

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
Jo Bonner for Congress Committee

ADDRESS (number and street) P.O.Box 851232
 Check if different than previously reported. (ACC) Mobile AL 36685

2. **FEC IDENTIFICATION NUMBER** C00375220
CITY **STATE** AL **ZIP CODE** 36685
STATE DISTRICT AL 01
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 11 04 2008 in the State of AL
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 04 01 2008 through 05 14 2008

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

Signature of Treasurer Electronically Filed by Mary Burke Liles Date 05 22 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

Jo Bonner for Congress Committee

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	5

D	D
1	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	43500.00	551928.49
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	43500.00	551928.49
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	23670.89	384718.27
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	67.32
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	23670.89	384650.95
8. Cash on Hand at Close of Reporting Period (from Line 27).....	503281.44	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name
Jo Bonner for Congress Committee

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	5

D	D
1	4

Y	Y	Y	Y
2	0	0	8

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

22750.00

290645.00

(ii) Unitemized.....

250.00

11010.00

(iii) TOTAL of contributions

23000.00

301655.00

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

20500.00

250273.49

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS (other than loans)

43500.00

551928.49

(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

0.00

0.00

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

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

0.00

67.32

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

375.87

8204.27

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

43875.87

560200.08

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	23670.89	384718.27
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	9000.00	99200.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	32670.89	483918.27

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	492076.46
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	43875.87
25. SUBTOTAL (add Line 23 and Line 24).....	535952.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	32670.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	503281.44

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 43
(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)
Jo Bonner for Congress Committee

A. Full Name (Last, First, Middle Initial)
Husain Abdulla

Mailing Address 7250 Belle Chase Dr

City State Zip Code
Mobile AL 36695-4327

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

Name of Employer Occupation
KZ Corporation owner

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 8

Transaction ID: 80517.C8487

Amount of Each Receipt this Period
2000.00

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

4300.00

B. Full Name (Last, First, Middle Initial)
Tracey Abdulla

Mailing Address 7250 Belle Chase Dr

City State Zip Code
Mobile AL 36695-4327

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
0 4 / 2 4 / 2 0 0 8

Transaction ID: 80517.C8488

Amount of Each Receipt this Period
1000.00

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

1000.00

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

Mailing Address 16 Pine Ridge Rd

City State Zip Code
Bedford NY 10506-2040

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

Name of Employer Occupation
McLagan Partners Consultant

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 8

Transaction ID: 80517.C8461

Amount of Each Receipt this Period
1000.00

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

1000.00

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

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

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

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

FOR LINE NUMBER: PAGE 6 / 43
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jo Bonner for Congress Committee

A. Full Name (Last, First, Middle Initial)
Chris Brown
 Mailing Address 116 Pinebrook Drive East
 City State Zip Code
 Mobile AL 36608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation physician
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 4 / 2 0 0 8
Transaction ID: 80517.C8460
 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)
Cynthia Brown
 Mailing Address 125 11th St SE
 City State Zip Code
 Washington DC 20003-3910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Brown and Company Occupation Federal Affairs
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 7 / 2 0 0 8
Transaction ID: 80517.C8492
 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)
Bill Cabaniss
 Mailing Address 3812 Forest Glen Drive
 City State Zip Code
 Birmingham AL 35213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation retired
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 4 / 2 0 0 8
Transaction ID: 80517.C8480
 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) ► 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 7 / 43

(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)
Jo Bonner for Congress Committee

A.

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

Mailing Address 908 Croton Drive

City State Zip Code
Alexandria VA 22308

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
The Livingston Group Government Affairs

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt 05 / 11 / 2008

Transaction ID: 80517.C8509

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)
Russell Carothers

Mailing Address P.O. Box 550

City State Zip Code
Winfield AL 35594

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Citizens Bank of Winfield Banking

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 05 / 04 / 2008

Transaction ID: 80517.C8489

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)
Louise Cohen

Mailing Address 22 Byron Ln

City State Zip Code
Larchmont NY 10538-1618

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
homemaker homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 04 / 24 / 2008

Transaction ID: 80517.C8462

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: (check only one)	PAGE 8 / 43
	<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)
Jo Bonner for Congress Committee

A.	Full Name (Last, First, Middle Initial) Ray Cole		Date of Receipt
	Mailing Address 2004 Rhode Island Ave		<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
	City	State	Zip Code
	Mc Lean	VA	22101-4921
	FEC ID number of contributing federal political committee. C		Transaction ID: 80517.C8491
Name of Employer Van Scoyoc & Associates		Occupation Governmental Affairs	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			1000.00
<input type="checkbox"/> Other (specify) ▼		<input type="text"/> 2750.00	Receipt
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Marc Cooper		Date of Receipt
	Mailing Address 101 Tekening Dr		<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
	City	State	Zip Code
	Tenafly	NJ	07670-1218
	FEC ID number of contributing federal political committee. C		Transaction ID: 80517.C8463
Name of Employer Peter J Solomon		Occupation Investments	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			1000.00
<input type="checkbox"/> Other (specify) ▼		<input type="text"/> 1000.00	Receipt
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Will Edington		Date of Receipt
	Mailing Address 1202 Essex Manor Court		<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
	City	State	Zip Code
	Alexandria	VA	22308
	FEC ID number of contributing federal political committee. C		Transaction ID: 80517.C8511
Name of Employer Edington, Peel & Assoc.		Occupation Consultant	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			250.00
<input type="checkbox"/> Other (specify) ▼		<input type="text"/> 1500.00	Receipt
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2250.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 43
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jo Bonner for Congress Committee

