

# 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  
Kay Granger Campaign Fund

ADDRESS (number and street) 715 Jones Street, Suite 101  
 Check if different than previously reported. (ACC)  
Fort Worth TX 76102

2. **FEC IDENTIFICATION NUMBER** C00310532  
**CITY** **STATE** **ZIP CODE**  
STATE DISTRICT TX 12  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [ ] [ ] [ ] in the State of [ ]  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period 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 Rice M. Tilley, Jr.

Signature of Treasurer Electronically Filed by Rice M. Tilley, Jr. Date 04 19 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

Kay Granger Campaign Fund

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)).....	123786.00	699449.34
(b) Total Contribution Refunds (from Line 20(d)).....	50.00	1232.11
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	123736.00	698217.23
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	102353.99	607904.48
(b) Total Offsets to Operating Expenditures (from Line 14).....	57.33	3347.86
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	102296.66	604556.62
8. Cash on Hand at Close of Reporting Period (from Line 27).....	183481.19	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	19784.52	

**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  
Kay Granger Campaign Fund

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).....

58425.00

399465.34

(ii) Unitemized.....

5061.00

37459.00

(iii) TOTAL of contributions

63486.00

436924.34

from individuals..... ▶

0.00

250.00

(b) Political Party Committees.....

60300.00

262275.00

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS (other than loans)

123786.00

699449.34

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

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

0.00

0.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

57.33

3347.86

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

69.29

1260.45

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

123912.62

704057.65

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	102353.99	607904.48
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.....	50.00	1232.11
(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)).....	50.00	1232.11
21. OTHER DISBURSEMENTS.....	39285.00	280389.64
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	141688.99	889526.23

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	201257.56
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	123912.62
25. SUBTOTAL (add Line 23 and Line 24).....	325170.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	141688.99
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	183481.19

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

<b>Name of Candidate</b> Kay Granger		<b>Candidate ID Number</b> H6TX12060
<b>Name of Principal Campaign Committee</b> Kay Granger Campaign Fund		<b>Committee ID Number</b> C C00310532
<b>Committee Address</b> 715 Jones Street, Suite 101		
<b>City</b> Fort Worth	<b>State</b> TX	<b>ZIP</b> 76102-
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		
	<b>Primary</b>	<b>General</b>
1. Gross receipts of authorized committees .....	655604.95	47418.23
2. Aggregate amount of contributions from personal funds of the candidate .....	0.00	0.00
3. Gross receipts minus the candidate's personal contributions .....	655604.95	47418.23

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

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

FOR LINE NUMBER: PAGE 6 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
Air Line Pilots Association PAC  
Mailing Address 1625 Massachusetts Ave NW  
City Washington State DC Zip Code 20036  
FEC ID number of contributing federal political committee. **C** C00035451  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00  
Date of Receipt 11 / 07 / 2007  
Transaction ID: 71120.C19276  
Amount of Each Receipt this Period 2500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Aircraft Owners & Pilots Assn PAC  
Mailing Address 421 Avation Way  
City Frederick State MD Zip Code 21701  
FEC ID number of contributing federal political committee. **C** C00131185  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00  
Date of Receipt 11 / 19 / 2007  
Transaction ID: 71120.C19294  
Amount of Each Receipt this Period 1500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
American Electric Power Co. PAC  
Mailing Address Doreen W. Hohl, Treas  
1 Riverside Plaza, 26th Floor  
City Columbus State OH Zip Code 43215-2373  
FEC ID number of contributing federal political committee. **C** C00096842  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 10 / 16 / 2007  
Transaction ID: 71120.C19217  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5000.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 103  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
Arcadis US Inc. PAC

Mailing Address 630 Plaza Dr. Ste 200

City State Zip Code  
Highlands Ranch CO 80129

FEC ID number of contributing federal political committee. **C** C00388983

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 7

**Transaction ID:** 71120.C19296

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
AT&T Inc. Federal PAC

Mailing Address J.B. Hutchison  
175 E. Houston Room 7-A-50

City State Zip Code  
San Antonio TX 78205

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 7

**Transaction ID:** 71120.C19293

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Boeing Company PAC

Mailing Address Karry La Violette  
1200 Wilson Blvd.

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

**Transaction ID:** 71005.C19164

Amount of Each Receipt this Period  
1000.00

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

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

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

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

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

FOR LINE NUMBER: PAGE 8 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
Boeing Company PAC

Mailing Address Karry La Violette  
1200 Wilson Blvd.

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

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

**Transaction ID:** 71207.C19326

Amount of Each Receipt this Period  
1500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Brownstein Hyatt Farber Schreck PAC

Mailing Address 410 17th Street, 22nd Floor

City Denver State CO Zip Code 80202

FEC ID number of contributing federal political committee. **C** C00390583

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** 71120.C19213

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Dallas Entrepreneur PAC

Mailing Address Sandra Thomas, Treasurer  
1701 N. Hampton

City De Soto State TX Zip Code 75115

FEC ID number of contributing federal political committee. **C** C00283523

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

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

**Transaction ID:** 80107.C19351

Amount of Each Receipt this Period  
5000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7500.00**

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



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

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

FOR LINE NUMBER: PAGE 9 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
Dean Foods Company PAC

Mailing Address Michelle Goolsby, Treasurer  
2515 McKinney Avenue, Suite 1200

City Dallas State TX Zip Code 75201

FEC ID number of contributing federal political committee. **C** C00340083

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 10 / 18 / 2007  
**Transaction ID:** 71120.C19243  
 Amount of Each Receipt this Period 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Deloitte & Touche Federal PAC

Mailing Address Cindy Stevens  
P.O. Box 365

City Washington State DC Zip Code 20044-0365

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 11 / 20 / 2007  
**Transaction ID:** 71207.C19311  
 Amount of Each Receipt this Period 2000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Electrical Construction PAC

Mailing Address Robert L. White, Director  
3 Bethesda Metro Center

City Bethesda State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C** C00113811

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 10 / 29 / 2007  
**Transaction ID:** 71120.C19264  
 Amount of Each Receipt this Period 2000.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 103  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
Ernst & Young PAC

Mailing Address K.C. Tominovich  
1225 Connecticut Avenue, NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 11 / 06 / 2007  
**Transaction ID:** 71120.C19272  
Amount of Each Receipt this Period 2000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Exxon Mobil Corporation PAC

Mailing Address Larry Swales  
5959 Las Colinas Blvd.

City Irving State TX Zip Code 75039-2298

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 11 / 07 / 2007  
**Transaction ID:** 71120.C19275  
Amount of Each Receipt this Period 1500.00

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

**C.** Full Name (Last, First, Middle Initial)  
FAA Managers Association, Inc. PAC

Mailing Address 888 16th Street, NW, Suite 530

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00366070

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 16 / 2007  
**Transaction ID:** 71120.C19214  
Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 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 11 / 103  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
General Electric Company PAC

Mailing Address 1299 Pennsylvania Ave, NW, Ste 900

City Washington State DC Zip Code 20004-2407

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 11 / 19 / 2007  
**Transaction ID:** 71120.C19295

Amount of Each Receipt this Period 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
General Motors Corp PAC

Mailing Address 25 Massachusetts Ave, NW, Ste 400

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00076810

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 12 / 26 / 2007  
**Transaction ID:** 80107.C19377

Amount of Each Receipt this Period 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Growth & Prosperity PAC

Mailing Address 2610 Ridge Road Drive

City Alexandria State VA Zip Code 22302

FEC ID number of contributing federal political committee. **C** C00388793

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 11 / 02 / 2007  
**Transaction ID:** 71120.C19269

Amount of Each Receipt this Period 5000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7000.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
Honeywell International PAC (HIPAC)

Mailing Address Timothy Keating  
101 Constitution Ave, NW, Ste 500W

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 10 / 29 / 2007  
**Transaction ID:** 71120.C19263  
 Amount of Each Receipt this Period 1500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Independent Insurance Agents of America

Mailing Address Political Action Cmte (INSURPAC)  
412 First Street SE, Suite 300

City Washington State DC Zip Code 20003-1804

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 11 / 30 / 2007  
**Transaction ID:** 71207.C19334  
 Amount of Each Receipt this Period 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Kraft Foods Inc. PAC

Mailing Address 975 F Street, NW, Suite 1000

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00077701

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 16 / 2007  
**Transaction ID:** 71120.C19212  
 Amount of Each Receipt this Period 1000.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
L-3 Communications Corporation PAC

Mailing Address Greg Burnett  
600 Third Avenue

City State Zip Code  
New York NY 10016

FEC ID number of contributing federal political committee. **C** C00338087

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: 80107.C19378

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.**

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

Mailing Address Stephen E. Chaudet, Treasurer  
1550 Crystal Drive, Suite 300

City State Zip Code  
Arlington VA 22202

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

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt

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

Transaction ID: 71120.C19255

Amount of Each Receipt this Period

1000.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)  
Medco Health PAC

Mailing Address Jason Kaune, Treasurer  
591 Redwood Hwy Bldg 4000

City State Zip Code  
Mill Valley CA 94941

FEC ID number of contributing federal political committee. **C** C00384362

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: 71207.C19318

Amount of Each Receipt this Period

1000.00

Receipt

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

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

3000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 103  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
Medtronic Medical Technology Fund

Mailing Address 1420 New York Ave., NW, Ste 600

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00311878

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY  
12 / 26 / 2007

**Transaction ID:** 80107.C19379

Amount of Each Receipt this Period 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
National Association of Broadcasters PAC

Mailing Address David K. Rehr, Treasurer  
1771 N St NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** 71120.C19299

Amount of Each Receipt this Period 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Nat'l Assn of Home Builders BUILD PAC

Mailing Address Charlie Kasko, Chairman  
1201 15th Street, NW

City Washington State DC Zip Code 20005-2800

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
10 / 16 / 2007

**Transaction ID:** 71120.C19211

Amount of Each Receipt this Period 2500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 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 15 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
OmniAmerican PAC

Mailing Address P.O. Box 150099

City State Zip Code  
Fort Worth TX 76108

FEC ID number of contributing federal political committee. **C** C00385161

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** 80107.C19360

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Pepsico Concerned Citizens Fund PAC

Mailing Address Galen Reser  
700 Anderson Hill Road

City State Zip Code  
Purchase NY 10577-1444

FEC ID number of contributing federal political committee. **C** C00039321

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** 71207.C19312

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Pilgrims Pride Corporation PAC

Mailing Address 4845 US Hwy 271 N

City State Zip Code  
Pittsburg TX 75686

FEC ID number of contributing federal political committee. **C** C00113902

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

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

**Transaction ID:** 80107.C19340

Amount of Each Receipt this Period  
2300.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4300.00**

**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 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
Pillsbury Winthrop Shaw Pittman LLP PAC  
Mailing Address PO Box 7880  
City San Francisco State CA Zip Code 94120  
FEC ID number of contributing federal political committee. **C** C00177972  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 10 / 16 / 2007  
Transaction ID: 71120.C19215  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Realtors PAC  
Mailing Address 430 N. Michigan Avenue  
City Chicago State IL Zip Code 60611  
FEC ID number of contributing federal political committee. **C** C00030718  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00  
Date of Receipt 11 / 02 / 2007  
Transaction ID: 71120.C19268  
Amount of Each Receipt this Period 3000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Regions Financial Corporation PAC  
Mailing Address 1900 5th Avenue N, 10th Floor  
City Birmingham State AL Zip Code 35203  
FEC ID number of contributing federal political committee. **C** C00432252  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 11 / 06 / 2007  
Transaction ID: 71120.C19274  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5000.00  
**TOTAL** This Period (last page this line number only) ..... ►



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

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

FOR LINE NUMBER: PAGE 17 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
Texans for Henry Bonilla  
Mailing Address P.O. Box 17292  
City San Antonio State TX Zip Code 78217  
FEC ID number of contributing federal political committee. **C** C00257402  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00  
Date of Receipt 11 / 19 / 2007  
Transaction ID: 71120.C19297  
Amount of Each Receipt this Period 500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Union Pacific Fund for Effective Govt  
Mailing Address Mike Rock, Treasurer  
600 Thirteenth Street, NW, Suite 3  
City Washington State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C** C00010470  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 11 / 26 / 2007  
Transaction ID: 71207.C19325  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
United Parcel Service UPSPAC  
Mailing Address Clifford L. Hinds, Treasurer  
55 Glenlake Parkway NE  
City Atlanta State GA Zip Code 30328  
FEC ID number of contributing federal political committee. **C** C00064766  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00  
Date of Receipt 10 / 25 / 2007  
Transaction ID: 71120.C19260  
Amount of Each Receipt this Period 2000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
 Kay Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
 United Parcel Service UPSPAC

Mailing Address Clifford L. Hinds, Treasurer  
 55 Glenlake Parkway NE

City Atlanta State GA Zip Code 30328

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 11 / 19 / 2007  
**Transaction ID:** 71120.C19298  
 Amount of Each Receipt this Period 1500.00

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

**B.** Full Name (Last, First, Middle Initial)  
 USAA Employee PAC

Mailing Address Kirsten Register  
 1455 F St. NW #420

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00164145

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 11 / 26 / 2007  
**Transaction ID:** 71207.C19321  
 Amount of Each Receipt this Period 1000.00

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

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

Mailing Address P.O. Box 9777  
 CH1M31

City Federal Way State WA Zip Code 98063

FEC ID number of contributing federal political committee. **C** C00007948

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 11 / 20 / 2007  
**Transaction ID:** 71207.C19319  
 Amount of Each Receipt this Period 1000.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 103  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.

