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

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

FOR LINE NUMBER: (check only one)

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

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)
Roberts For Congress

A.	Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell <hr/> Mailing Address 10046 Willow Brook Circle <hr/> City Louisville State KY Zip Code 40223-5390 <hr/> Purpose of Disbursement Reimbursement for Parking Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-570 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">22.50</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	7		2	0	0	7	22.50
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		0	7		2	0	0	7														
22.50																							
B.	Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell <hr/> Mailing Address 10046 Willow Brook Circle <hr/> City Louisville State KY Zip Code 40223-5390 <hr/> Purpose of Disbursement Reimbursement for Office Suppl Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-571 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">147.25</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	7		2	0	0	7	147.25
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		0	7		2	0	0	7														
147.25																							
C.	Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell <hr/> Mailing Address 10046 Willow Brook Circle <hr/> City Louisville State KY Zip Code 40223-5390 <hr/> Purpose of Disbursement Reimbursement for Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-572 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">3.37</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	7		2	0	0	7	3.37
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		0	7		2	0	0	7														
3.37																							

SUBTOTAL of Disbursements This Page (optional) ▶	<table border="1"> <tr> <td style="text-align: right;">173.12</td> </tr> </table>	173.12
173.12		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td style="text-align: right;"> </td> </tr> </table>	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
Roberts For Congress

A.	Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell Mailing Address 10046 Willow Brook Circle City Louisville State KY Zip Code 40223-5390 Purpose of Disbursement Reimbursement for Copy Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-573 Date of Disbursement 12 / 07 / 2007 Amount of Each Disbursement this Period 277.27 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell Mailing Address 10046 Willow Brook Circle City Louisville State KY Zip Code 40223-5390 Purpose of Disbursement Reimbursement for Misc. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-574 Date of Disbursement 12 / 07 / 2007 Amount of Each Disbursement this Period 115.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Pay Pal Mailing Address 2211 N 1st Street City San Jose State CA Zip Code 95131-2021 Purpose of Disbursement Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-597 Date of Disbursement 12 / 10 / 2007 Amount of Each Disbursement this Period 19.64 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

412.89

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

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)
Roberts For Congress

A.	Full Name (Last, First, Middle Initial) Patriot Partners, Inc.	Transaction ID: B-E-4221 Date of Disbursement 12 / 12 / 2007
	Mailing Address 1155 15th Street NW	Amount of Each Disbursement this Period 5900.00
	City Washington State DC Zip Code 20005-2706	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Overhead for Direct Mail Fundr Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) ADP Employer Services	Transaction ID: B-E-613 Date of Disbursement 12 / 21 / 2007
	Mailing Address 500 W 7th Street	Amount of Each Disbursement this Period 354.85
	City Cincinnati State OH Zip Code 45203-1543	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Taxes Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) ADP Employer Services	Transaction ID: B-E-614 Date of Disbursement 12 / 21 / 2007
	Mailing Address 500 W 7th Street	Amount of Each Disbursement this Period 5.54
	City Cincinnati State OH Zip Code 45203-1543	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Workers Comp Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

SUBTOTAL of Disbursements This Page (optional)	▶	6260.39
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

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)
Roberts For Congress

A.	Full Name (Last, First, Middle Initial) ADP Employer Services	Transaction ID: B-E-615 Date of Disbursement
	Mailing Address 500 W 7th Street	<input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
	City Cincinnati State OH Zip Code 45203-1543	Amount of Each Disbursement this Period
	Purpose of Disbursement Processing Fee	<input type="text" value="51.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell	Transaction ID: B-E-609 Date of Disbursement
	Mailing Address 10046 Willow Brook Circle	<input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
	City Louisville State KY Zip Code 40223-5390	Amount of Each Disbursement this Period
	Purpose of Disbursement Administrative/Salary/Overhead: Salary	<input type="text" value="887.27"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell	Transaction ID: B-E-610 Date of Disbursement
	Mailing Address 10046 Willow Brook Circle	<input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
	City Louisville State KY Zip Code 40223-5390	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimbursement for Constant Con	<input type="text" value="60.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="998.27"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)
Roberts For Congress

A.	Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell Mailing Address 10046 Willow Brook Circle City Louisville State KY Zip Code 40223-5390 Purpose of Disbursement Reimbursement for Parking Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-611 Date of Disbursement 12 / 21 / 2007 Amount of Each Disbursement this Period 2.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Miss Stephanie T. Boswell Mailing Address 10046 Willow Brook Circle City Louisville State KY Zip Code 40223-5390 Purpose of Disbursement Reimbursement for Open House f Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-612 Date of Disbursement 12 / 21 / 2007 Amount of Each Disbursement this Period 271.59 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Access National Bank Mailing Address 4221 Walney Road City Chantilly State VA Zip Code 20151-2987 Purpose of Disbursement Service Charge Direct Mail Fun Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-4224 Date of Disbursement 12 / 31 / 2007 Amount of Each Disbursement this Period 207.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

480.72

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

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)
Roberts For Congress

A. Full Name (Last, First, Middle Initial) Pay Pal Mailing Address 2211 N 1st Street City San Jose State CA Zip Code 95131-2021 Purpose of Disbursement Processing Fee for Online Cont Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-622 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 7
	Amount of Each Disbursement this Period 14.86 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B. Full Name (Last, First, Middle Initial) Pay Pal Mailing Address 2211 N 1st Street City San Jose State CA Zip Code 95131-2021 Purpose of Disbursement Online Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-624 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 7
	Amount of Each Disbursement this Period 14.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ►

29.66

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

115450.10

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

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)
Roberts For Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Wayne Knewasser

Mailing Address 12506 Valley Pine Drive

City State Zip Code
Louisville KY 40299-4138

Purpose of Disbursement
Online Processing Error

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-458

Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

200.00

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

B.