A. Full Name (Last, First, Middle Initial)
Robert Efroymson

Mailing Address 6508 Calle Candela NW

City State Zip Code
Albuquerque NM 87107-5608

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation investor

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

1000.00

Date of Receipt M M / D D / Y Y Y Y
04 / 24 / 2008

Transaction ID: 80517.C8464

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)
Alec Ellison

Mailing Address 2 Laurelwood Ct

City State Zip Code
Rye NY 10580-1986

FEC ID number of contributing federal political committee. C

Name of Employer Jeffries and Company Occupation Investments

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

1000.00

Date of Receipt M M / D D / Y Y Y Y
04 / 24 / 2008

Transaction ID: 80517.C8465

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)
Joe Fine

Mailing Address 423 S Hull St

City State Zip Code
Montgomery AL 36104-4275

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation Consultant

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

250.00

Date of Receipt M M / D D / Y Y Y Y
04 / 24 / 2008

Transaction ID: 80517.C8478

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) 2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 43

(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)
Jo Bonner for Congress Committee

A.

Full Name (Last, First, Middle Initial)
Ronnie Flippo

Mailing Address 9812 Falls Rd Ste 114-285

City State Zip Code
Rockville MD 20854-3976

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation
self Consultant

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

Date of Receipt MM / DD / YYYY
04 / 24 / 2008

Transaction ID: 80517.C8484

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)
Bob Geddie

Mailing Address 423 South Hull Street

City State Zip Code
Montgomery AL 36104

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation
self Consultant

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

Date of Receipt MM / DD / YYYY
04 / 24 / 2008

Transaction ID: 80517.C8477

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)
Stephen Harvey

Mailing Address 120 Ryan Ave

City State Zip Code
Mobile AL 36607-3228

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation
self ATTORNEY

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

Date of Receipt MM / DD / YYYY
04 / 24 / 2008

Transaction ID: 80517.C8482

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) 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 11 / 43

(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)
Jo Bonner for Congress Committee

A.

Full Name (Last, First, Middle Initial)
Bob Hurt

Mailing Address 2250 48th St NW

City Washington State DC Zip Code 20007-1035

FEC ID number of contributing federal political committee. C

Name of Employer: Hurt, Norton & Associates Occupation: Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt 05 / 07 / 2008

Transaction ID: 80517.C8501

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)
David Landau

Mailing Address 9 Colonial Rd

City White Plains State NY Zip Code 10605-2201

FEC ID number of contributing federal political committee. C

Name of Employer: LNK Partners Occupation: Investments

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 04 / 24 / 2008

Transaction ID: 80517.C8466

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)
Robin Laurie

Mailing Address PO Box 78

City Montgomery State AL Zip Code 36101-0078

FEC ID number of contributing federal political committee. C

Name of Employer: Balch Bingham Occupation: ATTORNEY

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 04 / 24 / 2008

Transaction ID: 80517.C8481

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) 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: (check only one)	PAGE 12 / 43
	<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)
Jo Bonner for Congress Committee

A.	Full Name (Last, First, Middle Initial) Alissa Mannis		Date of Receipt
	Mailing Address 130 Dorchester Rd		<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Scarsdale	NY	10583-6051
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer homemaker		Occupation homemaker	Transaction ID: 80517.C8468
Receipt For: 2008		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="2000.00"/>	<input type="text" value="2000.00"/>
<input type="checkbox"/> Other (specify) ▼			
			Receipt
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Barry Mannis		Date of Receipt
	Mailing Address 130 Dorchester Rd		<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Scarsdale	NY	10583-6051
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer self		Occupation private investor	Transaction ID: 80517.C8467
Receipt For: 2008		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>
<input type="checkbox"/> Other (specify) ▼			
			Receipt
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Jerry Marcus		Date of Receipt
	Mailing Address 12 Brayton Rd		<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Scarsdale	NY	10583-1420
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Bank of America		Occupation Investment Banker	Transaction ID: 80517.C8469
Receipt For: 2008		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>
<input type="checkbox"/> Other (specify) ▼			
			Receipt
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="4000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 43
(check only one)

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

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NAME OF COMMITTEE (In Full)
Jo Bonner for Congress Committee

A.