Full Name (Last, First, Middle Initial)  
Wyeth Good Government Fund

Mailing Address Leo C. Jardot  
5 Giralda Farms

City Madison State NJ Zip Code 07940

FEC ID number of contributing federal political committee. **C** C00115303

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
12 / 17 / 2007

Transaction ID: 80107.C19370

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	60300.00

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 103  
(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)  
Key Granger Campaign Fund

**A.**

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

Mailing Address 6120 Plum Valley Place

City State Zip Code  
Fort Worth TX 76116

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: 250.00

Transaction ID: 71120.C19210

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

Amount of Each Receipt this Period: 500.00

**B.**

Full Name (Last, First, Middle Initial)  
Berta M. Banta

Mailing Address 3201 Hilldale Road

City State Zip Code  
Fort Worth TX 76116

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

Name of Employer Self Occupation Retail

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

Amount of Each Receipt this Period: 150.00

Transaction ID: 71005.C19158

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

Amount of Each Receipt this Period: 400.00

**C.**

Full Name (Last, First, Middle Initial)  
Berta M. Banta

Mailing Address 3201 Hilldale Road

City State Zip Code  
Fort Worth TX 76116

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

Name of Employer Self Occupation Retail

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

Amount of Each Receipt this Period: 100.00

Transaction ID: 71005.C19161

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

Amount of Each Receipt this Period: 500.00

**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 21 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Andy Beal</p> <p>Mailing Address 6000 Legacy Drive</p> <p>City State Zip Code Plano TX 75024</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Beal Aerospace Founder and Chairman</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">2300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 2 / 1 3 / 2 0 0 7</span></p> <p><b>Transaction ID:</b> 80107.C19345</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">2300.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) C. C. Bearden Jr.</p> <p>Mailing Address P.O. Box 101717</p> <p>City State Zip Code Fort Worth TX 76185</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Self Business Owner</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">350.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 5 / 2 0 0 7</span></p> <p><b>Transaction ID:</b> 71120.C19230</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p><b>C.</b> Full Name (Last, First, Middle Initial) Julie Beecherl</p> <p>Mailing Address 3801 Beverly Drive</p> <p>City State Zip Code Dallas TX 75205</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Homemaker Homemaker</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">2300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 1 / 2 0 / 2 0 0 7</span></p> <p><b>Transaction ID:</b> 71207.C19317</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">2300.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">4700.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 22 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
Betsy D. Browder  
Mailing Address 203 Highland Dr  
City Aledo State TX Zip Code 76008  
FEC ID number of contributing federal political committee. **C**  
Name of Employer TXU Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00  
Date of Receipt 10 / 10 / 2007  
Transaction ID: 71120.C19195  
Amount of Each Receipt this Period 250.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Joseph E. Cates  
Mailing Address 6329 Inca Road  
City Fort Worth State TX Zip Code 76116  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Skyline Industries, Inc. Occupation Executive  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 450.00  
Date of Receipt 11 / 02 / 2007  
Transaction ID: 71120.C19266  
Amount of Each Receipt this Period 200.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Richard Collins  
Mailing Address 3131 McKinney Ave ste 720  
City Dallas State TX Zip Code 75204  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Today Companies Occupation Chairman & CEO  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 4600.00  
Date of Receipt 12 / 06 / 2007  
Transaction ID: 80107.C19346  
Amount of Each Receipt this Period 4600.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5050.00  
**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 / 103  
(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)  
Key Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
Richard Collins  
 Mailing Address 3131 McKinney Ave ste 720  
 City State Zip Code  
 Dallas TX 75204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Today Companies Occupation  
 Today Companies Chairman & CEO  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 4600.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 0 6 / 2 0 0 7  
**Transaction ID:** 80107.C19347  
 Amount of Each Receipt this Period  
 -2300.00  
 Redesignation FROM Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Richard Collins  
 Mailing Address 3131 McKinney Ave ste 720  
 City State Zip Code  
 Dallas TX 75204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Today Companies Occupation  
 Today Companies Chairman & CEO  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 4600.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 0 6 / 2 0 0 7  
**Transaction ID:** 80107.C19348  
 Amount of Each Receipt this Period  
 2300.00  
 Redesignation TO Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Joseph J. Collmer  
 Mailing Address 5525 Westgrove Drive  
 City State Zip Code  
 Dallas TX 75248-2030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer High Voltage Power Systems Occupation  
 High Voltage Power Systems Executive  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 750.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 1 1 / 2 0 0 7  
**Transaction ID:** 71120.C19205  
 Amount of Each Receipt this Period  
 250.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 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 24 / 103  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
Menard Doswell

Mailing Address 777 Main Street, Suite 1240

City State Zip Code  
Fort Worth TX 76102

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

Name of Employer Occupation  
Menard Doswell & Co. Real Estate

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

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

Transaction ID: 71120.C19271

Amount of Each Receipt this Period  
1000.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Gary P. Dworkin

Mailing Address 2804 W. Bewick

City State Zip Code  
Fort Worth TX 76109-3031

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

Name of Employer Occupation  
Retired Retired

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 1 / 2 7 / 2 0 0 7

Transaction ID: 71207.C19329

Amount of Each Receipt this Period  
200.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Gary P. Dworkin

Mailing Address 2804 W. Bewick

City State Zip Code  
Fort Worth TX 76109-3031

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

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

Transaction ID: 71207.C19328

Amount of Each Receipt this Period  
300.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 103  
(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)  
Key Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
Gary P. Dworkin  
Mailing Address 2804 W. Bewick  
City Fort Worth State TX Zip Code 76109-3031  
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) ▼ 1400.00  
Date of Receipt 12 / 12 / 2007  
Transaction ID: 80107.C19368  
Amount of Each Receipt this Period 100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Gary P. Dworkin  
Mailing Address 2804 W. Bewick  
City Fort Worth State TX Zip Code 76109-3031  
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) ▼ 1500.00  
Date of Receipt 12 / 16 / 2007  
Transaction ID: 80107.C19369  
Amount of Each Receipt this Period 100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Terry Edwards  
Mailing Address 1806 Midpines Court  
City Arlington State TX Zip Code 76012-5759  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Kay Granger Campaign Fund Occupation Staff Assistant  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt 10 / 09 / 2007  
Transaction ID: 71120.C19175  
Amount of Each Receipt this Period 100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 300.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
Richard Egle

Mailing Address 1625 Beulah Road

City State Zip Code  
Vienna VA 22182

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

Name of Employer Self Occupation  
Govt Relations Consultant

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 0 / 1 6 / 2 0 0 7

Transaction ID: 71120.C19216

Amount of Each Receipt this Period

500.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)  
James D. Finley

Mailing Address 1308 Lake Street, Suite 200

City State Zip Code  
Fort Worth TX 76102

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

Name of Employer Finley Resources, Inc. Occupation  
Oil & Gas

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2300.00

Date of Receipt

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

Transaction ID: 80107.C19357

Amount of Each Receipt this Period

2300.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)  
Richard Garnett

Mailing Address 3700 Wyndale Court

City State Zip Code  
Fort Worth TX 76109

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

Name of Employer Self Occupation  
Psychologist

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt

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

Transaction ID: 71120.C19239

Amount of Each Receipt this Period

100.00

Receipt

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

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

2900.00

**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 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
Gary E. Griffith

Mailing Address 3131 McKinney Ave Ste 720

City State Zip Code  
Dallas TX 75204

FEC ID number of contributing federal political committee. C

Name of Employer Today Foundation Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
12 / 06 / 2007

Transaction ID: 80107.C19349

Amount of Each Receipt this Period 1000.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Helen K. Groves

Mailing Address 14790 Pvt Rd 4105

City State Zip Code  
Baird TX 79504

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Rancher

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY  
12 / 06 / 2007

Transaction ID: 80107.C19353

Amount of Each Receipt this Period 500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
G. Michael Gruber

Mailing Address 10735 Strait Lane

City State Zip Code  
Dallas TX 75229

FEC ID number of contributing federal political committee. C

Name of Employer Gruber Hurst Johansen & Hail Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY  
11 / 14 / 2007

Transaction ID: 71120.C19284

Amount of Each Receipt this Period 500.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
Julianna Holt

Mailing Address 2191 Little Blanco Rd.

City State Zip Code  
Blanco TX 78606

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

Name of Employer Occupation  
Self Employed Rancher

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 4300.00

Date of Receipt

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

Transaction ID: 71120.C19290

Amount of Each Receipt this Period

4300.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)  
Julianna Holt

Mailing Address 2191 Little Blanco Rd.

City State Zip Code  
Blanco TX 78606

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

Name of Employer Occupation  
Self Employed Rancher

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2300.00

Date of Receipt

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

Transaction ID: 71207.C19331

Amount of Each Receipt this Period

-2000.00

Reattribution Memo

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

**C.**

Full Name (Last, First, Middle Initial)  
Peter M. Holt

Mailing Address 2191 Little Blanco Rd.

City State Zip Code  
Blanco TX 78606

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

Name of Employer Occupation  
Holt Cat CEO

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt

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

Transaction ID: 71120.C19289

Amount of Each Receipt this Period

2000.00

Reattribution Memo

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

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

4300.00

**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 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
Caroline Rose Hunt

Mailing Address 100 Crescent Ct Ste 1700

City State Zip Code  
Dallas TX 75201

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
The Rosewood Corp Hospitality

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 06 / 2007

**Transaction ID:** 80107.C19364

Amount of Each Receipt this Period  
500.00

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

**B.**

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

Mailing Address 828 Skylark Drive

City State Zip Code  
Denton TX 76205

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
University of North Texas Chancellor

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2007

**Transaction ID:** 71120.C19233

Amount of Each Receipt this Period  
250.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Kell III

Mailing Address 1105 Montreau Ct.

