

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

FRIENDS OF MAX BURNS

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	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)).....	286859.83	638320.70
(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)).....	286859.83	638320.70
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	88410.47	133615.46
(b) Total Offsets to Operating Expenditures (from Line 14).....	33.30	33.30
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	88377.17	133582.16
8. Cash on Hand at Close of Reporting Period (from Line 27).....	505919.32	
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).....	52678.08	

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 02/2003)

Write or Type Committee Name
 FRIENDS OF MAX BURNS

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

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).....

154550.00

343200.00

(ii) Unitemized.....

17006.85

39853.72

(iii) TOTAL of contributions

171556.85

383053.72

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

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

113202.98

253166.98

(d) The Candidate.....

2100.00

2100.00

(e) TOTAL CONTRIBUTIONS
 (other than loans)

286859.83

638320.70

(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.....

52678.08

52678.08

(c) TOTAL LOANS

52678.08

52678.08

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

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

33.30

33.30

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

894.20

1095.78

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

340465.41

692127.86

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	88410.47	133615.46
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	52593.08	52593.08
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.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	141003.55	186208.54

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	306457.46
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	340465.41
25. SUBTOTAL (add Line 23 and Line 24).....	646922.87
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	141003.55
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	505919.32

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

Name of Candidate		Candidate ID Number
O MAXIE BURNS		H2GA12097
Name of Principal Campaign Committee		Committee ID Number
FRIENDS OF MAX BURNS		C C00412544
Committee Address		
P.O. Box 1965		
City	State	ZIP
Sylvania	GA	30467
Report Covering Period (check one) <input type="checkbox"/> through June 30, or <input checked="" type="checkbox"/> through December 31 of the year preceding the year of the general election		
	Primary	General
1. Gross receipts of authorized committees	623427.86	66600.00
2. Aggregate amount of contributions from personal funds of the candidate	2100.00	0.00
3. Gross receipts minus the candidate's personal contributions	621327.86	66600.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Mrs. W. F. Mary Ann Abbott, III		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 5	
Mailing Address P. O. Box 3466		Transaction ID: SA11A1.6234	
City State Zip Code Augusta GA 30914	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Abbott Oil Co. Inc. Secretary/Treasurer	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. J. Michael Adams		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 9111 White Bluff Rd		Transaction ID: SA11A1.5494	
City State Zip Code Savannah GA 31406	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation unemployed unemployed	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Emma Morel Adler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 425 Bull St.		Transaction ID: SA11A1.5448	
City State Zip Code Savannah GA 31401	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Massie Heritage President	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: <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 type="checkbox"/> 15	PAGE 7 / 148
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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Leopold Adler, II

Mailing Address 425 Bull St.

City Savannah State GA Zip Code 31401

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: SA11A1.5460

Amount of Each Receipt this Period
 250.00

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

B. Full Name (Last, First, Middle Initial)
D. Wayne Akins, Jr.

Mailing Address P. O. Box 2828

City Statesboro State GA Zip Code 30459

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

Name of Employer Sea Island Bank Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.5951

Amount of Each Receipt this Period
 250.00

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

C. Full Name (Last, First, Middle Initial)
Donald W. Akins

Mailing Address 6633 Akins Pond Rd.

City Statesboro State GA Zip Code 30461

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: SA11A1.6065

Amount of Each Receipt this Period
 250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	750.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. David C. Allen		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 5	
Mailing Address 120 Trinity Place		Transaction ID: SA11A1.6063	
City Athens	State GA	Zip Code 30607	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
Name of Employer The Urology Clinic	Occupation Physician		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. David Allman		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 5	
Mailing Address 2661 Orchard Run N.		Transaction ID: SA11A1.6114	
City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
Name of Employer Regent Partners	Occupation Real Estate Investor		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) C. Charles J. Anderson		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 5	
Mailing Address P. O. Box 10027		Transaction ID: SA11A1.5741	
City Augusta	State GA	Zip Code 30903	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
Name of Employer Anderson Holding Co.	Occupation Logistics Provider		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Curtis G. Anderson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	
Mailing Address 44 Delegal Rd.		Transaction ID: SA11A1.5421	
City Savannah	State GA	Amount of Each Receipt this Period 2100.00	
Zip Code 31411		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer Anderson Capital Corp.	Occupation Owner		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00		

Full Name (Last, First, Middle Initial) B. Mark H. Anderson		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 5	
Mailing Address 502 Miller Street E		Transaction ID: SA11A1.5897	
City Statesboro	State GA	Amount of Each Receipt this Period 500.00	
Zip Code 30458		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer Joiner Anderson Funeral Home	Occupation Owner		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Jeff C. Annis		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 5	
Mailing Address 3773 Boulder Trl.		Transaction ID: SA11A1.6170	
City Martinez	State GA	Amount of Each Receipt this Period 150.00	
Zip Code 30907		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer Advanced Services, Inc.	Occupation Pest Management Professi		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 650.00		

SUBTOTAL of Receipts This Page (optional) ▶	2750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Khano Aranbayeva

Mailing Address 1450 Elm Creek Lane

City Norcross State GA Zip Code 30093

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

Name of Employer Jewish Council Occupation Director

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: SA11A1.5596

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Igor E. Aronov

Mailing Address 2366 Wilderness Way

City Marietta State GA Zip Code 30066

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

Name of Employer Emerson Performance Solution Occupation consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: SA11A1.5584

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
I. L. Aronson

Mailing Address P. O. Box 996

City Savannah State GA Zip Code 31402

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: SA11A1.5374

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Audrey A. Ashby

Mailing Address 3 Sassafras Trail

City Savannah State GA Zip Code 31404

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 6 / 2 0 0 5

Transaction ID: SA11A1.5527

Amount of Each Receipt this Period
 250.00

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

B. Full Name (Last, First, Middle Initial)
Clinton Ashford

Mailing Address 1750 S Lumpkin St.