Full Name (Last, First, Middle Initial)
Randy Reiff

Mailing Address 200 East 72nd Street, #15F

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Bear Stearns Managing Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2008

Transaction ID: 80517.C8470

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)
Michael Sharp

Mailing Address 8162 Chancery Ct

City State Zip Code
Alexandria VA 22308-1511

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

Name of Employer Occupation
Sharp Consulting lobbyist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1795.00

Date of Receipt
MM / DD / YYYY
05 / 07 / 2008

Transaction ID: 80517.C8496

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)
Laurence Smith

Mailing Address 12 Oak Ln

City State Zip Code
Scarsdale NY 10583-1622

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

Name of Employer Occupation
HSBC Managing Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2008

Transaction ID: 80517.C8471

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) ► **2250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 43

(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)
Jo Bonner for Congress Committee

A.

Full Name (Last, First, Middle Initial)
David Staton

Mailing Address 968 Jaguar Drive

City Inwood State WV Zip Code 25428

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 05 / 07 / 2008

Transaction ID: 80517.C8500

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)
Larry Thead

Mailing Address 767 Wildwood Ave

City Mobile State AL Zip Code 36609-3073

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2008

Transaction ID: 80517.C8508

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)
Alan Weissman

Mailing Address 1 Larkin Plz

City Yonkers State NY Zip Code 10701-7081

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation Real Estate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 04 / 24 / 2008

Transaction ID: 80517.C8472

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)	1500.00
TOTAL This Period (last page this line number only)	22750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
Jo Bonner for Congress Committee

A.

Full Name (Last, First, Middle Initial)
Alabama Power Company PAC

Mailing Address Attn: Nick Sellers
P.O. Box 2641

City State Zip Code
Birmingham AL 35291

FEC ID number of contributing federal political committee. **C** C00077305

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
 0 4 / 2 4 / 2 0 0 8

Transaction ID: 80517.C8476

Amount of Each Receipt this Period
3000.00

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

B.

Full Name (Last, First, Middle Initial)
American College of Radiology PAC

Mailing Address 505 9th St NW Ste 910

City State Zip Code
Washington DC 20004-2155

FEC ID number of contributing federal political committee. **C** C00343459

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
 0 5 / 0 7 / 2 0 0 8

Transaction ID: 80517.C8497

Amount of Each Receipt this Period
2500.00

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

C.

Full Name (Last, First, Middle Initial)
American Road and Transportation PAC

Mailing Address 1219 28th St NW

City State Zip Code
Washington DC 20007-3362

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

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
 0 4 / 2 4 / 2 0 0 8

Transaction ID: 80517.C8479

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) ► **6500.00**

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 / 43
(check only one)

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

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NAME OF COMMITTEE (In Full)
Jo Bonner for Congress Committee

A. Full Name (Last, First, Middle Initial)
ASAPAC

Mailing Address Attn: Manuel Bonilla
1101 Vermont Avenue, NW, #606

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 0 8

Transaction ID: 80517.C8503

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)
CIBA PAC

Mailing Address 1825 I St NW Ste 400

City State Zip Code
Washington DC 20006-5415

FEC ID number of contributing federal political committee. **C** C00326033

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
0 5 / 0 7 / 2 0 0 8

Transaction ID: 80517.C8495

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)
Comm. for Advancement of Cotton

Mailing Address Attn: John Maguire
1521 New Hampshire Avenue, NW

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 2 / 2 0 0 8

Transaction ID: 80517.C8513

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 17 / 43

(check only one)

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

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NAME OF COMMITTEE (In Full)
Jo Bonner for Congress Committee

A.

Full Name (Last, First, Middle Initial)
General Dynamics PAC

Mailing Address 2941 Fairview Park Dr Ste 100

City State Zip Code
Falls Church VA 22042-4541

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 0 8

Transaction ID: 80517.C8505

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)
International Shipholding PAC

Mailing Address 650 Poydras St Ste 1700

City State Zip Code
New Orleans LA 70130-7228

FEC ID number of contributing federal political committee. **C** C00327122

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 0 8

Transaction ID: 80517.C8494

Amount of Each Receipt this Period

1000.00

Receipt

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

C.

Full Name (Last, First, Middle Initial)
National Community Pharmacist PAC

Mailing Address attn: Jim Hippe
100 Daingerfield Road

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 0 8

Transaction ID: 80517.C8499

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 18 / 43
(check only one)

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

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NAME OF COMMITTEE (In Full)
Jo Bonner for Congress Committee

A. Full Name (Last, First, Middle Initial)
Oldcastle Materials Inc. PAC

Mailing Address ATTN: Mr. John Hay
1055 Thomas Jefferson Street, NW #

City Washington State DC Zip Code 20007

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
05 / 07 / 2008

Transaction ID: 80517.C8504

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)
Podiatry PAC

Mailing Address Attn: Ben Wallner
9312 Old Georgetown Road

City Bethesda State MD Zip Code 20814

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2008

Transaction ID: 80517.C8486

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)
The FIREPAC

Mailing Address 1750 New York Avenue, NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C70002738

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
05 / 12 / 2008

Transaction ID: 80517.C8512

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) ▶ **4000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 43
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jo Bonner for Congress Committee

A. Full Name (Last, First, Middle Initial)
The Jones, Walker PAC

Mailing Address 201 Saint Charles Ave

City State Zip Code
New Orleans LA 70170-1000

FEC ID number of contributing federal political committee. **C** C00111534

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 7 / 2 0 0 8

Transaction ID: 80517.C8498

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)
The KochPAC

Mailing Address 655 15th St NW Ste 445

City State Zip Code
Washington DC 20005-5727

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 1 1 / 2 0 0 8

Transaction ID: 80517.C8507

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)
The Maersk PAC

Mailing Address 1530 Wilson Blvd Ste 650

City State Zip Code
Arlington VA 22209-2419

FEC ID number of contributing federal political committee. **C** C00217471

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 7 / 2 0 0 8

Transaction ID: 80517.C8493

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 20 / 43
(check only one)

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

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NAME OF COMMITTEE (In Full)
Jo Bonner for Congress Committee

A.