City State Zip Code  
Arlington TX 76012

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  
10 / 11 / 2007

**Transaction ID:** 71120.C19203

Amount of Each Receipt this Period  
100.00

Receipt  
 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 30 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
Dee J. Kelly

Mailing Address Kelly, Hart & Hallman  
201 Main Street, Suite 2500

City Fort Worth State TX Zip Code 76102

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

Name of Employer Kelly, Hart & Hallman, LLP Occupation Attorney

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt 12 / 06 / 2007  
**Transaction ID:** 80107.C19359  
 Amount of Each Receipt this Period 2300.00

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

**B.** Full Name (Last, First, Middle Initial)  
Ness Khan

Mailing Address P.O. Box 1479  
2111 Fort Worth Hwy

City Weatherford State TX Zip Code 76086

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

Name of Employer Medped's Medical Clinic Occupation Physician

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 12 / 25 / 2007  
**Transaction ID:** 80107.C19376  
 Amount of Each Receipt this Period 500.00

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

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

Mailing Address 1509 Shady Oaks Ln

City Fort Worth State TX Zip Code 76107-3539

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

Name of Employer Klabzuba Oil & Gas Occupation Executive

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 12 / 06 / 2007  
**Transaction ID:** 80107.C19358  
 Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3800.00**

**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 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
 Kay Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
 William A. Kramer

Mailing Address Republic Title of Texas Inc.  
 2626 Howell St., 10th Floor

City Dallas State TX Zip Code 75204

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

Name of Employer Republic Title of Texas Inc. Occupation Chairman

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

Date of Receipt: 10 / 09 / 2007  
**Transaction ID:** 71120.C19183  
 Amount of Each Receipt this Period: 250.00

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

Amount of Each Receipt this Period: 1250.00

**B.** Full Name (Last, First, Middle Initial)  
 H. Ward Lay

Mailing Address 8235 Douglas Ave, Ste 300, LB #60

City Dallas State TX Zip Code 75225-6015

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

Name of Employer Lay Capitol Group, LLC Occupation Executive

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

Date of Receipt: 12 / 06 / 2007  
**Transaction ID:** 80107.C19352  
 Amount of Each Receipt this Period: 500.00

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

Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
 Sydney C. Leonard

Mailing Address 5116 North Branch Dr

City Fort Worth State TX Zip Code 76132

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

Name of Employer Information Requested Occupation Information Requested

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

Date of Receipt: 10 / 03 / 2007  
**Transaction ID:** 71005.C19160  
 Amount of Each Receipt this Period: 300.00

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

Amount of Each Receipt this Period: 300.00

**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 32 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
Dan E. Lowrance

Mailing Address 4051 Modlin Ave

City State Zip Code  
Fort Worth TX 76107-1601

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

Name of Employer Occupation  
Not Employed Not Employed

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

Date of Receipt

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

Transaction ID: 71120.C19177

Amount of Each Receipt this Period

500.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)  
Cary M. Maguire

Mailing Address 1201 Elm Street, Suite 4000

City State Zip Code  
Dallas TX 75270

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

Name of Employer Occupation  
Maguire Oil Co. President

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

Date of Receipt

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

Transaction ID: 80107.C19355

Amount of Each Receipt this Period

1000.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)  
Roberta C. Marshall

Mailing Address 352 Brammer Dr

City State Zip Code  
Rhome TX 76078

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

Name of Employer Occupation  
Bureau of Engraving Printer

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 150.00

Date of Receipt

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

Transaction ID: 71120.C19187

Amount of Each Receipt this Period

25.00

Receipt

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

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

1525.00

**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 / 103

(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)  
Key Granger Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
Roberta C. Marshall

Mailing Address 352 Brammer Dr

City State Zip Code  
Rhame TX 76078

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

Name of Employer  
Bureau of Engraving

Occupation  
Printer

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 / 0 9 / 2 0 0 7

Transaction ID: 71120.C19186

Amount of Each Receipt this Period

150.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)  
Marion F. McCollum

Mailing Address 2128 Highland Park Circle W

City State Zip Code  
Fort Worth TX 76107-3644

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 ▼  
200.00

Date of Receipt

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

Transaction ID: 71120.C19200

Amount of Each Receipt this Period

100.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)  
Marion F. McCollum

Mailing Address 2128 Highland Park Circle W

City State Zip Code  
Fort Worth TX 76107-3644

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  
1 2 / 1 7 / 2 0 0 7

Transaction ID: 80107.C19371

Amount of Each Receipt this Period

50.00

Receipt

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

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

300.00

**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 34 / 103  
(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)  
Kay Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
Patricia I. McCune

Mailing Address 2704 Stone Oak Drive

City State Zip Code  
Fort Worth TX 76109

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

Name of Employer Occupation  
Homemaker Homemaker

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

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

Transaction ID: 71120.C19204

Amount of Each Receipt this Period  
50.00

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

**B.** Full Name (Last, First, Middle Initial)  
Dan H. Meeker

Mailing Address 6728 Savannah Lane

City State Zip Code  
Fort Worth TX 76132

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

Name of Employer Occupation  
Conglomerate Gas Energy Executive

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1250.00

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

Transaction ID: 71120.C19252

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mercantile Partners, LP

Mailing Address 2650 Meacham Blvd.

City State Zip Code  
Fort Worth TX 76137

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

Name of Employer Occupation  
see Mary Theresa Lott

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

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

Transaction ID: 71207.C19313

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2050.00

**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: <span style="float: right;">PAGE 35 / 103</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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)  
Key Granger Campaign Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mary Theresa Lott</p> <p>Mailing Address 2650 Meacham Blvd.</p> <p>City State Zip Code Fort Worth TX 76137</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Mercantile Partners, LP</p> <p>Occupation Partner</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 20 / 2007</p> <p><b>Transaction ID:</b> 71207.C19314</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p>Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> Partnership-&gt;Mercantile Partners, LP</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Vance C. Miller</p> <p>Mailing Address 5001 Spring Valley Rd. Suite 1100W</p> <p>City State Zip Code Dallas TX 75244</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Henry S. Miller Companies</p> <p>Occupation Real Estate</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 06 / 2007</p> <p><b>Transaction ID:</b> 80107.C19366</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Pamela Minick</p> <p>Mailing Address 418 W FM 407</p> <p>City State Zip Code Argyle TX 76226</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Billy Bobs Texas</p> <p>Occupation Marketing</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">700.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 03 / 2007</p> <p><b>Transaction ID:</b> 71005.C19155</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">200.00</span></p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">450.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 103

(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)  
Key Granger Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
Walter N. Morosky Jr.

Mailing Address 2517 Ryan Place Dr.

City State Zip Code  
Fort Worth TX 76110

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) ▼ 300.00

Date of Receipt

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

Transaction ID: 71120.C19181

Amount of Each Receipt this Period

300.00

Receipt

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

**B.**

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

Mailing Address 4821 Overton Woods Drive

City State Zip Code  
Fort Worth TX 76109

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

Name of Employer Occupation  
Freese & Nichols, Inc. Chairman / Engineer

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1500.00

Date of Receipt

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

Transaction ID: 80107.C19343

Amount of Each Receipt this Period

500.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)  
James L. Norman

Mailing Address 3817 Potomac Ave

City State Zip Code  
Fort Worth TX 76107

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

Name of Employer Occupation  
Self Physician

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 550.00

Date of Receipt

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

Transaction ID: 71207.C19310

Amount of Each Receipt this Period

450.00

Receipt

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 37 / 103  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
Anita Nosnik

Mailing Address 3401 Lee Parkway, Suite 2103

City State Zip Code  
Dallas TX 75219

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

Name of Employer Occupation  
Homemaker Homemaker

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

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

**Transaction ID:** 80107.C19384

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Pedro Nosnik

Mailing Address 3401 Lee Parkway, Suite 2103

City State Zip Code  
Dallas TX 75219

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

Name of Employer Occupation  
Self Physician

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

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

**Transaction ID:** 80107.C19383

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Rosemary P. Parker

Mailing Address 5903 Mt. Eagle Drive #708

City State Zip Code  
Alexandria VA 22303

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

Name of Employer Occupation  
Welch Resources Inc. 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 4 / 2 0 0 7

**Transaction ID:** 71005.C19170

Amount of Each Receipt this Period  
1000.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
Sarah Perot

Mailing Address P.O. Box 269014

City State Zip Code  
Plano TX 75026-9014

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2300.00

Date of Receipt

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

Transaction ID: 71120.C19182

Amount of Each Receipt this Period

2300.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)  
Alan E. Petsche

Mailing Address 1516 Rivercrest Ct.

City State Zip Code  
Fort Worth TX 76107

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

Name of Employer Occupation  
A. E. Petsche Co., Inc. COO

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt

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

Transaction ID: 71005.C19100

Amount of Each Receipt this Period

100.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)  
R.H. Pickens

Mailing Address 8111 Preston Road, Suite 800

City State Zip Code  
Dallas TX 75225-6378

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

Name of Employer Occupation  
Self Oil & Gas Exploration

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

Date of Receipt

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

Transaction ID: 80107.C19356

Amount of Each Receipt this Period

1000.00

Receipt

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

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

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 39 / 103  
(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)  
Key Granger Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
William L. Raba

Mailing Address 12821 W. Golden Ln.

City San Antonio State TX Zip Code 78249

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

Name of Employer Raba-Kistner Consultants, Inc  
Occupation Engineer

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt 11 / 15 / 2007

Transaction ID: 71120.C19291

Amount of Each Receipt this Period 500.00

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

**B.**

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

Mailing Address 122 Laburnum

City San Antonio State TX Zip Code 78209

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

Name of Employer Retired  
Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt 11 / 15 / 2007

Transaction ID: 71120.C19287

Amount of Each Receipt this Period 250.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Martha Jo Rinne

Mailing Address 4311 Bordeaux Avenue

City Dallas State TX Zip Code 75205

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

Name of Employer Homemaker  
Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt 10 / 03 / 2007

Transaction ID: 71005.C19154

Amount of Each Receipt this Period 1000.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 103  
(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)  
Key Granger Campaign Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Dale Robinowitz</p> <p>Mailing Address 5959 DeLoache Avenue</p> <p>City State Zip Code Dallas TX 75225-3000</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Self Occupation Dentist</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">2300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 2 / 0 4 / 2 0 0 7</span></p> <p><b>Transaction ID:</b> 71207.C19335</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">2300.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Cheryl Adams Rogers</p> <p>Mailing Address 3440 South Freeway</p> <p>City State Zip Code Fort Worth TX 76110</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Colony IV Occupation Real Estate</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">400.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 0 9 / 2 0 0 7</span></p> <p><b>Transaction ID:</b> 71120.C19185</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">150.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Cheryl Adams Rogers</p> <p>Mailing Address 3440 South Freeway</p> <p>City State Zip Code Fort Worth TX 76110</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Colony IV Occupation Real Estate</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 0 9 / 2 0 0 7</span></p> <p><b>Transaction ID:</b> 71120.C19184</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">2550.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 103
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert B. Rowling		Date of Receipt
	Mailing Address 600 East Las Colinas Boulevard, St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 0 6 / 2 0 0 7
	City	State	Zip Code
	Irving	TX	75039-5601
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 80107.C19354
Name of Employer TRT Holdings		Occupation Investor	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			Receipt
<input type="checkbox"/> Other (specify) ▼			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Edgar H. Schollmaier		Date of Receipt
	Mailing Address 3904 Arlan Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 9 / 2 0 0 7
	City	State	Zip Code
	Fort Worth	TX	76109-4705
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 71120.C19179
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 250.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			Receipt
<input type="checkbox"/> Other (specify) ▼			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Carl Sewell		Date of Receipt
	Mailing Address 3860 W Northwest Hwy, Ste 102		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 0 6 / 2 0 0 7
	City	State	Zip Code
	Dallas	TX	75220
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 80107.C19361
Name of Employer Sewell Automotive Companies		Occupation Chairman	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 2500.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			Receipt
<input type="checkbox"/> Other (specify) ▼			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 5050.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 42 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

**A.** Full Name (Last, First, Middle Initial)  
Carl Sewell

Mailing Address 3860 W Northwest Hwy, Ste 102

City State Zip Code  
Dallas TX 75220

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

Name of Employer Sewell Automative Companies  
Occupation Chairman

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  

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

Transaction ID: 80107.C19362

Amount of Each Receipt this Period  
-200.00

Redesignation FROM Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Carl Sewell

Mailing Address 3860 W Northwest Hwy, Ste 102

City State Zip Code  
Dallas TX 75220

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

Name of Employer Sewell Automative Companies  
Occupation Chairman

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  

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

Transaction ID: 80107.C19363

Amount of Each Receipt this Period  
200.00

Redesignation TO Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Annette C. Simmons

Mailing Address 5430 LBJ Freeway, Suite 1700

City State Zip Code  
Dallas TX 75240

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

Name of Employer Homemaker  
Occupation Homemaker

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  

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

Transaction ID: 71207.C19315

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **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 43 / 103

(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
							15

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
Richard Skipper

Mailing Address 1003 W. Bluff Street

City State Zip Code  
Fort Worth TX 76102

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

Name of Employer Occupation  
Skihi Enterprises Contractor / President

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	0		1	5		2	0	0	7

Transaction ID: 71120.C19232

Amount of Each Receipt this Period

500.00
--------

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)  
Judy Stinnett

Mailing Address 13117 Willow Ranch Way

City State Zip Code  
Haslet TX 76052-6228

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

Name of Employer Occupation  
McRyan Hauling Inc. Trucking Contractor

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		0	6		2	0	0	7

Transaction ID: 80107.C19367

Amount of Each Receipt this Period

500.00
--------

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)  
Cleo Tapp

Mailing Address 6117 Merrymount Rd

City State Zip Code  
Fort Worth TX 76107

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
1	1		2	6		2	0	0	7

Transaction ID: 71207.C19327

Amount of Each Receipt this Period

500.00
--------

Receipt

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

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

1500.00
---------

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

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# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
Sandra K. Thomas

Mailing Address 3831 Turtle Creek Blvd., Suite 3F

City State Zip Code  
Dallas TX 75219

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

Name of Employer  
Kuprion-Thomas Inc. P.C.