City Athens State GA Zip Code 30606

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

Name of Employer self Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.5949

Amount of Each Receipt this Period
 1000.00

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

C. Full Name (Last, First, Middle Initial)
Bruce L. Avant

Mailing Address 115 Teresa Drive

City Statesboro State GA Zip Code 30461

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

Name of Employer First National Bank & Trust Occupation Banker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: SA11A1.5921

Amount of Each Receipt this Period
 250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Lena S. Baber		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 7 / 2 0 0 5
Mailing Address P. O. Box 49687		Transaction ID: SA11A1.5859
City State Zip Code Dayton OH 45449	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired Occupation Retired	Election Cycle-to-Date ▼ 1000.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1000.00	

Full Name (Last, First, Middle Initial) B. Craig Barrow, III		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 22 W. Bryan St., PM		Transaction ID: SA11A1.5443
City State Zip Code Savannah GA 31401	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Sterne Agee & Leach Occupation Stockbroker	Election Cycle-to-Date ▼ 250.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	250.00	

Full Name (Last, First, Middle Initial) C. John W. Barton		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 6 / 2 0 0 5
Mailing Address 5046 Hwy. 29 South		Transaction ID: SA11A1.5992
City State Zip Code Colbert GA 30628	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Athens Radiology Associates PC Occupation Physician	Election Cycle-to-Date ▼ 250.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	250.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Stephen R. Been

Mailing Address 326 2nd Ave. South

City State Zip Code
Naples FL 34102

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.6274

Amount of Each Receipt this Period
2100.00

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

B. Full Name (Last, First, Middle Initial)
Larry Benson

Mailing Address 1100 Tanglebrook Dr

City State Zip Code
Athens GA 30606

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

Name of Employer Benson's Bakery Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.6002

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Ann G. Berkovich

Mailing Address 9980 Bankside Drive

City State Zip Code
Roswell GA 30076

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

Name of Employer self Occupation homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: SA11A1.5566

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	3600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Bob Birchmore

Mailing Address 154 Oneta Street

City Athens State GA Zip Code 30601

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

Name of Employer Birchmore Pool & Spa Supplies Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.5938

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Joseph L. Bird

Mailing Address P. O. Box 81893

City Conyers State GA Zip Code 30013

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

Name of Employer Home Life Communities Occupation Division VP

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.6266

Amount of Each Receipt this Period
300.00

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

C. Full Name (Last, First, Middle Initial)
Clayton P. Boardman, III

Mailing Address P. O. Box 3366

City Augusta State GA Zip Code 30914

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

Name of Employer Augusta Capital, LLC Occupation Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.6185

Amount of Each Receipt this Period
1600.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2150.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 148 (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial) Eduard N. Bogachek Mailing Address 882 Hyde Road City State Zip Code Marietta GA 30068 FEC ID number of contributing federal political committee. C	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: SA11A1.5578 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>1000.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	0	5		1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1		0	1		2	0	0	5														
	1000.00																						
Name of Employer Occupation Georgia Institute of Technology Professor Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>1000.00</td> </tr> </table>		1000.00																				
	1000.00																						

B. Full Name (Last, First, Middle Initial) William Scott Bohlke Mailing Address 2620 Clito Rd. City State Zip Code Statesboro GA 30461 FEC ID number of contributing federal political committee. C	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: SA11A1.6051 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>500.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	6		2	0	0	5		500.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		1	6		2	0	0	5														
	500.00																						
Name of Employer Occupation Bohler & Bohlke Physician Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>500.00</td> </tr> </table>		500.00																				
	500.00																						

C. Full Name (Last, First, Middle Initial) Robert M. Boswell, III Mailing Address 155 Plum Nelly Driv City State Zip Code Athens GA 30606 FEC ID number of contributing federal political committee. C	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: SA11A1.6088 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>1000.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	1		2	0	0	5		1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		2	1		2	0	0	5														
	1000.00																						
Name of Employer Occupation Boswell Oil Owner Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>1000.00</td> </tr> </table>		1000.00																				
	1000.00																						

SUBTOTAL of Receipts This Page (optional) ▶	<table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>2500.00</td> </tr> </table>		2500.00
	2500.00		
TOTAL This Period (last page this line number only) ▶	<table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td></td> </tr> </table>		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Grier C. Bovard		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 5	
Mailing Address 2918 Lake Forest Dr		Transaction ID: SA11A1.6258	
City State Zip Code Augusta GA 30909	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Augusta Iron	Occupation President		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. James W. Boyles		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 6 / 2 0 0 5	
Mailing Address 1021 Maple Ct.		Transaction ID: SA11A1.5988	
City State Zip Code Athens GA 30606	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self	Occupation Financial Advisor		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Irvin A. Brannen, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 5	
Mailing Address Rt. 3, Box 236		Transaction ID: SA11A1.5886	
City State Zip Code Metter GA 30439	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self	Occupation contractor/farmer		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	1400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Joseph F. Bray		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 5	
Mailing Address 2915 Forest Close D		Transaction ID: SA11A1.6264	
City Duluth	State GA	Zip Code 30097	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Home Life Communities	Occupation Division VP	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 1000.00			

Full Name (Last, First, Middle Initial) B. Sharon M. Bromley		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 5	
Mailing Address 12 Marsh Harbor Cov		Transaction ID: SA11A1.5609	
City Savannah	State GA	Zip Code 31410	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Summit Cancer Care, P.C.	Occupation CEO	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 500.00			

Full Name (Last, First, Middle Initial) C. Bernard Brown		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 5	
Mailing Address P. O. Box 1686		Transaction ID: SA11A1.6103	
City Sylvania	State GA	Zip Code 30467	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Brown's Office Centre	Occupation Owner	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 300.00			

SUBTOTAL of Receipts This Page (optional) ▶	1550.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 148 (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

<p>A. Full Name (Last, First, Middle Initial) R. Edward Brown</p> <p>Mailing Address 645 Riverview Rd.</p> <p>City State Zip Code Athens GA 30606</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1100.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>2</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr> </table> </p> <p>Transaction ID: SA11A1.5864</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	7	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	0	7	/	2	0	0	5												