Full Name (Last, First, Middle Initial)
The Syngenta PAC

Mailing Address PO Box 15458

City State Zip Code
Wilmington DE 19850-5458

FEC ID number of contributing federal political committee. **C** C00363945

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
05 / 07 / 2008

Transaction ID: 80517.C8502

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)	▶	20500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 43
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15

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)
Jo Bonner for Congress Committee

A.

Full Name (Last, First, Middle Initial) Whitney Bank		Date of Receipt
Mailing Address 25 North Beltline Highway		<input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
City	State	Zip Code
Mobile	AL	36608-
FEC ID number of contributing federal political committee.		Transaction ID: 80517.C8506
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="375.87"/>
Occupation		Interest Received
Receipt For: 2008		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	
<input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	
	<input type="text" value="8204.27"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="375.87"/>
TOTAL This Period (last page this line number only)	<input type="text" value="375.87"/>

**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)
Jo Bonner for Congress Committee

A.	Full Name (Last, First, Middle Initial) The 116 Club Mailing Address 234 3rd St NE City Washington State DC Zip Code 20002-5756 Purpose of Disbursement itemize: meals 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: 80517.E3901 Date of Disbursement 04 / 22 / 2008 Amount of Each Disbursement this Period 25.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 : MEALS
B.	Full Name (Last, First, Middle Initial) Wintzells AJM Golf Tournmanet Mailing Address 958 Dauphin St City Mobile State AL Zip Code 36604-2532 Purpose of Disbursement event sponsorship 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: 80517.E3922 Date of Disbursement 05 / 07 / 2008 Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EVENT SPONSORSHIP
C.	Full Name (Last, First, Middle Initial) Coastal Conservation of Alabama Mailing Address Battleship Parkway City Mobile State AL Zip Code 36602- Purpose of Disbursement itemize: event fees 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: 80517.E3940 Date of Disbursement 05 / 11 / 2008 Amount of Each Disbursement this Period 85.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 : EVENT FEES

SUBTOTAL of Disbursements This Page (optional) ▶	360.00
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)
Jo Bonner for Congress Committee

A.

Full Name (Last, First, Middle Initial)

A AT&T

Mailing Address PO Box 740144

City Atlanta State GA Zip Code 30374-0144

Purpose of Disbursement
utilities

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: E3852

Date of Disbursement

04 / 01 / 2008

Amount of Each Disbursement this Period

222.63

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

UTILITIES

B.

Full Name (Last, First, Middle Initial)

A AT&T

Mailing Address PO Box 740144

City Atlanta State GA Zip Code 30374-0144

Purpose of Disbursement
utilities

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80517.E3917

Date of Disbursement

04 / 28 / 2008

Amount of Each Disbursement this Period

229.38

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

UTILITIES

C.

Full Name (Last, First, Middle Initial)

AT&T Mobility

Mailing Address P.O. Box 772349

City Ocala State FL Zip Code 34477-2349

Purpose of Disbursement
utilities

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: E3854

Date of Disbursement

04 / 01 / 2008

Amount of Each Disbursement this Period

213.76

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

UTILITIES

SUBTOTAL of Disbursements This Page (optional) ▶

665.77

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)
Jo Bonner for Congress Committee

<p>A. Full Name (Last, First, Middle Initial) AT&T Mobility</p> <p>Mailing Address P.O. Box 772349</p> <p>City Ocala State FL Zip Code 34477-2349</p> <p>Purpose of Disbursement utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80517.E3916</p> <p>Date of Disbursement 04 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 226.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>UTILITIES</p>
<p>B. Full Name (Last, First, Middle Initial) The Bienville Club</p> <p>Mailing Address 34th Floor, AmSouth Bank Building</p> <p>City Mobile State AL Zip Code 36602-</p> <p>Purpose of Disbursement event fees</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>Transaction ID: 80517.E3924</p> <p>Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 400.78</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>EVENT FEES</p>
<p>C. Full Name (Last, First, Middle Initial) The Capitol Hill Club</p> <p>Mailing Address 300 First Street SE</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement event fees</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>Transaction ID: 80517.E3923</p> <p>Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 1065.24</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>EVENT FEES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1692.52

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)
Jo Bonner for Congress Committee

A.

Full Name (Last, First, Middle Initial)
The Computer Broker

Mailing Address 1678 South Beltline Highway

City State Zip Code
Mobile AL 36693-

Purpose of Disbursement
itemize: computer maintenance
Candidate Name

Category/
Type

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

Transaction ID: 80517.E3898
Date of Disbursement

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

Amount of Each Disbursement this Period

47.50

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

: COMPUTER MAINTENANCE

B.