Occupation  
CPA & President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2300.00

Date of Receipt

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

Transaction ID: 80107.C19350

Amount of Each Receipt this Period

2300.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)  
Jere W. Thompson

Mailing Address 3838 Oak Lawn Ste 1850

City State Zip Code  
Dallas TX 75219

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

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

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

Transaction ID: 80107.C19365

Amount of Each Receipt this Period

500.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)  
Timothy N. Tuggey

Mailing Address 2804 Rae Dell

City State Zip Code  
Austin TX 78704

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

Name of Employer  
Loeffler Tuggey Pauerstein

Occupation  
Partner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

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

Transaction ID: 71120.C19292

Amount of Each Receipt this Period

2000.00

Receipt

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

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

4800.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
Nancy Turner

Mailing Address 254 N Bailey Ave

City State Zip Code  
Fort Worth TX 76107

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

Name of Employer Occupation  
N/A Student

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 1 / 2 6 / 2 0 0 7

Transaction ID: 71207.C19322

Amount of Each Receipt this Period

150.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)  
Vicki Vanagas

Mailing Address 121 Lamplighter Court

City State Zip Code  
Azle TX 76020-4148

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) ▼ 400.00

Date of Receipt

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

Transaction ID: 71120.C19191

Amount of Each Receipt this Period

150.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)  
Diane Williamson

Mailing Address 4040 Hanover

City State Zip Code  
Dallas TX 75225

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

Name of Employer Occupation  
Williamson Printing Corp. Printing

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt

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

Transaction ID: 71120.C19283

Amount of Each Receipt this Period

2000.00

Receipt

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

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

2300.00

**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 46 / 103

(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
							15

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.

Full Name (Last, First, Middle Initial)  
Jerry Williamson

Mailing Address 6700 Denton Drive

City	State	Zip Code
Dallas	TX	75235

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

Name of Employer Williamson Printing Corp.	Occupation Owner / Chairman
-----------------------------------------------	--------------------------------

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00
-------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------

Date of Receipt

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

Transaction ID: 71120.C19278

Amount of Each Receipt this Period  
300.00

Receipt

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

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

300.00

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

58425.00

**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 47 / 103
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
 Kay Granger Campaign Fund

**A.**

Full Name (Last, First, Middle Initial) Frost Bank		Date of Receipt MM / DD / YYYY 10 / 31 / 2007
Mailing Address P.O. Box 1600		Transaction ID: 71120.C19270
City San Antonio	State TX	Zip Code 78296-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.76
Name of Employer	Occupation	Interest Received <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 ▼ 1217.92	

**B.**

Full Name (Last, First, Middle Initial) Frost Bank		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address P.O. Box 1600		Transaction ID: 71207.C19338
City San Antonio	State TX	Zip Code 78296-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.34
Name of Employer	Occupation	Interest Received <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 ▼ 1240.26	

**C.**

Full Name (Last, First, Middle Initial) Frost Bank		Date of Receipt MM / DD / YYYY 12 / 31 / 2007
Mailing Address P.O. Box 1600		Transaction ID: 80107.C19388
City San Antonio	State TX	Zip Code 78296-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.19
Name of Employer	Occupation	Interest Received <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 ▼ 1260.45	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	69.29
<b>TOTAL</b> This Period (last page this line number only) .....	69.29

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.

Full Name (Last, First, Middle Initial)  
American Legion Post 453

Mailing Address 2755 Bachman Dr.

City Dallas State TX Zip Code 75220-

Purpose of Disbursement Advertising  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 80107.E8487  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

ADVERTISING

B.

Full Name (Last, First, Middle Initial)  
Aristotle International, Inc.

Mailing Address 205 Pennsylvania Avenue, SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement Software/Database Support  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 71009.E8361  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

SOFTWARE/DATABASE SUPPORT

C.

Full Name (Last, First, Middle Initial)  
Aristotle International, Inc.

Mailing Address 205 Pennsylvania Avenue, SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement Credit Card Service Charges  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 71207.E8445  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

CREDIT CARD SERVICE CHARGES

SUBTOTAL of Disbursements This Page (optional) ▶

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



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Aristotle International, Inc.</p> <p>Mailing Address 205 Pennsylvania Avenue, SE</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement Credit Card Service Charges</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71207.E8484 <b>Date of Disbursement</b> 12 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 37.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>CREDIT CARD SERVICE CHARGES</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Aristotle International, Inc.</p> <p>Mailing Address 205 Pennsylvania Avenue, SE</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement Credit Card Service Charges</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80107.E8497 <b>Date of Disbursement</b> 12 / 14 / 2007</p> <p>Amount of Each Disbursement this Period 162.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>CREDIT CARD SERVICE CHARGES</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) AT&amp;T</p> <p>Mailing Address P.O. Box 650661</p> <p>City Dallas State TX Zip Code 75265-0661</p> <p>Purpose of Disbursement Phone</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71009.E8364 <b>Date of Disbursement</b> 10 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 411.89</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PHONE</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>610.89</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: 71120.E8417 Date of Disbursement 11 / 05 / 2007
	Mailing Address P.O. Box 650661	Amount of Each Disbursement this Period 403.72
	City Dallas State TX Zip Code 75265-0661	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Phone Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PHONE

B.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: 80107.E8491 Date of Disbursement 12 / 07 / 2007
	Mailing Address P.O. Box 650661	Amount of Each Disbursement this Period 170.58
	City Dallas State TX Zip Code 75265-0661	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Phone Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PHONE

C.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group	Transaction ID: 71009.E8358 Date of Disbursement 10 / 05 / 2007
	Mailing Address 1775 I Street, NW Suite 700	Amount of Each Disbursement this Period 4000.00
	City Washington State DC Zip Code 20006-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Consulting Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FUNDRAISING CONSULTING

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	4574.30
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group <hr/> Mailing Address 1775 I Street, NW Suite 700 <hr/> City Washington State DC Zip Code 20006- <hr/> Purpose of Disbursement Fundraising Consulting Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 71120.E8428 Date of Disbursement 11 / 05 / 2007 <hr/> Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING CONSULTING
B.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group <hr/> Mailing Address 1775 I Street, NW Suite 700 <hr/> City Washington State DC Zip Code 20006- <hr/> Purpose of Disbursement Travel/Delivery/Facsimile Expense Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 71120.E8427 Date of Disbursement 11 / 05 / 2007 <hr/> Amount of Each Disbursement this Period 259.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TRAVEL/DELIVERY/FACSIMILE EXPENSE
C.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group <hr/> Mailing Address 1775 I Street, NW Suite 700 <hr/> City Washington State DC Zip Code 20006- <hr/> Purpose of Disbursement Catering/Parking/Facsimile Expense Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 71120.E8439 Date of Disbursement 11 / 16 / 2007 <hr/> Amount of Each Disbursement this Period 2016.86 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CATERING/PARKING/FACSIMILE EXPENSE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4276.21
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Bellwether Consulting Group <hr/> Mailing Address 1775 I Street, NW Suite 700 <hr/> City Washington State DC Zip Code 20006- <hr/> Purpose of Disbursement Parking/Facsimile Expense Candidate Name <span style="float: right;">Category/ Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 80107.E8494 Date of Disbursement 12 / 07 / 2007 <hr/> Amount of Each Disbursement this Period 198.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>PARKING/FACSIMILE EXPENSE</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Kevin Brannon <hr/> Mailing Address 1911 Lorraine <hr/> City Allen State TX Zip Code 75002- <hr/> Purpose of Disbursement Fundraising Consulting Candidate Name <span style="float: right;">Category/ Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 80107.E8496 Date of Disbursement 12 / 10 / 2007 <hr/> Amount of Each Disbursement this Period 4931.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>FUNDRAISING CONSULTING</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Capital One <hr/> Mailing Address P.O. Box 650007 <hr/> City Dallas State TX Zip Code 75265-0007 <hr/> Purpose of Disbursement Credit Card (See below) Candidate Name <span style="float: right;">Category/ Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 71120.E8392 Date of Disbursement 10 / 29 / 2007 <hr/> Amount of Each Disbursement this Period 3339.52 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>CREDIT CARD (SEE BELOW)</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>8469.37</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.

Full Name (Last, First, Middle Initial)  
America Online

Mailing Address P.O. Box 28640

City Jacksonville State FL Zip Code 32226-

Purpose of Disbursement  
Internet

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 71120.E8406  
Date of Disbursement

10 / 29 / 2007

Amount of Each Disbursement this Period

25.90

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

**[MEMO ITEM]**  
MEMO: INTERNET

B.

Full Name (Last, First, Middle Initial)  
American Airlines

Mailing Address P.O. Box 619616

City DFW Airport State TX Zip Code 75261-

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 71120.E8394  
Date of Disbursement

10 / 29 / 2007

Amount of Each Disbursement this Period

654.70

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

**[MEMO ITEM]**  
MEMO: TRAVEL

C.

Full Name (Last, First, Middle Initial)  
American Airlines

Mailing Address P.O. Box 619616

City DFW Airport State TX Zip Code 75261-

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 71120.E8398  
Date of Disbursement

10 / 29 / 2007

Amount of Each Disbursement this Period

223.80

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

**[MEMO ITEM]**  
MEMO: TRAVEL

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

0.00

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: 71120.E8393 Date of Disbursement 10 / 29 / 2007
	Mailing Address P.O. Box 619616	Amount of Each Disbursement this Period -405.90
	City DFW Airport State TX Zip Code 75261-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel	<b>[MEMO ITEM]</b> MEMO: TRAVEL
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Capital One	Transaction ID: 71120.E8409 Date of Disbursement 10 / 29 / 2007
	Mailing Address P.O. Box 650007	Amount of Each Disbursement this Period 9.26
	City Dallas State TX Zip Code 75265-0007	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Finance Charges	<b>[MEMO ITEM]</b> MEMO: FINANCE CHARGES
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Corner Bakery	Transaction ID: 71120.E8403 Date of Disbursement 10 / 29 / 2007
	Mailing Address 615 Main St.	Amount of Each Disbursement this Period 32.45
	City Fort Worth State TX Zip Code 76102-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Volunteer Expense/Breakfast	<b>[MEMO ITEM]</b> MEMO: VOLUNTEER EXPENSE/B- REAKFAST
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) Corner Bakery	Transaction ID: 71120.E8404 Date of Disbursement 10 / 29 / 2007
	Mailing Address 615 Main St.	Amount of Each Disbursement this Period 39.86
	City Fort Worth State TX Zip Code 76102-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: VOLUNTEER EXPENSE/L-UNCHEON
	Purpose of Disbursement Volunteer Expense/Luncheon Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Intercontinental Hotel	Transaction ID: 71120.E8410 Date of Disbursement 10 / 29 / 2007
	Mailing Address 701 Congress Ave.	Amount of Each Disbursement this Period 330.85
	City Austin State TX Zip Code 78701-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: LODGING
	Purpose of Disbursement Lodging Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Neiman Marcus	Transaction ID: 71120.E8408 Date of Disbursement 10 / 29 / 2007
	Mailing Address 2100 Green Oaks Blvd.	Amount of Each Disbursement this Period 190.92
	City Fort Worth State TX Zip Code 76116-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: GIFT
	Purpose of Disbursement Gift Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 3301 Jefferson Davis Hwy.</p> <p>City Alexandria State VA Zip Code 22305-</p> <p>Purpose of Disbursement Office Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71120.E8402</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="9"/> / <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="238.31"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: OFFICE EQUIPMENT</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Target</p> <p>Mailing Address 2600 W. 7th Street</p> <p>City Fort Worth State TX Zip Code 76102-</p> <p>Purpose of Disbursement Food &amp; Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71120.E8401</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="9"/> / <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="44.29"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: FOOD &amp; BEVERAGE</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) U.S. House Members Dining Room</p> <p>Mailing Address U.S. Capitol, Room H117-120</p> <p>City Washington State DC Zip Code 20515-</p> <p>Purpose of Disbursement Food &amp; Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71120.E8395</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="9"/> / <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="23.40"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: FOOD &amp; BEVERAGE</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="0.00"/></p>
<p><b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: 71120.E8396 Date of Disbursement 10 / 29 / 2007
	Mailing Address Downtown Station	Amount of Each Disbursement this Period 246.00
	City Fort Worth State TX Zip Code 76101-9999	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: POSTAGE
	Purpose of Disbursement Postage Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: 71120.E8397 Date of Disbursement 10 / 29 / 2007
	Mailing Address Downtown Station	Amount of Each Disbursement this Period 1394.00
	City Fort Worth State TX Zip Code 76101-9999	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: POSTAGE
	Purpose of Disbursement Postage Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Capital One	Transaction ID: 71207.E8451 Date of Disbursement 11 / 30 / 2007
	Mailing Address P.O. Box 650007	Amount of Each Disbursement this Period 1827.45
	City Dallas State TX Zip Code 75265-0007	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD (SEE BELOW)
	Purpose of Disbursement Credit Card (See Below) Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1827.45</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.