<p>B. Full Name (Last, First, Middle Initial) Tom Watson Brown</p> <p>Mailing Address 2859 Paces Ferry Rd</p> <p>City State Zip Code Atlanta GA 30339</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Occupation attorney</p> <p>Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>2</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr> </table> </p> <p>Transaction ID: SA11A1.6167</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	2	7	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	2	7	/	2	0	0	5												

<p>C. Full Name (Last, First, Middle Initial) Dann Bunn</p> <p>Mailing Address Turners Road Rd., R</p> <p>City State Zip Code Savannah GA 31410</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Pave-Tec Inc. Occupation President</p> <p>Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1050.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td>/</td><td>2</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr> </table> </p> <p>Transaction ID: SA11A1.5483</p> <p>Amount of Each Receipt this Period 1050.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	4	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	4	/	2	0	0	5												

SUBTOTAL of Receipts This Page (optional)	2550.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Dayle W. Burns

Mailing Address 5829 Clyo Kildare R

City State Zip Code
Newington GA 30446

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

Name of Employer Occupation
Effingham Co. Bd. Of Education Principal

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.5957

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 105 Post Oak Trail

City State Zip Code
Athens GA 30606

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

Name of Employer Occupation
Flowers Inc. Balloons Owner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.6270

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Katherine R. Byrne

Mailing Address 425 Milledge Cir.

City State Zip Code
Athens GA 30606

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

Name of Employer Occupation
self homemaker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.5998

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 148 (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

<p>A. Full Name (Last, First, Middle Initial) Lon M. Carnes, Jr.</p> <p>Mailing Address P. O. Box 1992</p> <p>City <u>Statesboro</u> State <u>GA</u> Zip Code <u>30459</u></p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer <u>Retired</u> Occupation <u>Retired</u></p> <p>Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt 11 / 01 / 2005</p> <p>Transaction ID: SA11A1.5598</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Lon M. Carnes, Jr.</p> <p>Mailing Address P. O. Box 1992</p> <p>City <u>Statesboro</u> State <u>GA</u> Zip Code <u>30459</u></p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer <u>Retired</u> Occupation <u>Retired</u></p> <p>Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 12 / 08 / 2005</p> <p>Transaction ID: SA11A1.5893</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Bobby Cartwright</p> <p>Mailing Address <u>2160 Talmadge Rd.</u></p> <p>City <u>Lovejoy</u> State <u>GA</u> Zip Code <u>30250</u></p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer <u>C & C Lovejoy, LLC</u> Occupation <u>Owner</u></p> <p>Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ .00</p>	<p>Date of Receipt 12 / 12 / 2005</p> <p>Transaction ID: SA11A1.6427</p> <p>Amount of Each Receipt this Period 200.00</p> <p>C & C Lovejoy LLC</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM]</p>
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SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
John E. Cay, III

Mailing Address 425 Worth Ave. At.

City State Zip Code
Palm Beach FL 33480

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

Name of Employer Occupation
Wachovia Insurance Svcs. Chairman

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2100.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.5501

Amount of Each Receipt this Period
2100.00

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

B. Full Name (Last, First, Middle Initial)
Lee Cheesborough

Mailing Address 511 Berckman Rd.

City State Zip Code
Augusta GA 30909

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

Name of Employer Occupation
C.A.T. Inc. Owner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1050.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.5505

Amount of Each Receipt this Period
1050.00

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

C. Full Name (Last, First, Middle Initial)
Patricia Cheesborough

Mailing Address 511 Berckman Rd.

City State Zip Code
Augusta GA 30909

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

Name of Employer Occupation
self Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1050.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.5513

Amount of Each Receipt this Period
1050.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **4200.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Cindia Cole		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 7 / 2 0 0 5	
Mailing Address 1071 Colorado Bnd		Transaction ID: SA11A1.5854	
City Bogart	State GA	Zip Code 30622	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self Employed	Occupation CPA	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 1000.00			

Full Name (Last, First, Middle Initial) B. J. Tom Coleman, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address P. O. Box 22398		Transaction ID: SA11A1.5397	
City Savannah	State GA	Zip Code 31403	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Bonitz of GA	Occupation CEO	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 1000.00			

Full Name (Last, First, Middle Initial) C. Don R. Connell		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 6 / 2 0 0 5	
Mailing Address 526 Highpoint Circl		Transaction ID: SA11A1.5965	
City Statesboro	State GA	Zip Code 30458	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Statesboro Imaging Center	Occupation Physician	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 500.00			

SUBTOTAL of Receipts This Page (optional) ▶	2000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Cynthia A. Connelly

Mailing Address 2937 Asteria Pointe

City State Zip Code
Duluth GA 30097

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

Name of Employer Occupation
GA Credit Union Affiliates Manager

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

550.00

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

Transaction ID: SA11A1.5576

Amount of Each Receipt this Period
550.00

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

B. Full Name (Last, First, Middle Initial)
Daniel R. Cook

Mailing Address 242 Amy Industrial

City State Zip Code
Hoschton GA 30548

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

Name of Employer Occupation
A. W. Cook Cement Products, Inc. Owner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

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

Transaction ID: SA11A1.6059

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Joey Cook

Mailing Address 3852 Poor Robin Rd.