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

Mailing Address PO Box 530001

City State Zip Code
Atlanta GA 30353-0001

Purpose of Disbursement
credit card: meals
Candidate Name

Category/
Type

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

Transaction ID: E3851
Date of Disbursement

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

Amount of Each Disbursement this Period

268.84

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

CREDIT CARD: MEALS

C.

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

Mailing Address PO Box 530001

City State Zip Code
Atlanta GA 30353-0001

Purpose of Disbursement
event tickets
Candidate Name

Category/
Type

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

Transaction ID: 80517.E3893
Date of Disbursement

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

Amount of Each Disbursement this Period

200.00

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

EVENT TICKETS

SUBTOTAL of Disbursements This Page (optional) ▶

516.34

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Jo Bonner for Congress Committee

A.	Full Name (Last, First, Middle Initial) Beckhams Florist	Transaction ID: E3853 Date of Disbursement 04 / 01 / 2008
	Mailing Address 7850 Airport Boulevard	Amount of Each Disbursement this Period 332.64
	City Mobile State AL Zip Code 36608-	<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.	Full Name (Last, First, Middle Initial) Tom Hammond & As	Transaction ID: E3879 Date of Disbursement 04 / 06 / 2008
	Mailing Address P.O. Box 368	Amount of Each Disbursement this Period 1824.60
	City Falls Church State VA Zip Code 22040-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement political/fundraising fees 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) ▼
		POLITICAL/FUNDRAISING FEES

C.	Full Name (Last, First, Middle Initial) Tom Hammond & As	Transaction ID: 80517.E3915 Date of Disbursement 04 / 28 / 2008
	Mailing Address P.O. Box 368	Amount of Each Disbursement this Period 1879.68
	City Falls Church State VA Zip Code 22040-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement political/fundraising fees 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) ▼
		POLITICAL/FUNDRAISING FEES

SUBTOTAL of Disbursements This Page (optional)	▶	4036.92
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)
Jo Bonner for Congress Committee

A.	Full Name (Last, First, Middle Initial) Randy Hinaman	Transaction ID: E3850 Date of Disbursement 04 / 01 / 2008
	Mailing Address 703 Day Ln	Amount of Each Disbursement this Period 4000.00
	City Alexandria State VA Zip Code 22314-6248	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement political/fundraising fees 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) ▼
		POLITICAL/FUNDRAISING FEES

B.	Full Name (Last, First, Middle Initial) Randy Hinaman	Transaction ID: 80517.E3887 Date of Disbursement 04 / 14 / 2008
	Mailing Address 703 Day Ln	Amount of Each Disbursement this Period 681.47
	City Alexandria State VA Zip Code 22314-6248	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement travel expenses 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) ▼
		TRAVEL EXPENSES

C.	Full Name (Last, First, Middle Initial) Randy Hinaman	Transaction ID: 80517.E3900 Date of Disbursement 04 / 22 / 2008
	Mailing Address 703 Day Ln	Amount of Each Disbursement this Period 4000.00
	City Alexandria State VA Zip Code 22314-6248	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement political/fundraising fees 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) ▼
		POLITICAL/FUNDRAISING FEES

SUBTOTAL of Disbursements This Page (optional)	8681.47
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Jo Bonner for Congress Committee

A.	Full Name (Last, First, Middle Initial) MBNA Mastercard <hr/> Mailing Address P.O.Box 15019 <hr/> City Wilmington State DE Zip Code 19886- <hr/> Purpose of Disbursement itemize: meals 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: 80517.E3889 Date of Disbursement 04 / 14 / 2008 <hr/> Amount of Each Disbursement this Period 62.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 : MEALS
B.	Full Name (Last, First, Middle Initial) The Mobile County GOP <hr/> Mailing Address P.O. Box 16341 <hr/> City Mobile State AL Zip Code 36616- <hr/> Purpose of Disbursement event sponsorship 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: 80517.E3888 Date of Disbursement 04 / 14 / 2008 <hr/> 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 EVENT SPONSORSHIP
C.	Full Name (Last, First, Middle Initial) Scott Morgan <hr/> Mailing Address 63 Nack Lane <hr/> City Mobile State AL Zip Code 36608- <hr/> Purpose of Disbursement itemize: event 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: 80517.E3919 Date of Disbursement 05 / 05 / 2008 <hr/> Amount of Each Disbursement this Period 158.11 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 : EVENT SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶	720.43
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)
Jo Bonner for Congress Committee

A.	Full Name (Last, First, Middle Initial) The NRECA Mailing Address PO Box 758777 City Baltimore State MD Zip Code 21275-8777 Purpose of Disbursement room 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: 80517.E3895 Date of Disbursement 04 / 14 / 2008 Amount of Each Disbursement this Period 386.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ROOM RENTAL
B.	Full Name (Last, First, Middle Initial) Billy Powell Mailing Address P.O. Box 2499 City Montgomery State AL Zip Code 36102- Purpose of Disbursement event fees 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: E3856 Date of Disbursement 04 / 01 / 2008 Amount of Each Disbursement this Period 525.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EVENT FEES
C.	Full Name (Last, First, Middle Initial) Artcraft Press Mailing Address PO Box 7036 City Mobile State AL Zip Code 36670-0036 Purpose of Disbursement itemize: printing 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: E3855 Date of Disbursement 04 / 01 / 2008 Amount of Each Disbursement this Period 42.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 : PRINTING

SUBTOTAL of Disbursements This Page (optional) ▶	953.89
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Jo Bonner for Congress Committee

A.