Full Name (Last, First, Middle Initial)  
America Online

Mailing Address P.O. Box 28640

City Jacksonville State FL Zip Code 32226-

Purpose of Disbursement  
Internet

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 71207.E8476  
Date of Disbursement

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

Amount of Each Disbursement this Period

25.90
-------

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

**[MEMO ITEM]**  
MEMO: INTERNET

B.

Full Name (Last, First, Middle Initial)  
American Airlines

Mailing Address P.O. Box 619616

City DFW Airport State TX Zip Code 75261-

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 71207.E8474  
Date of Disbursement

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

Amount of Each Disbursement this Period

256.80
--------

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

**[MEMO ITEM]**  
MEMO: TRAVEL

C.

Full Name (Last, First, Middle Initial)  
Central Market

Mailing Address 4651 West Freeway Suite A

City Fort Worth State TX Zip Code 76104-

Purpose of Disbursement  
Catering

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 71207.E8471  
Date of Disbursement

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

Amount of Each Disbursement this Period

619.19
--------

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

**[MEMO ITEM]**  
MEMO: CATERING

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

0.00
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**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) Hobby Lobby	Transaction ID: 71207.E8466
	Mailing Address 5020 S. Hulen Blvd.	Date of Disbursement 11 / 30 / 2007
	City Fort Worth State TX Zip Code 76132-	Amount of Each Disbursement this Period 25.97
	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Majestic Liquor Stores, Inc.	Transaction ID: 71207.E8467
	Mailing Address 4520 Camp Bowie Blvd.	Date of Disbursement 11 / 30 / 2007
	City Fort Worth State TX Zip Code 76107-	Amount of Each Disbursement this Period 137.17
	Purpose of Disbursement Beverages	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<b>[MEMO ITEM]</b> MEMO: BEVERAGES
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Public Storage	Transaction ID: 71207.E8463
	Mailing Address 8801 West Freeway	Date of Disbursement 11 / 30 / 2007
	City Fort Worth State TX Zip Code 76116-	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Office Storage	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<b>[MEMO ITEM]</b> MEMO: OFFICE STORAGE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) Rosa Mexicano	Transaction ID: 71207.E8461 Date of Disbursement 11 / 30 / 2007
	Mailing Address 575 7th Street at F Street, NW	Amount of Each Disbursement this Period 138.25
	City Washington State DC Zip Code 20004-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Catering	<b>[MEMO ITEM]</b> MEMO: CATERING
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ruths Chris Steak House	Transaction ID: 71207.E8481 Date of Disbursement 11 / 30 / 2007
	Mailing Address 724 9th Street North West	Amount of Each Disbursement this Period 89.62
	City Washington State DC Zip Code 20001-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Food & Beverage	<b>[MEMO ITEM]</b> MEMO: FOOD & BEVERAGE
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Target	Transaction ID: 71207.E8469 Date of Disbursement 11 / 30 / 2007
	Mailing Address 2600 W. 7th Street	Amount of Each Disbursement this Period 28.52
	City Fort Worth State TX Zip Code 76102-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Office Supplies/Food & Beverage	<b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES/FOOD & BEVERAGE
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Target  Mailing Address 2600 W. 7th Street  City Fort Worth State TX Zip Code 76102-  Purpose of Disbursement Office Supplies/Food & Beverage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71207.E8468 Date of Disbursement 11 / 30 / 2007  Amount of Each Disbursement this Period 24.09  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES/FOOD & BEVERAGE
<b>B.</b>	Full Name (Last, First, Middle Initial) Tortilla Coast  Mailing Address 400 First Street, SE  City Washington State DC Zip Code 20016-  Purpose of Disbursement Luncheon Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71207.E8465 Date of Disbursement 11 / 30 / 2007  Amount of Each Disbursement this Period 55.39  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>[MEMO ITEM]</b> MEMO: LUNCHEON
<b>C.</b>	Full Name (Last, First, Middle Initial) USPS  Mailing Address Downtown Station  City Fort Worth State TX Zip Code 76101-9999  Purpose of Disbursement Postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71207.E8480 Date of Disbursement 11 / 30 / 2007  Amount of Each Disbursement this Period 82.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>[MEMO ITEM]</b> MEMO: POSTAGE

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.

Full Name (Last, First, Middle Initial)  
USPS

Mailing Address Downtown Station

City Fort Worth State TX Zip Code 76101-9999

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 71207.E8464  
Date of Disbursement

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

Amount of Each Disbursement this Period

41.00
-------

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

**[MEMO ITEM]**  
MEMO: POSTAGE

B.

Full Name (Last, First, Middle Initial)  
Capital One

Mailing Address P.O. Box 650007

City Dallas State TX Zip Code 75265-0007

Purpose of Disbursement  
Credit Card (See below)

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 80107.E8514  
Date of Disbursement

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

Amount of Each Disbursement this Period

1778.02
---------

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

CREDIT CARD (SEE BELOW)

C.

Full Name (Last, First, Middle Initial)  
America Online

Mailing Address P.O. Box 28640

City Jacksonville State FL Zip Code 32226-

Purpose of Disbursement  
Internet

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 80115.E8529  
Date of Disbursement

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

Amount of Each Disbursement this Period

25.98
-------

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

**[MEMO ITEM]**  
MEMO: INTERNET

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

1778.02
---------

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

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# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.

Full Name (Last, First, Middle Initial)  
American Airlines

Mailing Address P.O. Box 619616

City DFW Airport State TX Zip Code 75261-

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 80115.E8521  
Date of Disbursement

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

Amount of Each Disbursement this Period

256.80
--------

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

**[MEMO ITEM]**  
MEMO: TRAVEL

B.

Full Name (Last, First, Middle Initial)  
Doubletree Hotel

Mailing Address 37 NE Loop 410

City San Antonio State TX Zip Code 78216-

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 80115.E8528  
Date of Disbursement

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

Amount of Each Disbursement this Period

213.43
--------

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

**[MEMO ITEM]**  
MEMO: LODGING

C.

Full Name (Last, First, Middle Initial)  
Haute on the Hill

Mailing Address U.S. House of Representatives  
Rayburn House Office Building, B-3

City Washington State DC Zip Code 20515-

Purpose of Disbursement  
Food and Beverage

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 80115.E8522  
Date of Disbursement

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

Amount of Each Disbursement this Period

198.00
--------

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

**[MEMO ITEM]**  
MEMO: FOOD AND BEVERAGE

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

0.00
------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) Public Storage	Transaction ID: 80115.E8518 Date of Disbursement 12 / 31 / 2007
	Mailing Address 8801 West Freeway	Amount of Each Disbursement this Period 100.00
	City Fort Worth State TX Zip Code 76116-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Office Storage	<b>[MEMO ITEM]</b> MEMO: OFFICE STORAGE
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Residence Inn	Transaction ID: 80115.E8531 Date of Disbursement 12 / 31 / 2007
	Mailing Address 34-44 Charles River Ave.	Amount of Each Disbursement this Period 212.53
	City Charlestown State MA Zip Code 02129-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Lodging	<b>[MEMO ITEM]</b> MEMO: LODGING
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Shoppers	Transaction ID: 80115.E8523 Date of Disbursement 12 / 31 / 2007
	Mailing Address 3801 Jefferson Davis Hwy.	Amount of Each Disbursement this Period 205.95
	City Alexandria State VA Zip Code 22305-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Food & Beverage	<b>[MEMO ITEM]</b> MEMO: FOOD & BEVERAGE
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.

Full Name (Last, First, Middle Initial)  
U.S. House of Representatives

Mailing Address B217 Longworth HOB

City Washington State DC Zip Code 20515-

Purpose of Disbursement

Mementos

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 80115.E8526

Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

97.20

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

[MEMO ITEM]

MEMO: MEMENTOS

B.

Full Name (Last, First, Middle Initial)  
USPS

Mailing Address Downtown Station

City Fort Worth State TX Zip Code 76101-9999

Purpose of Disbursement

Postage

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 80115.E8524

Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

82.00

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

[MEMO ITEM]

MEMO: POSTAGE

C.

Full Name (Last, First, Middle Initial)  
USPS

Mailing Address Downtown Station

City Fort Worth State TX Zip Code 76101-9999

Purpose of Disbursement

Postage

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 80115.E8525

Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

10.56

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

[MEMO ITEM]

MEMO: POSTAGE

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Kelsey De la Torre <hr/> Mailing Address 910 Houston St. #504 <hr/> City Fort Worth State TX Zip Code 76102- <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71009.E8339 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7 <hr/> Amount of Each Disbursement this Period 1438.43 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  SALARY
<b>B.</b>	Full Name (Last, First, Middle Initial) Doral Tesoro Golf Club <hr/> Mailing Address 3300 Championship Parkway <hr/> City Fort Worth State TX Zip Code 76177- <hr/> Purpose of Disbursement Event Deposit - Golf Tournament Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80107.E8513 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 6 / 2 0 0 7 <hr/> Amount of Each Disbursement this Period 500.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  EVENT DEPOSIT - GOLF TOUR- NAMENT
<b>C.</b>	Full Name (Last, First, Middle Initial) Terry Edwards <hr/> Mailing Address 1806 Midpines Court <hr/> City Arlington State TX Zip Code 76012-5759 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71009.E8340 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7 <hr/> Amount of Each Disbursement this Period 448.67 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  SALARY

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2387.10
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) Terry Edwards	Transaction ID: 71120.E8367 Date of Disbursement 10 / 15 / 2007
	Mailing Address 1806 Midpines Court	Amount of Each Disbursement this Period 448.67
	City Arlington State TX Zip Code 76012-5759	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Terry Edwards	Transaction ID: 71120.E8412 Date of Disbursement 11 / 01 / 2007
	Mailing Address 1806 Midpines Court	Amount of Each Disbursement this Period 396.67
	City Arlington State TX Zip Code 76012-5759	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Terry Edwards	Transaction ID: 71120.E8431 Date of Disbursement 11 / 05 / 2007
	Mailing Address 1806 Midpines Court	Amount of Each Disbursement this Period 74.75
	City Arlington State TX Zip Code 76012-5759	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement - Flags Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

920.09

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Terry Edwards</p> <p>Mailing Address 1806 Midpines Court</p> <p>City Arlington State TX Zip Code 76012-5759</p> <p>Purpose of Disbursement 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71120.E8433</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <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="396.67"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>SALARY</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Terry Edwards</p> <p>Mailing Address 1806 Midpines Court</p> <p>City Arlington State TX Zip Code 76012-5759</p> <p>Purpose of Disbursement 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71207.E8452</p> <p>Date of Disbursement</p> <p><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"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="396.67"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>SALARY</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Terry Edwards</p> <p>Mailing Address 1806 Midpines Court</p> <p>City Arlington State TX Zip Code 76012-5759</p> <p>Purpose of Disbursement 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80107.E8500</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <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="396.67"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>SALARY</b></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="1190.01"/></p>
<p><b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.