Full Name (Last, First, Middle Initial)
Mr. Tom Rooney

Mailing Address 18211 SE Island Drive

City State Zip Code
Tequesta FL 33469-8127

Purpose of Disbursement
Online Donation Error

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-457

Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

250.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

450.00

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

450.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Roberts For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Century Data Systems Corp			Nature of Debt (Purpose): Overhead for Direct Mail Fundr
Mailing Address 1155 15th Street NW Suite 410			
City Washington	State DC	ZIP Code 20005-2748	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10-DEBT6564	
Amount Incurred This Period <input type="text" value="4800.10"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4800.10"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Colortree			Nature of Debt (Purpose): Overhead for Direct Mail Fundr
Mailing Address 2519 Brittons Hill Road			
City Richmond	State VA	ZIP Code 23230-2503	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10-DEBT6573	
Amount Incurred This Period <input type="text" value="7041.54"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7041.54"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Consolidated Mailing Services			Nature of Debt (Purpose): Overhead for Direct Mail Fundr
Mailing Address 504 Shaw Road			
City Sterling	State VA	ZIP Code 20166-9436	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10-DEBT6582	
Amount Incurred This Period <input type="text" value="15266.47"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="15266.47"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="27108.11"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Roberts For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Patriot Partners, Inc.			Nature of Debt (Purpose): Overhead for Direct Mail Fundr
Mailing Address 1155 15th Street NW			
City Washington	State DC	ZIP Code 20005-2706	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10-DEBT6574	
Amount Incurred This Period <input type="text" value="23029.53"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="23029.53"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Catterton Printing			Nature of Debt (Purpose): Overhead for Direct Mail Fundr
Mailing Address 100 Post Office Road			
City Waldorf	State MD	ZIP Code 20602-2767	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10-DEBT4226	
Amount Incurred This Period <input type="text" value="88.10"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="88.10"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Washington Intelligence Bureau			Nature of Debt (Purpose): Overhead for Direct Mail Fundr
Mailing Address 4128 Pepsi Place			
City Chantilly	State VA	ZIP Code 20151-1501	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10-DEBT6576	
Amount Incurred This Period <input type="text" value="1311.42"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1311.42"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="24429.05"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Roberts For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West End Printing Co			Nature of Debt (Purpose): Overhead for Direct Mail Fundr
Mailing Address 1609 Sherwood Avenue			
City Richmond	State VA	ZIP Code 23220-1008	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10-DEBT4234	
Amount Incurred This Period <input type="text" value="4666.99"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4666.99"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Century Data Systems Corp			Nature of Debt (Purpose): Fundraising: BMW Direct Mail
Mailing Address 1155 15th Street NW Suite 410			
City Washington	State DC	ZIP Code 20005-2748	

Outstanding Balance Beginning This Period <input type="text" value="1459.29"/>		Transaction ID: SD10-DEBT475	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1459.29"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Colortree			Nature of Debt (Purpose): Fundraising: BMW Direct Mail
Mailing Address 2519 Brittons Hill Road			
City Richmond	State VA	ZIP Code 23230-2503	

Outstanding Balance Beginning This Period <input type="text" value="2627.02"/>		Transaction ID: SD10-DEBT477	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2627.02"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="4666.99"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Roberts For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Consolidated Mailing Services			Nature of Debt (Purpose): Fundraising: BMW Direct Mail
Mailing Address 504 Shaw Road			
City Sterling	State VA	ZIP Code 20166-9436	

Outstanding Balance Beginning This Period <input type="text" value="6543.02"/>		Transaction ID: SD10-DEBT478	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="6543.02"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Patriot Partners, Inc.			Nature of Debt (Purpose): Fundraising: BMW Direct Mail
Mailing Address 1155 15th Street NW			
City Washington	State DC	ZIP Code 20005-2706	

Outstanding Balance Beginning This Period <input type="text" value="16006.54"/>		Transaction ID: SD10-DEBT481	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="16006.54"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor BMW Direct Inc.			Nature of Debt (Purpose): Overhead for Direct Mail Fundr
Mailing Address 1155 15th Street NW Suite 410			
City Washington	State DC	ZIP Code 20005-2748	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10-DEBT6621	
Amount Incurred This Period <input type="text" value="9559.54"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="9559.54"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="9559.54"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Roberts For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Legacy Lists, Inc. - Brokerage	Nature of Debt (Purpose): Overhead for Direct Mail Fundr
Mailing Address 1155 15th Street NW Suite 410	
City State ZIP Code Washington DC 20005-2748	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10-DEBT6618	
Amount Incurred This Period 17047.76	Payment This Period 0.00	Outstanding Balance at Close of This Period 17047.76

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Legacy Lists, Inc. - Management	Nature of Debt (Purpose): Overhead for Direct Mail Fundr
Mailing Address 1155 15th Street NW Suite 410	
City State ZIP Code Washington DC 20005-2748	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10-DEBT4231	
Amount Incurred This Period 4949.90	Payment This Period 0.00	Outstanding Balance at Close of This Period 4949.90

1) SUBTOTALS This Period This Page (optional).....	21997.66
2) TOTALS This Period (last page this line number only).....	87761.35
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	87761.35