Full Name (Last, First, Middle Initial)
Internal Revenue Service

Transaction ID: 80521.E3950
Date of Disbursement

Mailing Address Pennsylvania Avenue NW

/ /

City Washington State DC Zip Code 20005-

Amount of Each Disbursement this Period

Purpose of Disbursement
tax owed on interest income

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

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

TAX OWED ON INTEREST INCOME

State: District:

B.

Full Name (Last, First, Middle Initial)
Visa VISA

Transaction ID: 80517.E3899
Date of Disbursement

Mailing Address P. O. Box 11407

/ /

City Birmingham State AL Zip Code 35246-

Amount of Each Disbursement this Period

Purpose of Disbursement
credit card: gifts

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

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

CREDIT CARD: GIFTS

State: District:

C.

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

Transaction ID: 80517.E3886
Date of Disbursement

Mailing Address 25 North Beltline Highway

/ /

City Mobile State AL Zip Code 36608-

Amount of Each Disbursement this Period

Purpose of Disbursement
credit card: see below

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

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

CREDIT CARD: SEE BELOW

State: District:

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)
Jo Bonner for Congress Committee

A.

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

Mailing Address P.O. Box 772349

City Ocala State FL Zip Code 34477-2349

Purpose of Disbursement
itemize supplies
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80517.E3908
Date of Disbursement

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

Amount of Each Disbursement this Period

69.98

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

[MEMO ITEM]
MEMO: SUPPLIES

B.

Full Name (Last, First, Middle Initial)
Rocklands Barbeque

Mailing Address 4751 Wilson Blvd

City Arlington State VA Zip Code 22203-1513

Purpose of Disbursement
event supplies
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80517.E3909
Date of Disbursement

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

Amount of Each Disbursement this Period

289.07

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

[MEMO ITEM]
MEMO: EVENT SUPPLIES

C.

Full Name (Last, First, Middle Initial)
Bed Bath and Beyond

Mailing Address Montlimar Drive

City Mobile State AL Zip Code 36609-

Purpose of Disbursement
itemize: event supplies
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80517.E3905
Date of Disbursement

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

Amount of Each Disbursement this Period

65.33

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

[MEMO ITEM]
MEMO: : EVENT SUPPLIES

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)
Jo Bonner for Congress Committee

A.	Full Name (Last, First, Middle Initial) D Delta	Transaction ID: 80517.E3902 Date of Disbursement 04 / 24 / 2008
	Mailing Address PO Box 20706	Amount of Each Disbursement this Period 993.00
	City Atlanta State GA Zip Code 30320-6001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement airfare	[MEMO ITEM] MEMO: AIRFARE
	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) Mobile Fixture	Transaction ID: 80517.E3906 Date of Disbursement 04 / 24 / 2008
	Mailing Address Montlimar Drive	Amount of Each Disbursement this Period 204.24
	City Mobile State AL Zip Code 36609-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement itemize: event supplies	[MEMO ITEM] MEMO: : EVENT SUPPLIES
	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) Cleveland the Florist	Transaction ID: 80517.E3904 Date of Disbursement 04 / 24 / 2008
	Mailing Address Airport Boulevard	Amount of Each Disbursement this Period 94.78
	City Mobile State AL Zip Code 36608-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement itemize: flowers	[MEMO ITEM] MEMO: : 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) ▼

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)
Jo Bonner for Congress Committee

A.	Full Name (Last, First, Middle Initial) U.S. House Gift Shop	Transaction ID: 80517.E3907 Date of Disbursement 04 / 24 / 2008
	Mailing Address Longworth HOB	Amount of Each Disbursement this Period 142.54
	City Washington State DC Zip Code 20515-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement itemize: gifts	[MEMO ITEM] MEMO: : GIFTS
	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) Congressional Liquors	Transaction ID: 80517.E3903 Date of Disbursement 04 / 24 / 2008
	Mailing Address 404 First Street, SE	Amount of Each Disbursement this Period 185.29
	City Washington State DC Zip Code 20003-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement itemize: event supplies	[MEMO ITEM] MEMO: : EVENT SUPPLIES
	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) M Macys	Transaction ID: 80517.E3914 Date of Disbursement 04 / 24 / 2008
	Mailing Address 1000 S Hayes St	Amount of Each Disbursement this Period 135.84
	City Arlington State VA Zip Code 22202-4901	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement itemize: gifts	[MEMO ITEM] MEMO: : GIFTS
	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) ▶