Full Name (Last, First, Middle Initial)  
Terry Edwards

Transaction ID: 80107.E8501  
Date of Disbursement

Mailing Address 1806 Midpines Court

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

City State Zip Code  
Arlington TX 76012-5759

Amount of Each Disbursement this Period

1515.00
---------

Purpose of Disbursement  
Salary  
Candidate Name

Category/  
Type

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

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

SALARY

B.

Full Name (Last, First, Middle Initial)  
Roger Fitts

Transaction ID: 80107.E8499  
Date of Disbursement

Mailing Address 5729 Kilpatrick

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

City State Zip Code  
Fort Worth TX 76107-

Amount of Each Disbursement this Period

325.00
--------

Purpose of Disbursement  
Catering  
Candidate Name

Category/  
Type

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

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

CATERING

C.

Full Name (Last, First, Middle Initial)  
Frost Bank

Transaction ID: 71120.E8411  
Date of Disbursement

Mailing Address P.O. Box 1600

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

City State Zip Code  
San Antonio TX 78296-

Amount of Each Disbursement this Period

10.00
-------

Purpose of Disbursement  
Bank Fee  
Candidate Name

Category/  
Type

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

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

BANK FEE

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

1850.00
---------

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

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# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) Frost Bank  Mailing Address P.O. Box 1600  City San Antonio State TX Zip Code 78296-  Purpose of Disbursement Bank Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71207.E8483 Date of Disbursement 11 / 26 / 2007  Amount of Each Disbursement this Period 10.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  BANK FEE
B.	Full Name (Last, First, Middle Initial) Frost Bank  Mailing Address P.O. Box 1600  City San Antonio State TX Zip Code 78296-  Purpose of Disbursement Bank Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80107.E8515 Date of Disbursement 12 / 18 / 2007  Amount of Each Disbursement this Period 10.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  BANK FEE
C.	Full Name (Last, First, Middle Initial) Kay Granger  Mailing Address 715 Jones Street, Suite 200  City Ft Worth State TX Zip Code 76102-  Purpose of Disbursement Expense Reimbursement / Lapel Pins Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71120.E8383 Date of Disbursement 10 / 19 / 2007  Amount of Each Disbursement this Period 282.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  EXPENSE REIMBURSEMENT / LAPEL PINS

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	302.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.

Full Name (Last, First, Middle Initial)  
Hawk Electronics

Transaction ID: 71009.E8353  
Date of Disbursement

Mailing Address P.O. Box 961027

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

City State Zip Code  
Fort Worth TX 76161-

Amount of Each Disbursement this Period

295.43
--------

Purpose of Disbursement

Phone

Candidate Name

Category/  
Type

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

PHONE

State: District:

B.

Full Name (Last, First, Middle Initial)  
Hawk Electronics

Transaction ID: 71120.E8421  
Date of Disbursement

Mailing Address P.O. Box 961027

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

City State Zip Code  
Fort Worth TX 76161-

Amount of Each Disbursement this Period

297.10
--------

Purpose of Disbursement

Phone

Candidate Name

Category/  
Type

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

PHONE

State: District:

C.

Full Name (Last, First, Middle Initial)  
Hawk Electronics

Transaction ID: 80107.E8492  
Date of Disbursement

Mailing Address P.O. Box 961027

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

City State Zip Code  
Fort Worth TX 76161-

Amount of Each Disbursement this Period

968.40
--------

Purpose of Disbursement

Phone

Candidate Name

Category/  
Type

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

PHONE

State: District:

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

1560.93
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TOTAL This Period (last page this line number only) .....

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# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service</p> <p>Mailing Address PO Box 105078</p> <p>City Atlanta State GA Zip Code 30348-5078</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71010.E8366 <b>Date of Disbursement</b> 10 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 420.14</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL TAXES</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service</p> <p>Mailing Address PO Box 105078</p> <p>City Atlanta State GA Zip Code 30348-5078</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71120.E8369 <b>Date of Disbursement</b> 10 / 15 / 2007</p> <p>Amount of Each Disbursement this Period 2536.80</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL TAXES</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service</p> <p>Mailing Address PO Box 105078</p> <p>City Atlanta State GA Zip Code 30348-5078</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71120.E8437 <b>Date of Disbursement</b> 11 / 16 / 2007</p> <p>Amount of Each Disbursement this Period 2220.66</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL TAXES</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5177.60</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

<b>A.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service <hr/> Mailing Address PO Box 105078 <hr/> City Atlanta State GA Zip Code 30348-5078 <hr/> Purpose of Disbursement Payroll Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80107.E8504 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 7
	Amount of Each Disbursement this Period 3462.66
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	PAYROLL TAXES

<b>B.</b> Full Name (Last, First, Middle Initial) Jack Boles Valet <hr/> Mailing Address 4311 Oak Lawn, Suite 175 <hr/> City Dallas State TX Zip Code 75219- <hr/> Purpose of Disbursement Valet Parking Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71207.E8446 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7
	Amount of Each Disbursement this Period 376.71
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	VALET PARKING

<b>C.</b> Full Name (Last, First, Middle Initial) Jan Simus Events <hr/> Mailing Address P.O. Box 101685 <hr/> City Fort Worth State TX Zip Code 76185- <hr/> Purpose of Disbursement Catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71120.E8374 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
	Amount of Each Disbursement this Period 1726.84
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	CATERING

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5566.21
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.

Full Name (Last, First, Middle Initial)  
Jones Street Investments

Mailing Address 715 Jones Street, Suite 200

City State Zip Code  
Fort Worth TX 76102-

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 71009.E8338  
Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

1286.00

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

RENT

B.

Full Name (Last, First, Middle Initial)  
Jones Street Investments

Mailing Address 715 Jones Street, Suite 200

City State Zip Code  
Fort Worth TX 76102-

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 71120.E8391  
Date of Disbursement

10 / 31 / 2007

Amount of Each Disbursement this Period

1286.00

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

RENT

C.

Full Name (Last, First, Middle Initial)  
Jones Street Investments

Mailing Address 715 Jones Street, Suite 200

City State Zip Code  
Fort Worth TX 76102-

Purpose of Disbursement  
Rent & Property Taxes

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 71207.E8450  
Date of Disbursement

11 / 30 / 2007

Amount of Each Disbursement this Period

2453.52

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

RENT & PROPERTY TAXES

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

5025.52

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.

Full Name (Last, First, Middle Initial)  
Koch & Hoos LLC

Transaction ID: 71009.E8359  
Date of Disbursement

Mailing Address P. O. Box 1154

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

City State Zip Code  
Alexandria VA 22313-

Amount of Each Disbursement this Period

3090.50
---------

Purpose of Disbursement  
Financial Services

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

Candidate Name

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

FINANCIAL SERVICES

State: District:

B.

Full Name (Last, First, Middle Initial)  
Koch & Hoos LLC

Transaction ID: 71120.E8419  
Date of Disbursement

Mailing Address P. O. Box 1154

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

City State Zip Code  
Alexandria VA 22313-

Amount of Each Disbursement this Period

1295.00
---------

Purpose of Disbursement  
Financial Services

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

Candidate Name

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

FINANCIAL SERVICES

State: District:

C.

Full Name (Last, First, Middle Initial)  
Koch & Hoos LLC

Transaction ID: 80107.E8506  
Date of Disbursement

Mailing Address P. O. Box 1154

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

City State Zip Code  
Alexandria VA 22313-

Amount of Each Disbursement this Period

3183.30
---------

Purpose of Disbursement  
Financial Services

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

Candidate Name

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

FINANCIAL SERVICES

State: District:

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

7568.80
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TOTAL This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Konica Minolta Business Solutions <hr/> Mailing Address 21146 Network Place <hr/> City Chicago State IL Zip Code 60673-1211 <hr/> Purpose of Disbursement Copier Rental Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71009.E8357 Date of Disbursement 10 / 05 / 2007 <hr/> Amount of Each Disbursement this Period 364.77 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>COPIER RENTAL</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Konica Minolta Business Solutions <hr/> Mailing Address 21146 Network Place <hr/> City Chicago State IL Zip Code 60673-1211 <hr/> Purpose of Disbursement Copier Rental Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71120.E8390 Date of Disbursement 10 / 26 / 2007 <hr/> Amount of Each Disbursement this Period 364.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>COPIER RENTAL</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Konica Minolta Business Solutions <hr/> Mailing Address 21146 Network Place <hr/> City Chicago State IL Zip Code 60673-1211 <hr/> Purpose of Disbursement Copier Rental Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71207.E8455 Date of Disbursement 11 / 30 / 2007 <hr/> Amount of Each Disbursement this Period 1052.17 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>COPIER RENTAL</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>1781.70</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) NAS News/Senior Life Magazine <hr/> Mailing Address P O Box 27146 <hr/> City NAS Jrb State TX Zip Code 76127-0146 <hr/> Purpose of Disbursement Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71120.E8440 Date of Disbursement 11 / 16 / 2007 <hr/> Amount of Each Disbursement this Period 788.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ADVERTISING
B.	Full Name (Last, First, Middle Initial) Office Depot <hr/> Mailing Address P.O. Box 689020 <hr/> City Des Moines State IA Zip Code 50368-9020 <hr/> Purpose of Disbursement Office Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71009.E8344 Date of Disbursement 10 / 02 / 2007 <hr/> Amount of Each Disbursement this Period 173.17 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 OFFICE SUPPLIES
C.	Full Name (Last, First, Middle Initial) Office Depot <hr/> Mailing Address P.O. Box 689020 <hr/> City Des Moines State IA Zip Code 50368-9020 <hr/> Purpose of Disbursement Office Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71207.E8444 Date of Disbursement 11 / 05 / 2007 <hr/> Amount of Each Disbursement this Period 732.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 OFFICE SUPPLIES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1693.97
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Office Depot</p> <p>Mailing Address P.O. Box 689020</p> <p>City Des Moines State IA Zip Code 50368-9020</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71207.E8457</p> <p>Date of Disbursement 11 / 30 / 2007</p> <p>Amount of Each Disbursement this Period 259.45</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>OFFICE SUPPLIES</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Office Depot</p> <p>Mailing Address P.O. Box 689020</p> <p>City Des Moines State IA Zip Code 50368-9020</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80107.E8512</p> <p>Date of Disbursement 12 / 26 / 2007</p> <p>Amount of Each Disbursement this Period 103.87</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>OFFICE SUPPLIES</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Melody Parlett</p> <p>Mailing Address 777 Fairway Dr., Apt 926</p> <p>City Coppell State TX Zip Code 75019-</p> <p>Purpose of Disbursement 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71009.E8341</p> <p>Date of Disbursement 10 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 1272.20</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>SALARY</b></p>

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

1635.52

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) Melody Parlett	Transaction ID: 71009.E8348 Date of Disbursement 10 / 05 / 2007
	Mailing Address 777 Fairway Dr., Apt 926	Amount of Each Disbursement this Period 1036.10
	City Coppel State TX Zip Code 75019-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement (See below)	REIMBURSEMENT (SEE BELOW)
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Hilton Hotel	Transaction ID: 71009.E8349 Date of Disbursement 10 / 05 / 2007
	Mailing Address 5000 Seminary Rd.	Amount of Each Disbursement this Period 1006.10
	City Alexandria State VA Zip Code 22311-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Lodging	[MEMO ITEM] MEMO: LODGING
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Melody Parlett	Transaction ID: 71120.E8368 Date of Disbursement 10 / 15 / 2007
	Mailing Address 777 Fairway Dr., Apt 926	Amount of Each Disbursement this Period 1272.20
	City Coppel State TX Zip Code 75019-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary	SALARY
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2308.30
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) Melody Parlett	Transaction ID: 71120.E8380 Date of Disbursement 10 / 19 / 2007
	Mailing Address 777 Fairway Dr., Apt 926	Amount of Each Disbursement this Period 79.49
	City Coppel State TX Zip Code 75019-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement (See below)	REIMBURSEMENT (SEE BELOW)
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Costco	Transaction ID: 71120.E8382 Date of Disbursement 10 / 19 / 2007
	Mailing Address 5300 Overton Ridge Blvd.	Amount of Each Disbursement this Period 57.94
	City Fort Worth State TX Zip Code 76132-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Plates/Cups/Food & Beverage	[MEMO ITEM] MEMO: PLATES/CUPS/FOOD & BEVERAGE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sams Club	Transaction ID: 71120.E8381 Date of Disbursement 10 / 19 / 2007
	Mailing Address P O Box 9001907	Amount of Each Disbursement this Period 21.55
	City Louisville State KY Zip Code 40290-1907	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Plates/Cups/Food & Beverage	[MEMO ITEM] MEMO: PLATES/CUPS/FOOD & BEVERAGE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	79.49
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) Melody Parlett	Transaction ID: 71120.E8413 Date of Disbursement 11 / 01 / 2007
	Mailing Address 777 Fairway Dr., Apt 926	Amount of Each Disbursement this Period 1272.20
	City Coppel State TX Zip Code 75019-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SALARY

B.	Full Name (Last, First, Middle Initial) Melody Parlett	Transaction ID: 71120.E8430 Date of Disbursement 11 / 05 / 2007
	Mailing Address 777 Fairway Dr., Apt 926	Amount of Each Disbursement this Period 115.43
	City Coppel State TX Zip Code 75019-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Mileage Reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MILEAGE REIMBURSEMENT

C.	Full Name (Last, First, Middle Initial) Melody Parlett	Transaction ID: 71120.E8436 Date of Disbursement 11 / 15 / 2007
	Mailing Address 777 Fairway Dr., Apt 926	Amount of Each Disbursement this Period 1272.20
	City Coppel State TX Zip Code 75019-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SALARY

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2659.83
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.