City State Zip Code
Sylvania GA 30467

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

Name of Employer Occupation
Alltel Communications Manager

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

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

Transaction ID: SA11A1.5523

Amount of Each Receipt this Period
250.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 148
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial) Nancy N. Coverdell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 309 Forest Oaks		Transaction ID: SA11A1.5470	
City State Zip Code Saint Simon GA 31522	Amount of Each Receipt this Period 2100.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired Occupation Retired	Election Cycle-to-Date ▼ 2100.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) William S. Cowser		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 5	
Mailing Address 236 Hamilton Road		Transaction ID: SA11A1.6049	
City State Zip Code Athens GA 30606	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Cowser & Avery Occupation Attorney	Election Cycle-to-Date ▼ 250.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Dennis E. Coxwell		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 5	
Mailing Address 307 Wilhoit St.		Transaction ID: SA11A1.6231	
City State Zip Code Warrenton GA 30828	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Pine South, Inc. Occupation Forester	Election Cycle-to-Date ▼ 500.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	2850.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Carter Crittenden		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address One Northside 75, S		Transaction ID: SA11A1.5630
City State Zip Code Atlanta GA 30318	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer self Occupation Real Estate Investor	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. Allen Cruikshank		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 5
Mailing Address 500 Tam Oshanter Dr		Transaction ID: SA11A1.6228
City State Zip Code Marietta GA 30067	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Metrac Corporation Occupation President/CEO	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. David F. Culverhouse		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 7 Jumper Lane		Transaction ID: SA11A1.5533
City State Zip Code Savannah GA 31405	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Office Services, Inc. Occupation President	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	1450.00
TOTAL This Period (last page this line number only)	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 148 (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial) Stephen Cummings Mailing Address P. O. Box 287 City State Zip Code Statesboro GA 30459 FEC ID number of contributing federal political committee. C	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: SA11A1.6163 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>1000.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	2	7	/	2	0	0	5		1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2	/	2	7	/	2	0	0	5														
	1000.00																						
Name of Employer Occupation Georgia Home Medical Owner Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>1000.00</td> </tr> </table>		1000.00																				
	1000.00																						

B. Full Name (Last, First, Middle Initial) Raymond F. Dacek Mailing Address 701 8th Street N.W. City State Zip Code Washington DC 20001 FEC ID number of contributing federal political committee. C	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: SA11A1.5843 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>500.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	3	/	2	0	0	5		500.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	2	3	/	2	0	0	5														
	500.00																						
Name of Employer Occupation Retired Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>500.00</td> </tr> </table>		500.00																				
	500.00																						

C. Full Name (Last, First, Middle Initial) W. S. Dasher, Jr. Mailing Address P. O. Box 60 City State Zip Code Springfield GA 31329 FEC ID number of contributing federal political committee. C	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: SA11A1.5849 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>500.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	3	/	2	0	0	5		500.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	2	3	/	2	0	0	5														
	500.00																						
Name of Employer Occupation Dasher Insurance Agency Owner Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>500.00</td> </tr> </table>		500.00																				
	500.00																						

SUBTOTAL of Receipts This Page (optional) ▶	<table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>2000.00</td> </tr> </table>		2000.00
	2000.00		
TOTAL This Period (last page this line number only) ▶	<table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td></td> </tr> </table>		

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <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 type="checkbox"/> 15	PAGE 27 / 148
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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Mary N. Daughtry

Mailing Address 101 Ellis Road

City Statesboro State GA Zip Code 30461

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: SA11A1.5604

Amount of Each Receipt this Period
 500.00

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

B. Full Name (Last, First, Middle Initial)
F. Thomas David

Mailing Address 106 Towhee Trail

City Statesboro State GA Zip Code 30458

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

Name of Employer First Southern Bank Occupation President & CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: SA11A1.5923

Amount of Each Receipt this Period
 500.00

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

C. Full Name (Last, First, Middle Initial)
Inman D. Davis

Mailing Address 404 College Blvd.

City Statesboro State GA Zip Code 30458

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: SA11A1.5885

Amount of Each Receipt this Period
 150.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1150.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

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

Mailing Address 1561 Tanglebrook Dr

City Athens State GA Zip Code 30606

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

Name of Employer self Occupation homemaker

Receipt For: 2006 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.5996

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Nancy F. Davis

Mailing Address 4488 Sugarberry Ct.

City Evans State GA Zip Code 30809

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

Name of Employer National Mail Services, Inc. Occupation Accounting Manager

Receipt For: 2006 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: SA11A1.5553

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 1455 Pennsylvania A

City Washington State DC Zip Code 20004

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

Name of Employer Davis & Harman LLP Occupation attorney

Receipt For: 2006 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11A1.5689

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Edward J. Derst, III		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 5	
Mailing Address 12812 Rockwell Ave.		Transaction ID: SA11A1.5580	
City Savannah	State GA	Amount of Each Receipt this Period 1000.00	
Zip Code 31419		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer Derst Baking Co.	Occupation Co-Owner		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Samuel Dipolito		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 5	
Mailing Address 106 Oak Ridge Dr.		Transaction ID: SA11A1.5908	
City Statesboro	State GA	Amount of Each Receipt this Period 500.00	
Zip Code 30458		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer Prudential Realty	Occupation Realtor		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. J. Christopher Donahue		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 7 / 2 0 0 5	
Mailing Address 1300 Beechwood Blvd		Transaction ID: SA11A1.5695	
City Pittsburgh	State PA	Amount of Each Receipt this Period 1000.00	
Zip Code 15217		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer Federated Investors, Inc.	Occupation President/CEO		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

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

Mailing Address P. O. Box 400

City State Zip Code
Augusta GA 30903

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

Name of Employer
Glynn Farms, Inc./E.L.D., Inc.

Occupation
Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
12 / 16 / 2005

Transaction ID: SA11A1.5970

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Anatoli Dudko

Mailing Address 3201 Lenox Rd., No.

City State Zip Code
Atlanta GA 30324

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

Name of Employer
OMNI Mortgage, Inc.