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)
Jo Bonner for Congress Committee

A.	Full Name (Last, First, Middle Initial) Quick Messenger service	Transaction ID: 80517.E3911 Date of Disbursement 04 / 24 / 2008
	Mailing Address: Pennsylvania Avenue	Amount of Each Disbursement this Period: 30.62
	City: Washington State: DC Zip Code: 20005-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement itemize: courier service	[MEMO ITEM] MEMO: : COURIER SERVICE
	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) Shell Oil	Transaction ID: 80517.E3913 Date of Disbursement 04 / 24 / 2008
	Mailing Address: Highway 59	Amount of Each Disbursement this Period: 75.00
	City: Gulf Shores State: AL Zip Code: 36547-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement itemize: gasoline	[MEMO ITEM] MEMO: : GASOLINE
	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) Ten Penh	Transaction ID: 80517.E3910 Date of Disbursement 04 / 24 / 2008
	Mailing Address: 1001 Pennsylvania Avenue, NW	Amount of Each Disbursement this Period: 168.20
	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 itemize: meals	[MEMO ITEM] MEMO: : MEALS
	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)	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)
Jo Bonner for Congress Committee

A.

Full Name (Last, First, Middle Initial)

Restaurant Three

Mailing Address Clarendon BOulevard

City Arlington State VA Zip Code 22202-

Purpose of Disbursement meals

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80517.E3912

Date of Disbursement

04 / 24 / 2008

Amount of Each Disbursement this Period

411.45

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

[MEMO ITEM]
MEMO: MEALS

B.

Full Name (Last, First, Middle Initial)

Whitney Bank

Mailing Address 25 North Beltline Highway

City Mobile State AL Zip Code 36608-

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: 80517.E3921

Date of Disbursement

05 / 07 / 2008

Amount of Each Disbursement this Period

1877.88

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)

AT&T Mobility

Mailing Address P.O. Box 772349

City Ocala State FL Zip Code 34477-2349

Purpose of Disbursement itemize: equipment

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80517.E3927

Date of Disbursement

05 / 07 / 2008

Amount of Each Disbursement this Period

32.69

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

[MEMO ITEM]
MEMO: : EQUIPMENT

SUBTOTAL of Disbursements This Page (optional)

1877.88

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Jo Bonner for Congress Committee

A.

Full Name (Last, First, Middle Initial)
Party City

Mailing Address Airport Boulevard

City State Zip Code
Mobile AL 36609-

Purpose of Disbursement
itemize: supplies
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 80517.E3933
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	0	8

Amount of Each Disbursement this Period

136.00

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

[MEMO ITEM]

MEMO: ITEMIZE: SUPPLIES

B.

Full Name (Last, First, Middle Initial)
F Federal Express

Mailing Address 840 Lakeside Dr

City State Zip Code
Mobile AL 36693-5116

Purpose of Disbursement
itemize: shipping
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 80517.E3931
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	0	8

Amount of Each Disbursement this Period

25.74

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

[MEMO ITEM]

MEMO: : SHIPPING

C.

Full Name (Last, First, Middle Initial)
Rosemont Florist

Mailing Address 2210 Rosemont Place

City State Zip Code
Montgomery AL 36106-

Purpose of Disbursement
itemize: flowers
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 80517.E3928
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	0	8

Amount of Each Disbursement this Period

112.20

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

[MEMO ITEM]

MEMO: : FLOWERS

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)
Jo Bonner for Congress Committee

A.

Full Name (Last, First, Middle Initial)
Raceway Gas

Mailing Address Eastern Bypass

City Montgomery State AL Zip Code 36106-

Purpose of Disbursement
itemize: gas

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80517.E3925
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

[MEMO ITEM]
MEMO: : GAS

B.

Full Name (Last, First, Middle Initial)
PYA Monarch

Mailing Address 1500 South Beltline Highway

City Mobile State AL Zip Code 36693-

Purpose of Disbursement
itemize: supplies

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80517.E3936
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

[MEMO ITEM]
MEMO: : SUPPLIES

C.

Full Name (Last, First, Middle Initial)
M Mosleys Meat Market

Mailing Address 4678 Airport Boulevard

City Mobile State AL Zip Code 36608-

Purpose of Disbursement
itemize: supplies

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80517.E3935
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

[MEMO ITEM]
MEMO: : SUPPLIES

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)

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

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NAME OF COMMITTEE (In Full)
Jo Bonner for Congress Committee

A.	Full Name (Last, First, Middle Initial) PMT Publishing	Transaction ID: 80517.E3930 Date of Disbursement 05 / 07 / 2008
	Mailing Address 3729 Cottage Hill Rd	Amount of Each Disbursement this Period 54.90
	City Mobile State AL Zip Code 36609-6500	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: : SUPPLIES
	Purpose of Disbursement itemize: supplies 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) Harrys Tap Room	Transaction ID: 80517.E3932 Date of Disbursement 05 / 07 / 2008
	Mailing Address Clarendon Boulevard	Amount of Each Disbursement this Period 514.80
	City Arlington State VA Zip Code 22207-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: MEALS
	Purpose of Disbursement itemize: meals 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) Ristorante Tosca	Transaction ID: 80517.E3937 Date of Disbursement 05 / 07 / 2008
	Mailing Address F Street, NW	Amount of Each Disbursement this Period 220.80
	City Washington State DC Zip Code 20005-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: MEALS
	Purpose of Disbursement itemize: meals Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