Full Name (Last, First, Middle Initial)  
Melody Parlett

Mailing Address 777 Fairway Dr., Apt 926

City State Zip Code  
Coppell TX 75019-

Purpose of Disbursement

Salary

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 71207.E8453

Date of Disbursement

11 / 30 / 2007

Amount of Each Disbursement this Period

1272.20

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

SALARY

B.

Full Name (Last, First, Middle Initial)  
Melody Parlett

Mailing Address 777 Fairway Dr., Apt 926

City State Zip Code  
Coppell TX 75019-

Purpose of Disbursement  
Reimbursement (See Below)

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80107.E8485

Date of Disbursement

12 / 07 / 2007

Amount of Each Disbursement this Period

1142.59

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

REIMBURSEMENT (SEE BELOW)

C.

Full Name (Last, First, Middle Initial)  
Sams Club

Mailing Address P O Box 9001907

City State Zip Code  
Louisville KY 40290-1907

Purpose of Disbursement  
Event Expense/Food & Beverage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80107.E8486

Date of Disbursement

12 / 07 / 2007

Amount of Each Disbursement this Period

1142.59

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

[MEMO ITEM]

MEMO: EVENT EXPENSE/FOOD & BEVERAGE

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

2414.79

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) Melody Parlett	Transaction ID: 80107.E8503 Date of Disbursement 12 / 14 / 2007
	Mailing Address 777 Fairway Dr., Apt 926	Amount of Each Disbursement this Period 1551.00
	City Coppell State TX Zip Code 75019-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SALARY

B.	Full Name (Last, First, Middle Initial) Melody Parlett	Transaction ID: 80107.E8502 Date of Disbursement 12 / 14 / 2007
	Mailing Address 777 Fairway Dr., Apt 926	Amount of Each Disbursement this Period 1272.20
	City Coppell State TX Zip Code 75019-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SALARY

C.	Full Name (Last, First, Middle Initial) Philip Combs Design Inc.	Transaction ID: 71009.E8356 Date of Disbursement 10 / 05 / 2007
	Mailing Address 1600 Alston Ave.	Amount of Each Disbursement this Period 81.13
	City Fort Worth State TX Zip Code 76104-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Flowers Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FLOWERS

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2904.33
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) Philip Combs Design Inc.	Transaction ID: 71120.E8389 Date of Disbursement 10 / 26 / 2007
	Mailing Address 1600 Alston Ave.	Amount of Each Disbursement this Period 183.92
	City Fort Worth State TX Zip Code 76104-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Flowers	Category/Type FLOWERS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kasey S. Pipes	Transaction ID: 71009.E8342 Date of Disbursement 10 / 01 / 2007
	Mailing Address 3580 West 4th	Amount of Each Disbursement this Period 3423.92
	City Fort Worth State TX Zip Code 76107-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary	Category/Type SALARY
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Kasey S. Pipes	Transaction ID: 71120.E8414 Date of Disbursement 11 / 01 / 2007
	Mailing Address 3580 West 4th	Amount of Each Disbursement this Period 3423.92
	City Fort Worth State TX Zip Code 76107-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary	Category/Type SALARY
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7031.76</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Kasey S. Pipes			<b>Transaction ID:</b> 71207.E8454	
	Mailing Address 3580 West 4th			Date of Disbursement 11 / 30 / 2007	
	City Fort Worth	State TX	Zip Code 76107-	Amount of Each Disbursement this Period 3423.92	
	Purpose of Disbursement Salary		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		<b>SALARY</b>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
<b>B.</b>	Full Name (Last, First, Middle Initial) Pitney Bowes			<b>Transaction ID:</b> 71120.E8370	
	Mailing Address PO Box 856460			Date of Disbursement 10 / 15 / 2007	
	City Louisville	State KY	Zip Code 40285-6460	Amount of Each Disbursement this Period 197.73	
	Purpose of Disbursement Meter Rental		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		<b>METER RENTAL</b>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
<b>C.</b>	Full Name (Last, First, Middle Initial) Pitney Bowes			<b>Transaction ID:</b> 80107.E8510	
	Mailing Address PO Box 856460			Date of Disbursement 12 / 14 / 2007	
	City Louisville	State KY	Zip Code 40285-6460	Amount of Each Disbursement this Period 168.73	
	Purpose of Disbursement Meter Rental		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		<b>METER RENTAL</b>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					

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

3790.38

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) Print Central Inc.	Transaction ID: 71009.E8362 Date of Disbursement 10 / 05 / 2007
	Mailing Address 7124 Mid Cities Blvd.	Amount of Each Disbursement this Period 735.44
	City North Richland Hil State TX Zip Code 76180-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing	Category/Type
	Candidate Name	PRINTING
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Print Central Inc.	Transaction ID: 71120.E8426 Date of Disbursement 11 / 05 / 2007
	Mailing Address 7124 Mid Cities Blvd.	Amount of Each Disbursement this Period 912.74
	City North Richland Hil State TX Zip Code 76180-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing	Category/Type
	Candidate Name	PRINTING
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rent A Frog Valet, LLC	Transaction ID: 71009.E8354 Date of Disbursement 10 / 05 / 2007
	Mailing Address P O Box 100384	Amount of Each Disbursement this Period 270.63
	City Fort Worth State TX Zip Code 76185-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Event Cost/Parking	Category/Type
	Candidate Name	EVENT COST/PARKING
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1918.81</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.

Full Name (Last, First, Middle Initial)  
Rent A Frog Valet, LLC

Transaction ID: 71120.E8373  
Date of Disbursement

Mailing Address P O Box 100384

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

City State Zip Code  
Fort Worth TX 76185-

Amount of Each Disbursement this Period

434.75
--------

Purpose of Disbursement  
Event Cost/Parking  
Candidate Name

Category/  
Type

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

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

EVENT COST/PARKING

B.

Full Name (Last, First, Middle Initial)  
Rent A Frog Valet, LLC

Transaction ID: 80107.E8508  
Date of Disbursement

Mailing Address P O Box 100384

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

City State Zip Code  
Fort Worth TX 76185-

Amount of Each Disbursement this Period

320.63
--------

Purpose of Disbursement  
Event Cost/Parking  
Candidate Name

Category/  
Type

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

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

EVENT COST/PARKING

C.

Full Name (Last, First, Middle Initial)  
Republican Party of Texas

Transaction ID: 71207.E8449  
Date of Disbursement

Mailing Address 900 Congress Avenue, Suite 300

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

City State Zip Code  
Austin TX 78701-

Amount of Each Disbursement this Period

3125.00
---------

Purpose of Disbursement  
Filing Fee  
Candidate Name

Category/  
Type

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

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FILING FEE

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

3880.38

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Sams Club  Mailing Address P O Box 9001907  City Louisville State KY Zip Code 40290-1907  Purpose of Disbursement Membership Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80107.E8505 Date of Disbursement 12 / 14 / 2007  Amount of Each Disbursement this Period 70.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>MEMBERSHIP FEE</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Sprint  Mailing Address PO Box 54977  City Los Angeles State CA Zip Code 90054-0977  Purpose of Disbursement Phone Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80107.E8495 Date of Disbursement 12 / 07 / 2007  Amount of Each Disbursement this Period 383.64  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>PHONE</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Taylors Rental  Mailing Address 220 University Drive  City Fort Worth State TX Zip Code 76107-  Purpose of Disbursement Event Expense/Equipment Rental Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71120.E8384 Date of Disbursement 10 / 19 / 2007  Amount of Each Disbursement this Period 318.26  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>EVENT EXPENSE/EQUIPMENT RENTAL</b>

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

**771.90**

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
Taylors Rental

Mailing Address 220 University Drive

City Fort Worth State TX Zip Code 76107-

Purpose of Disbursement  
Event Expense/Equipment Rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 80107.E8509  
Date of Disbursement  
12 / 14 / 2007

Amount of Each Disbursement this Period  
27.06

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

EVENT EXPENSE/EQUIPMENT RENTAL

**B.**

Full Name (Last, First, Middle Initial)  
TCU Florist

Mailing Address 3131 S. University Drive

City Fort Worth State TX Zip Code 76109-

Purpose of Disbursement  
Flowers

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 71120.E8418  
Date of Disbursement  
11 / 05 / 2007

Amount of Each Disbursement this Period  
64.90

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

FLOWERS

**C.**

Full Name (Last, First, Middle Initial)  
Texas Weekly

Mailing Address P. O. Box 90038

City Austin State TX Zip Code 78709-

Purpose of Disbursement  
Subscription

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 71120.E8372  
Date of Disbursement  
10 / 19 / 2007

Amount of Each Disbursement this Period  
250.00

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

SUBSCRIPTION

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 341.96

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.

Full Name (Last, First, Middle Initial)  
TXU Energy

Mailing Address P.O. Box 100001

City Dallas State TX Zip Code 75310-

Purpose of Disbursement  
Office Expense - Electric

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 71009.E8352  
Date of Disbursement

10 / 05 / 2007

Amount of Each Disbursement this Period

284.20

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

OFFICE EXPENSE - ELECTRIC

B.

Full Name (Last, First, Middle Initial)  
TXU Energy

Mailing Address P.O. Box 100001

City Dallas State TX Zip Code 75310-

Purpose of Disbursement  
Office Expense - Electric

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 71120.E8416  
Date of Disbursement

11 / 05 / 2007

Amount of Each Disbursement this Period

239.17

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

OFFICE EXPENSE - ELECTRIC

C.