Occupation
Executive Loan Consultan

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2005

Transaction ID: SA11A1.5564

Amount of Each Receipt this Period
1500.00

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

C. Full Name (Last, First, Middle Initial)
Charles C. Duggan, Jr.

Mailing Address 1217 Plantation Cir

City State Zip Code
Statesboro GA 30458

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

Name of Employer
First National Bank & Trust

Occupation
Officer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
12 / 16 / 2005

Transaction ID: SA11A1.5946

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
William F. Easterlin

Mailing Address 812 Mulberry Street

City State Zip Code
Louisville GA 30434

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

Name of Employer Queensborough National Bank & Trust Co
Occupation Banker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.6176

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Richard D. Eckburg

Mailing Address 48 Cotton Crossing

City State Zip Code
Savannah GA 31411

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

Name of Employer Retired
Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

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

Transaction ID: SA11A1.5867

Amount of Each Receipt this Period
1100.00

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

C. Full Name (Last, First, Middle Initial)
Richard D. Eckburg

Mailing Address 48 Cotton Crossing

City State Zip Code
Savannah GA 31411

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

Name of Employer Retired
Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

3100.00

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

Transaction ID: SA11A1.5868

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2350.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
James C. Edenfield

Mailing Address 3700 Randall Mill R

City Atlanta State GA Zip Code 30327

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

Name of Employer American Software, Inc. Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: SA11A1.6136

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Anne B. Eldridge

Mailing Address 3886 Northside Driv

City Atlanta State GA Zip Code 30342

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

Name of Employer Lumber Company Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11A1.5417

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 130 Southview Dr.

City Athens State GA Zip Code 30605

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

Name of Employer Aaron Bonding Co. Occupation Agent

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: SA11A1.6139

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one) <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 33 / 148
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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Mark F. Ellison		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 5	
Mailing Address 1021 Brookview Driv		Transaction ID: SA11A1.6010	
City Athens State GA Zip Code 30606	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer The Urology Center Occupation Physician	Election Cycle-to-Date 1000.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Toni R. Ellison		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 5	
Mailing Address 2026 Harmony Rd.		Transaction ID: SA11A1.6210	
City Sylvania State GA Zip Code 30467	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Syl-View Health Care Center Occupation Administrator	Election Cycle-to-Date 500.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dwight H. Evans		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 2084 Spencers Way		Transaction ID: SA11A1.5390	
City Stone Mount State GA Zip Code 30087	Amount of Each Receipt this Period 2100.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Southern Company Occupation President - External Aff	Election Cycle-to-Date 2100.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	3350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <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 type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

<p>A. Full Name (Last, First, Middle Initial) George Fawcett, I</p> <p>Mailing Address 487 Beaulieu Ave.</p> <p>City Savannah State GA Zip Code 31406</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p> <p>Transaction ID: SA11A1.5749</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: right;">500.00</td> </tr> </table> </p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	4	/	2	0	0	5	500.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	1	4	/	2	0	0	5													
500.00																						

<p>B. Full Name (Last, First, Middle Initial) Anna Feigin</p> <p>Mailing Address 2993 Sloans Way</p> <p>City Marietta State GA Zip Code 30062</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer LIIR Corp. Occupation Owner</p> <p>Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p> <p>Transaction ID: SA11A1.5568</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: right;">1000.00</td> </tr> </table> </p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	1	/	2	0	0	5	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	1	/	2	0	0	5													
1000.00																						

<p>C. Full Name (Last, First, Middle Initial) Cheryl R. Finger</p> <p>Mailing Address 11 W Jones St.</p> <p>City Savannah State GA Zip Code 31401</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Finger & Associates Occupation Secretary</p> <p>Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> </p> <p>Transaction ID: SA11A1.6184</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: right;">1100.00</td> </tr> </table> </p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	3	1	/	2	0	0	5	1100.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	3	1	/	2	0	0	5													
1100.00																						

<p>SUBTOTAL of Receipts This Page (optional)</p>	<table border="1" style="width: 100%;"> <tr> <td style="text-align: right;">2600.00</td> </tr> </table>	2600.00
2600.00		
<p>TOTAL This Period (last page this line number only)</p>	<table border="1" style="width: 100%;"> <tr> <td style="height: 20px;"></td> </tr> </table>	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Sandra N. Freedman

Mailing Address 7 Retreat

City Augusta State GA Zip Code 30909

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

Name of Employer Medical College of Georgia Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

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

Transaction ID: SA11A1.6089

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
William H. Gaik

Mailing Address 775 Yates Circle

City Clarkesville State GA Zip Code 30523

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11A1.5781

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Henry M. Gandy

Mailing Address 6212 Park Rd.

City McLean State VA Zip Code 22101

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

Name of Employer The Duberstein Group, Inc. Occupation Vice President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11A1.5658

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Jerry S. Gentry		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 1559 Millhaven Road		Transaction ID: SA11A1.5456
City State Zip Code Sylvania GA 30467	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. John Sabri Gerguis		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 5
Mailing Address 904 Pointer Rd.		Transaction ID: SA11A1.5594
City State Zip Code Statesboro GA 30461	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer Family Health Care Center	Occupation Physician	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. John Sabri Gerguis		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 6 / 2 0 0 5
Mailing Address 904 Pointer Rd.		Transaction ID: SA11A1.5990
City State Zip Code Statesboro GA 30461	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00
Name of Employer Family Health Care Center	Occupation Physician	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <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 type="checkbox"/> 15	PAGE 37 / 148
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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. T. B. Gibson		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 5	
Mailing Address 892 Prince Ave.		Transaction ID: SA11A1.6240	
City Athens State GA Zip Code 30606	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Prince Avenue Primary Care Occupation Physician	Election Cycle-to-Date 1000.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Dmitriy Goroshin		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 5	
Mailing Address 9155 Nesbit Ferry R		Transaction ID: SA11A1.5797	
City Alpharetta State GA Zip Code 30022	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Russian Town, Inc. Occupation CEO	Election Cycle-to-Date 1000.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. R. T. Gregory		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 5	
Mailing Address 160 High Ridge Dr.		Transaction ID: SA11A1.6030	
City Athens State GA Zip Code 30606	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired Occupation Retired	Election Cycle-to-Date 1200.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Shelly A. Griffin

Mailing Address 304 Jones Avenue

City State Zip Code
Waynesboro GA 30830

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

Name of Employer self Occupation
self Physician

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

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

Transaction ID: SA11A1.6093

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Richard D. Griner

Mailing Address 700 Wilmington Isla

City State Zip Code
Savannah GA 31410

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

Name of Employer R. B. Baker Const. Inc. Occupation
CFO

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1050.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.5515

Amount of Each Receipt this Period
1050.00

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

C. Full Name (Last, First, Middle Initial)
Larry D. Guthrie

Mailing Address 250 Cedar Creek Dr.