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)
Jo Bonner for Congress Committee

A.	Full Name (Last, First, Middle Initial) U.S. Postal Service	Transaction ID: 80517.E3926 Date of Disbursement 05 / 07 / 2008
	Mailing Address 3410 Bel Air Mall	Amount of Each Disbursement this Period 410.00
	City Mobile State Zip Code AL 36606-3402	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement postage	[MEMO ITEM] MEMO: POSTAGE
	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) W Wal-Mart	Transaction ID: 80517.E3934 Date of Disbursement 05 / 07 / 2008
	Mailing Address 3725 Airport Boulevard	Amount of Each Disbursement this Period 224.23
	City Mobile State Zip Code AL 36608-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement supplies	[MEMO ITEM] MEMO: SUPPLIES
	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) Whitney Bank	Transaction ID: 80517.E3938 Date of Disbursement 05 / 07 / 2008
	Mailing Address 25 North Beltline Highway	Amount of Each Disbursement this Period 35.00
	City Mobile State Zip Code AL 36608-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement itemize: annual card fee	[MEMO ITEM] MEMO: : ANNUAL CARD FEE
	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)	0.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Jo Bonner for Congress Committee

A.

Full Name (Last, First, Middle Initial)
Bill Yeager Memorial Tournament

Mailing Address 50 Bienville Ave

City State Zip Code
Mobile AL 36606-1406

Purpose of Disbursement
event sponsorship

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80517.E3894

Date of Disbursement

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

Amount of Each Disbursement this Period

150.00

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

EVENT SPONSORSHIP

SUBTOTAL of Disbursements This Page (optional) ►

150.00

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

23670.89

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)
Jo Bonner for Congress Committee

A.

Full Name (Last, First, Middle Initial)
La-06 Congress Victory Cmt

Transaction ID: 80517.E3920
Date of Disbursement

Mailing Address 910 N Foster Dr

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

City Baton Rouge State LA Zip Code 70806-1807

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Category/ Type

Candidate Name
LOUIS (WOODY) JENKINS

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

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: LA District: 06

B.

Full Name (Last, First, Middle Initial)
Greg Davis for Congress

Transaction ID: 80517.E3890
Date of Disbursement

Mailing Address 5779 Getwell Rd Bldg D1

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

City Southaven State MS Zip Code 38672-6351

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Category/ Type

Candidate Name
CHARLES GREGORY DAVIS

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

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MS District: 01

C.

Full Name (Last, First, Middle Initial)
Greg Davis for Congress

Transaction ID: 80517.E3942
Date of Disbursement

Mailing Address 5779 Getwell Rd Bldg D1

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	0	8

City Southaven State MS Zip Code 38672-6351

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Category/ Type

Candidate Name
CHARLES GREGORY DAVIS

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

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MS District: 01

SUBTOTAL of Disbursements This Page (optional)

3000.00

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 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)
Jo Bonner for Congress Committee

A.	Full Name (Last, First, Middle Initial) John Gard for Congress Mailing Address PO Box 277 City Green Bay State WI Zip Code 54305-0277 Purpose of Disbursement CONTRIBUTION Candidate Name JOHN G GARD Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80517.E3896 Date of Disbursement 04 / 22 / 2008 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Gregg Harper for Congress Mailing Address 210 E Capitol St Ste 1262 City Jackson State MS Zip Code 39201-2300 Purpose of Disbursement CONTRIBUTION Candidate Name GREGG HARPER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 03 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80517.E3941 Date of Disbursement 05 / 11 / 2008 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Manion for Congress Mailing Address PO Box 28 City Doylestown State PA Zip Code 18901-0028 Purpose of Disbursement CONTRIBUTION Candidate Name TOM MANION Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80517.E3944 Date of Disbursement 05 / 12 / 2008 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)
Jo Bonner for Congress Committee

A.	Full Name (Last, First, Middle Initial) Wayne Parker for Congress Mailing Address PO Box 16135 City Huntsville State AL Zip Code 35802-1663 Purpose of Disbursement CONTRIBUTION Candidate Name WAYNE PARKER, JR. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 05 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80517.E3891 Date of Disbursement 04 / 14 / 2008 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Friends of Eric Paulsen Mailing Address PO Box 44369 City Eden Prairie State MN Zip Code 55344-1369 Purpose of Disbursement CONTRIBUTION Candidate Name ERIK PAULSEN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80517.E3943 Date of Disbursement 05 / 12 / 2008 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Aaron Schock for Congress Mailing Address 1040 E Melbourne Ave City Peoria State IL Zip Code 61603-2026 Purpose of Disbursement CONTRIBUTION Candidate Name AARON SCHOCK Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 18 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80517.E3945 Date of Disbursement 05 / 12 / 2008 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	9000.00