Full Name (Last, First, Middle Initial)  
TXU Energy

Mailing Address P.O. Box 100001

City Dallas State TX Zip Code 75310-

Purpose of Disbursement  
Office Expense - Electric

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 80107.E8498  
Date of Disbursement

12 / 10 / 2007

Amount of Each Disbursement this Period

237.90

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

OFFICE EXPENSE - ELECTRIC

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

761.27

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

<b>A.</b> Full Name (Last, First, Middle Initial) United Parcel Service UPS Mailing Address Lockbox 577 City Carol Stream State IL Zip Code 60132-0577 Purpose of Disbursement Delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 71009.E8345 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 7
	Amount of Each Disbursement this Period 12.25
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	DELIVERY

<b>B.</b> Full Name (Last, First, Middle Initial) United Parcel Service UPS Mailing Address Lockbox 577 City Carol Stream State IL Zip Code 60132-0577 Purpose of Disbursement Delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 71009.E8363 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 7
	Amount of Each Disbursement this Period 75.91
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	DELIVERY

<b>C.</b> Full Name (Last, First, Middle Initial) United Parcel Service UPS Mailing Address Lockbox 577 City Carol Stream State IL Zip Code 60132-0577 Purpose of Disbursement Delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 71120.E8371 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 7
	Amount of Each Disbursement this Period 67.12
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	DELIVERY

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	155.28
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) United Parcel Service UPS	Transaction ID: 71120.E8387
	Mailing Address Lockbox 577	Date of Disbursement 10 / 26 / 2007
	City Carol Stream State IL Zip Code 60132-0577	Amount of Each Disbursement this Period 22.34
	Purpose of Disbursement Delivery	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DELIVERY

B.	Full Name (Last, First, Middle Initial) United Parcel Service UPS	Transaction ID: 71120.E8429
	Mailing Address Lockbox 577	Date of Disbursement 11 / 05 / 2007
	City Carol Stream State IL Zip Code 60132-0577	Amount of Each Disbursement this Period 67.02
	Purpose of Disbursement Delivery	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DELIVERY

C.	Full Name (Last, First, Middle Initial) United Parcel Service UPS	Transaction ID: 71120.E8438
	Mailing Address Lockbox 577	Date of Disbursement 11 / 16 / 2007
	City Carol Stream State IL Zip Code 60132-0577	Amount of Each Disbursement this Period 93.96
	Purpose of Disbursement Delivery	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DELIVERY

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>183.32</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

<b>A.</b> Full Name (Last, First, Middle Initial) United Parcel Service UPS Mailing Address Lockbox 577	Transaction ID: 71207.E8458 Date of Disbursement 11 / 30 / 2007	
	Amount of Each Disbursement this Period 22.83 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>DELIVERY</b>	
City Carol Stream State IL Zip Code 60132-0577 Purpose of Disbursement Delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

<b>B.</b> Full Name (Last, First, Middle Initial) United Parcel Service UPS Mailing Address Lockbox 577	Transaction ID: 80107.E8493 Date of Disbursement 12 / 07 / 2007	
	Amount of Each Disbursement this Period 12.47 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>DELIVERY</b>	
City Carol Stream State IL Zip Code 60132-0577 Purpose of Disbursement Delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

<b>C.</b> Full Name (Last, First, Middle Initial) United Parcel Service UPS Mailing Address Lockbox 577	Transaction ID: 80107.E8511 Date of Disbursement 12 / 26 / 2007	
	Amount of Each Disbursement this Period 145.42 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>DELIVERY</b>	
City Carol Stream State IL Zip Code 60132-0577 Purpose of Disbursement Delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>180.72</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Key Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: 71120.E8376 Date of Disbursement 10 / 19 / 2007
	Mailing Address Downtown Station	Amount of Each Disbursement this Period 108.00
	City Fort Worth State TX Zip Code 76101-9999	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement PO Box Rental Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type PO BOX RENTAL
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Valentine Direct Marketing	Transaction ID: 71120.E8422 Date of Disbursement 11 / 05 / 2007
	Mailing Address 5415 Maple Ave. Suite 230	Amount of Each Disbursement this Period 538.30
	City Dallas State TX Zip Code 75235-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing & Mailing Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type PRINTING & MAILING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Kim Watts	Transaction ID: 80107.E8507 Date of Disbursement 12 / 14 / 2007
	Mailing Address 1221 Longhorn Drive	Amount of Each Disbursement this Period 2377.42
	City Lewisville State TX Zip Code 75067-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Catering/Flowers/Photos Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type CATERING/FLOWERS/PHOTOS
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3023.72</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Wiley Rein LLP <hr/> Mailing Address 1776 K Street, NW <hr/> City Washington State DC Zip Code 20006- <hr/> Purpose of Disbursement Legal Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71009.E8360 Date of Disbursement 10 / 05 / 2007 <hr/> Amount of Each Disbursement this Period 3001.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 LEGAL SERVICES
<b>B.</b>	Full Name (Last, First, Middle Initial) Wiley Rein LLP <hr/> Mailing Address 1776 K Street, NW <hr/> City Washington State DC Zip Code 20006- <hr/> Purpose of Disbursement Legal Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71120.E8420 Date of Disbursement 11 / 05 / 2007 <hr/> Amount of Each Disbursement this Period 3001.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 LEGAL SERVICES
<b>C.</b>	Full Name (Last, First, Middle Initial) Wiley Rein LLP <hr/> Mailing Address 1776 K Street, NW <hr/> City Washington State DC Zip Code 20006- <hr/> Purpose of Disbursement Legal Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80107.E8490 Date of Disbursement 12 / 07 / 2007 <hr/> Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 LEGAL SERVICES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	9003.20
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	101999.13

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) Citizens for Classroom Excellence  Mailing Address Campaign Fort Worth Chamber of Commerce  City State Zip Code Fort Worth TX 76102-4997  Purpose of Disbursement DONATION  Candidate Name  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) ▼  State: District:	Transaction ID: 71120.E8424 Date of Disbursement 11 / 05 / 2007  Amount of Each Disbursement this Period 1000.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Fort Worth Club  Mailing Address 306 W. Seventh Street  City State Zip Code Fort Worth TX 76102-  Purpose of Disbursement CONTRIBUTION - EMPLOYEE FUND  Candidate Name  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) ▼  State: District:	Transaction ID: 80107.E8489 Date of Disbursement 12 / 07 / 2007  Amount of Each Disbursement this Period 50.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Jim Beckman for City Council  Mailing Address 2300 Medford Court East  City State Zip Code Fort Worth TX 76109-  Purpose of Disbursement NON FEDERAL CONTRIBUTION  Candidate Name  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) ▼  State: District:	Transaction ID: 71120.E8415 Date of Disbursement 11 / 02 / 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

A.	Full Name (Last, First, Middle Initial) National Republican Congressional Commi  Mailing Address 320 First Street, SE  City Washington State DC Zip Code 20003-  Purpose of Disbursement TRANSFER OF EXCESS FUNDS  Candidate Name  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) ▼  State: District:	Transaction ID: 71009.E8347 Date of Disbursement 10 / 04 / 2007  Amount of Each Disbursement this Period 10000.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) National Republican Congressional Commi  Mailing Address 320 First Street, SE  City Washington State DC Zip Code 20003-  Purpose of Disbursement TRANSFER OF EXCESS FUNDS  Candidate Name  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) ▼  State: District:	Transaction ID: 71120.E8432 Date of Disbursement 11 / 06 / 2007  Amount of Each Disbursement this Period 25000.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Rely on Your Beliefs Fund  Mailing Address 209 Pennsylvania Avenue SE  City Washington State DC Zip Code 20003-  Purpose of Disbursement CONTRIBUTION  Candidate Name  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) ▼  State: District:	Transaction ID: 71120.E8441 Date of Disbursement 11 / 16 / 2007  Amount of Each Disbursement this Period 2000.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	37000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 98 / 103

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

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NAME OF COMMITTEE (In Full)  
Kay Granger Campaign Fund

<b>A.</b> Full Name (Last, First, Middle Initial) Romney For President, Inc. <hr/> Mailing Address 585 Commercial Street <hr/> City Boston State MA Zip Code 02109- <hr/> Purpose of Disbursement INKIND - LIST EXPENSE <hr/> Candidate Name MITT ROMNEY <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: 00 District: 00 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/> Category/ Type	Transaction ID: 71120.E8442 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 7 <hr/> Amount of Each Disbursement this Period 500.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO:Inkind - List Expense
	Full Name (Last, First, Middle Initial) Glen Whitley Campaign <hr/> Mailing Address 345 Charleston Place <hr/> City Hurst State TX Zip Code 76054- <hr/> Purpose of Disbursement NON FEDERAL CONTRIBUTION <hr/> 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) ▼ <hr/> Category/ Type

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

250.00

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

38800.00

**SCHEDULE D (FEC Form 3 )**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 99 / 103
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 Kay Granger Campaign Fund

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Wiley Rein LLP	Nature of Debt (Purpose): Legal Services
Mailing Address 1776 K Street, NW	
City State ZIP Code Washington DC 20006-	

Outstanding Balance Beginning This Period 3001.60	<b>Transaction ID:</b> LS71009.E8360	
Amount Incurred This Period 0.00	Payment This Period 3001.60	Outstanding Balance at Close of This Period 0.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Wiley Rein LLP	Nature of Debt (Purpose): Legal Services
Mailing Address 1776 K Street, NW	
City State ZIP Code Washington DC 20006-	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID:</b> LS80121.E8563	
Amount Incurred This Period 3000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3000.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.	Nature of Debt (Purpose): Software/Database Support
Mailing Address 205 Pennsylvania Avenue, SE	
City State ZIP Code Washington DC 20003-	

Outstanding Balance Beginning This Period 1800.00	<b>Transaction ID:</b> LS71009.E8361	
Amount Incurred This Period 0.00	Payment This Period 1800.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	3000.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**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)  
Kay Granger Campaign Fund

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.	Nature of Debt (Purpose): Software/Database Support
Mailing Address 205 Pennsylvania Avenue, SE	
City State ZIP Code Washington DC 20003-	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID:</b> LS80121.E8560	
Amount Incurred This Period 1800.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1800.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Print Central Inc.	Nature of Debt (Purpose): Printing
Mailing Address 7124 Mid Cities Blvd.	
City State ZIP Code North Richland Hil TX 76180-	

Outstanding Balance Beginning This Period 735.44	<b>Transaction ID:</b> LS71009.E8362	
Amount Incurred This Period 0.00	Payment This Period 735.44	Outstanding Balance at Close of This Period 0.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Bellwether Consulting Group	Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 1775 I Street, NW Suite 700	
City State ZIP Code Washington DC 20006-	

Outstanding Balance Beginning This Period 4000.00	<b>Transaction ID:</b> LS71009.E8358	
Amount Incurred This Period 0.00	Payment This Period 4000.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>1800.00</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3 )**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 101 / 103
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 Kay Granger Campaign Fund

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Bellwether Consulting Group	Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 1775 I Street, NW Suite 700	
City State ZIP Code Washington DC 20006-	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID:</b> LS80121.E8564	
Amount Incurred This Period 2000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Bellwether Consulting Group	Nature of Debt (Purpose): Catering/Facsimile/Delivery/Travel
Mailing Address 1775 I Street, NW Suite 700	
City State ZIP Code Washington DC 20006-	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID:</b> LS80121.E8565	
Amount Incurred This Period 1022.59	Payment This Period 0.00	Outstanding Balance at Close of This Period 1022.59

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Koch & Hoos LLC	Nature of Debt (Purpose): Financial Services
Mailing Address P. O. Box 1154	
City State ZIP Code Alexandria VA 22313-	

Outstanding Balance Beginning This Period 3090.50	<b>Transaction ID:</b> LS71009.E8359	
Amount Incurred This Period 0.00	Payment This Period 3090.50	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	3022.59
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3 )**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 102 / 103
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 Kay Granger Campaign Fund

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Koch & Hoos LLC	Nature of Debt (Purpose): Financial Services
Mailing Address P. O. Box 1154	
City State ZIP Code Alexandria VA 22313-	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID:</b> LS80121.E8562	
Amount Incurred This Period 1284.95	Payment This Period 0.00	Outstanding Balance at Close of This Period 1284.95

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Lilly & Company	Nature of Debt (Purpose): Event Management/Invitations/Travel
Mailing Address 1005 Congress, Suite 910	
City State ZIP Code Austin TX 78701-	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID:</b> LS80121.E8559	
Amount Incurred This Period 6684.88	Payment This Period 0.00	Outstanding Balance at Close of This Period 6684.88

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Rose Group Marketing	Nature of Debt (Purpose): Printing & Mailing
Mailing Address 556 Silicon Dr., Suite 102	
City State ZIP Code Southlake TX 76092-	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID:</b> LS80121.E8566	
Amount Incurred This Period 3992.10	Payment This Period 0.00	Outstanding Balance at Close of This Period 3992.10

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	11961.93
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	19784.52
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	19784.52

Form/Schedule: **F3A**

Transaction ID:

Form 3Z-1 of the original 2007 Year-End disclosure report reflected \$657,704.95 in receipts, designated for the primary election, and \$45,318.23 in receipts, designated for the general election. To correct a database change in a previously reported memo entry, \$2,100 has been moved from the primary election column to the general election column. Accordingly, this report amends Form 3Z-1, such that primary receipts amount to \$655,604.95 and general election receipts amount to \$47,418.23.