City State Zip Code
Athens GA 30605

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

Name of Employer Retired Occupation
Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

550.00

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

Transaction ID: SA11A1.5890

Amount of Each Receipt this Period
500.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Charles E. Hartzog		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address P. O. Box 433		Transaction ID: SA11A1.5481
City Springfield	State GA	Zip Code 31329
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) B. Abu Zaheed Hassan		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 5
Mailing Address 4369 Three J Rd.		Transaction ID: SA11A1.6244
City Evans	State GA	Zip Code 30809
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Doctors Hospital	Occupation Physician	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Carl P. Hawkins		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 6 / 2 0 0 5
Mailing Address 619 West Lake Dr.		Transaction ID: SA11A1.5942
City Athens	State GA	Zip Code 30606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation Entrepreneur	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
John R. Hayes

Mailing Address 1602 Pembroke Court

City State Zip Code
Peachtree C GA 30269

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

Name of Employer Home Life Communities Occupation Division VP

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.6262

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
David J. Headlee

Mailing Address 135 River Bottom Pl

City State Zip Code
Athens GA 30606

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

Name of Employer Premier Marketing Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.5953

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Philip M. Heidt

Mailing Address P. O. Box 530

City State Zip Code
Rincon GA 31326

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

Name of Employer Century21/Heidt Realty Occupation Realtor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11A1.5434

Amount of Each Receipt this Period
250.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 / 148
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	12	<input type="checkbox"/>	13a
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	13b
<input type="checkbox"/>		<input type="checkbox"/>	11d
<input type="checkbox"/>		<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial) Philip M. Heidt		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 5	
Mailing Address P. O. Box 530		Transaction ID: SA11A1.6222	
City Rincon State GA Zip Code 31326		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Century21/Heidt Realty Occupation Realtor			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) William T. Herrington		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 5	
Mailing Address 1110 Laurel Place		Transaction ID: SA11A1.5850	
City Athens State GA Zip Code 30606		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Athens Radiology Associates Occupation Physician			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1250.00	

C. Full Name (Last, First, Middle Initial) Susan Brackin Hirschmann		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 5	
Mailing Address 4052 Seminary Rd.		Transaction ID: SA11A1.6095	
City Alexandria State VA Zip Code 22304		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Williams & Jensen Occupation Partner			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Cecil M. Hodges

Mailing Address 609 Kinney St. Draw

City Sandersville State GA Zip Code 31082

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

Name of Employer Hodges Land & Timber Inc. Occupation Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

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

Transaction ID: SA11A1.5438

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Shannon P. Hodges

Mailing Address 578 Macedonia Road

City Statesboro State GA Zip Code 30461

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

Name of Employer E. GA. Orthopedic Center Occupation Billing Clerk

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: SA11A1.5910

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Dennis E. Hopf

Mailing Address 2335 Mossy Branch D

City Snellville State GA Zip Code 30078

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

Name of Employer Plymart Inc. Occupation VP of Sales

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.6256

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <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 type="checkbox"/> 15	PAGE 43 / 148
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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
C. Arthur Howard

Mailing Address 316 Wendwood Drive

City Statesboro State GA Zip Code 30458

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

Name of Employer Howard Lumber Co. Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

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

Transaction ID: SA11A1.5882

Amount of Each Receipt this Period
 500.00

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

B. Full Name (Last, First, Middle Initial)
Brian R. Howell

Mailing Address 91 Blue Jack Drive

City Register State GA Zip Code 30452

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

Name of Employer DeFair Farms Occupation Farmer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: SA11A1.5881

Amount of Each Receipt this Period
 500.00

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

C. Full Name (Last, First, Middle Initial)
Brian R. Howell

Mailing Address 91 Blue Jack Drive

City Register State GA Zip Code 30452

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

Name of Employer DeFair Farms Occupation Farmer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.6211

Amount of Each Receipt this Period
 500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Ralph T. Hudgens

Mailing Address 6509 Hwy. 106 S.

City Hull State GA Zip Code 30646

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

Name of Employer State of GA Occupation GA State Senator

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.6032

Amount of Each Receipt this Period
 250.00

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

B. Full Name (Last, First, Middle Initial)
James E. Hungerpiller

Mailing Address 12730 Rockwell Ave.

City Savannah State GA Zip Code 31419

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11A1.5425

Amount of Each Receipt this Period
 250.00

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

C. Full Name (Last, First, Middle Initial)
Alice S. Hunt

Mailing Address 2337 Ruby Dr.

City Augusta State GA Zip Code 30906

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.5931

Amount of Each Receipt this Period
 25.00

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

SUBTOTAL of Receipts This Page (optional)	▶	525.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Emelyn T. Hunter

Mailing Address 111 Morningside Dr.

City State Zip Code
Sylvania GA 30467

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

Name of Employer Emelyn Hunter CPA PC Occupation CPA

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.5489

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Jeffrey F. Jepson

Mailing Address 143 Puttenham Xing

City State Zip Code
Pooler GA 31322

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

Name of Employer Southbridge Development Co. Occupation Real Estate

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.5499

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Gary L. Johnson

Mailing Address 2 Forest Pines Driv

City State Zip Code
Statesboro GA 30458

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

Name of Employer Sea Island Bank Occupation Officer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: SA11A1.5451

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Gary L. Johnson

Mailing Address 2 Forest Pines Driv

City Statesboro State GA Zip Code 30458

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

Name of Employer Sea Island Bank Occupation Officer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: SA11A1.5452

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Gary L. Johnson

Mailing Address 2 Forest Pines Driv

City Statesboro State GA Zip Code 30458

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

Name of Employer Sea Island Bank Occupation Officer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.5974

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 115 McIntosh Dr.

City Savannah State GA Zip Code 31406

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

Name of Employer Southeast ENT & Facial Plastic Surgery Occupation physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11A1.5683

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <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 type="checkbox"/> 15	PAGE 47 / 148
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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Bruce W. Karrh		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 7 Pepper Bush Circl		Transaction ID: SA11A1.5364	
City Savannah State GA Zip Code 31411	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired Occupation Retired	Election Cycle-to-Date 1000.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. Forest E. Kellogg		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 5	
Mailing Address 585 Research Drive,		Transaction ID: SA11A1.6067	
City Athens State GA Zip Code 30605	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer N. American Timberlands, Inc. Occupation President	Election Cycle-to-Date 500.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. Donald Kent		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address P. O. Box 298		Transaction ID: SA11A1.5487	
City Gibson State GA Zip Code 30810	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired Occupation Retired	Election Cycle-to-Date 250.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. C. M. Kight		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 5	
Mailing Address P. O. Box 323		Transaction ID: SA11A1.6112	
City Springfield	State GA	Amount of Each Receipt this Period 250.00	
Zip Code 31329		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer 2195 Group, Inc.	Occupation Hotel Operator/Developer		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. C. Murray Kight		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address P. O. Box 323		Transaction ID: SA11A1.5478	
City Springfield	State GA	Amount of Each Receipt this Period 250.00	
Zip Code 31329		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer 2195 Group, Inc.	Occupation Hotel Operator/Developer		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) C. Karl Tom Kile		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5	
Mailing Address 102 Holly Rd.		Transaction ID: SA11A1.5458	
City Sylvania	State GA	Amount of Each Receipt this Period 250.00	
Zip Code 30467		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer Screven Co. Police Dept.	Occupation Policeman		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
William G. Kimbrough

Mailing Address 85 Van Horne Dr., V

City State Zip Code
Tybee Island GA 31328

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

Name of Employer Occupation
Westin Savannah Harbor Resort Engineer

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

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

Transaction ID: SA11A1.5414

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Glenn A. Kirkland

Mailing Address 304 Stirrup Court

City State Zip Code
Guyton GA 31312

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

Name of Employer Occupation
Kirk's Air Express Owner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.5491

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
William J. Kosic

Mailing Address 56 E. 54th St.

City State Zip Code
Savannah GA 31405

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

Name of Employer Occupation
Crystal Beer Parlor Owner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

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

Transaction ID: SA11A1.5617

Amount of Each Receipt this Period
500.00

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Ina Kushnir

Mailing Address 3431 Post Oak Tritt

City State Zip Code
Marietta GA 30062

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

Name of Employer Occupation
Atlanta Institute of Medicine & Resear physician

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

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

Transaction ID: SA11A1.5586

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Charles R. Laff

Mailing Address 117 Club Course Dr.

City State Zip Code
Hilton Head SC 29928

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

Name of Employer Occupation
Laff Association Health Care Consultant

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

750.00

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

Transaction ID: SA11A1.5439

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
David Lamer

Mailing Address 131 Lake Somerset C

City State Zip Code
Marietta GA 30064

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

Name of Employer Occupation
Home Life Communities Division VP

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.6254

Amount of Each Receipt this Period
250.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Chalton Jerome Lane, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 5	
Mailing Address P. O. Box 72		Transaction ID: SA11A1.5944	
City Claxton	State GA	Amount of Each Receipt this Period 2000.00	
Zip Code 30417		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
FEC ID number of contributing federal political committee. C			
Name of Employer Claxton Chicken	Occupation President		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) B. Ricky Lane		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 223 Magnolia Place		Transaction ID: SA11A1.5517	
City Statesboro	State GA	Amount of Each Receipt this Period 250.00	
Zip Code 30461		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation dentist		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ricky Lane		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 5	
Mailing Address 223 Magnolia Place		Transaction ID: SA11A1.6035	
City Statesboro	State GA	Amount of Each Receipt this Period 300.00	
Zip Code 30461		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation dentist		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 550.00		

SUBTOTAL of Receipts This Page (optional) ▶	2550.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
J. Smith Lanier, II

Mailing Address P. O. Box 70

City State Zip Code
West Point GA 31833

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.5983

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Joseph E. Lariscy

Mailing Address P. O. Box 1523

City State Zip Code
Athens GA 30603

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

Name of Employer The Lariscy Lawfirm, PC Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.5994

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Willard Lasseter

Mailing Address P. O. Box 726

City State Zip Code
Moultrie GA 31776

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

Name of Employer Lasseter Tractor Co., Inc. Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: SA11A1.5872

Amount of Each Receipt this Period
1000.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Frederick Laun

Mailing Address P. O. Box 328

City Statesboro State GA Zip Code 30459

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

Name of Employer Statesboro Orthopaedics, PC Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11A1.5424

Amount of Each Receipt this Period
 500.00

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

B. Full Name (Last, First, Middle Initial)
Stuart T. Ledford

Mailing Address 2575 Arlington Ct.

City Lithia Spri State GA Zip Code 30122

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

Name of Employer Home Life Communities Occupation Division VP

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.6278

Amount of Each Receipt this Period
 250.00

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

C. Full Name (Last, First, Middle Initial)
Myunz Lee

Mailing Address 113 Montgomery Cros

City Savannah State GA Zip Code 31416

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

Name of Employer Lee's Tae Kwon Do Fitness Ctr. Occupation Instructor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: SA11A1.5525

Amount of Each Receipt this Period
 500.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Kathryn Lehman		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 5	
Mailing Address 1101 S. Arlington R		Transaction ID: SA11A1.6081	
City Arlington	State VA	Zip Code 22202	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
Name of Employer Holland & Knight	Occupation Partner		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Rachel Lekherzak		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 5	
Mailing Address 9650 Roberts Drive		Transaction ID: SA11A1.5608	
City Atlanta	State GA	Zip Code 30350	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
Name of Employer Atlanta Technical College	Occupation Instructor		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Alice L. Lewis		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 5	
Mailing Address 213 N. Lake Dr.		Transaction ID: SA11A1.6098	
City Sylvania	State GA	Zip Code 30467	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
Name of Employer Retired	Occupation Retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	1600.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Arthur Lifson		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 1 / 2 0 0 5
Mailing Address 5816 Linden Square		Transaction ID: SA11A1.6055
City State Zip Code Rockville MD 20852	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Art Lifson Consulting, LLC	Occupation Principal	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. James O. Loftin		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 5
Mailing Address 112 Hickory Point D		Transaction ID: SA11A1.6260
City State Zip Code Athens GA 30605	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Loco's Deli & Pub	Occupation Owner	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Albert L. Luce, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address 410 Westview Drive		Transaction ID: SA11A1.5623
City State Zip Code Fort Valley GA 31030	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one) <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 56 / 148
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Barry D. Luskey		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 5	
Mailing Address 38 Little Comfort R		Transaction ID: SA11A1.5569	
City Savannah State GA Zip Code 31411	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Summit Cancer Care, P.C. Occupation Physician	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Sybil D. Lynn		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5	
Mailing Address P. O. Box 772		Transaction ID: SA11A1.5386	
City Jesup State GA Zip Code 31598	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Sybil's Family Restaurant Occupation Owner	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Paul T. Martin		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 6 / 2 0 0 5	
Mailing Address P. O. Box 7966		Transaction ID: SA11A1.6026	
City Athens State GA Zip Code 30604	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Martin Management Occupation Owner	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Leslie D. Mattingly		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 4315 10th Street Ea		Transaction ID: SA11A1.5462
City State Zip Code St. Simons GA 31522	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self Occupation Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	250.00	

Full Name (Last, First, Middle Initial) B. Dennie L. McCrary		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address Cottage 440		Transaction ID: SA11A1.5445
City State Zip Code Sea Island GA 31561	Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Sea Island Co. Occupation Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2100.00	

Full Name (Last, First, Middle Initial) C. H. Bruce McElroy		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 6 / 2 0 0 5
Mailing Address 1119 Bartlett Dr.		Transaction ID: SA11A1.5975
City State Zip Code Statesboro GA 30461	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Color Technologies, Inc. Occupation Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	250.00	

SUBTOTAL of Receipts This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Renee H. McGehee		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 516 Moon River Ct.		Transaction ID: SA11A1.5555	
City Savannah	State GA	Zip Code 31406	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self	Occupation homemaker		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. L. B. Mingledorff		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 7 / 2 0 0 5	
Mailing Address P. O. Box 26087		Transaction ID: SA11A1.6143	
City Norcross	State GA	Zip Code 30091	Amount of Each Receipt this Period 2100.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Mingledorff, Inc.	Occupation President		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00		

Full Name (Last, First, Middle Initial) C. L. B. Mingledorff		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 7 / 2 0 0 5	
Mailing Address P. O. Box 26087		Transaction ID: SA11A1.6144	
City Norcross	State GA	Zip Code 30091	Amount of Each Receipt this Period 900.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Mingledorff, Inc.	Occupation President		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00		

SUBTOTAL of Receipts This Page (optional) ▶	3250.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Henry H. Minis

Mailing Address P. O. Box 16538

City State Zip Code
Savannah GA 31416

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

Name of Employer Occupation
Redhead LLC CEO

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

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

Transaction ID: SA11A1.6134

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Mister U Enterprises LLC

Mailing Address P. O. Box 1824

City State Zip Code
Athens GA 30603

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

Name of Employer Occupation

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.6242

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Chris Moody

Mailing Address 145 Hill Ave.

City State Zip Code
Woolsey GA 30215

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

Name of Employer Occupation
Home Life Communities Division VP

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.6250

Amount of Each Receipt this Period
300.00

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

SUBTOTAL of Receipts This Page (optional) ► **1300.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Floyd J. Moon, II

Mailing Address 1309 Magnolia Way

City State Zip Code
Tifton GA 31793

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

Name of Employer Occupation
GA Pharmacy Assoc. Member Services Rep

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.5973

Amount of Each Receipt this Period
150.00

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

B. Full Name (Last, First, Middle Initial)
Chris L. Morse, III

Mailing Address P. O. Box 22593

City State Zip Code
Savannah GA 31402

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

Name of Employer Occupation
Div. 9 Contractors Inc. Construction Estimator

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2100.00

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

Transaction ID: SA11A1.5441

Amount of Each Receipt this Period
2100.00

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

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

Mailing Address P. O. Box 1062

City State Zip Code
Evans GA 30809

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

Name of Employer Occupation
Doctors Hospital Physician

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.6272

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional)	4250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
David R. Murphey, III

Mailing Address P. O. Box 18065

City Tampa State FL Zip Code 33679

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

Name of Employer Self Occupation Investor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.5955

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Ed Nelson

Mailing Address 4045 Loves Chapel C

City Glennville State GA Zip Code 30427

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

Name of Employer Rotary Corporation Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11A1.5642

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Demere NeSmith

Mailing Address P. O. Box 828

City Claxton State GA Zip Code 30417

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

Name of Employer NeSmith Chevrolet Occupation General Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.5961

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Martin NeSmith

Mailing Address P. O. Box 828

City State Zip Code
Cla GA 30417

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

Name of Employer
NeSmith Chevrolet

Occupation
Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.6012

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Paul K. Newton

Mailing Address 8119 Halcyondale Rd

City State Zip Code
Sylvania GA 30467

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

Name of Employer
Retired

Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: SA11A1.5471

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Linda A. Olson

Mailing Address 2 Governor's Court

City State Zip Code
Savannah GA 31410

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

Name of Employer
Chatham Co. BOE

Occupation
Principal

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: SA11A1.5547

Amount of Each Receipt this Period
250.00

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. H. M. Osteen, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 5
Mailing Address 12 Highgate West		Transaction ID: SA11A1.5833
City State Zip Code Augusta GA 30909	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Mary Drayton Osteen		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 5
Mailing Address Twelve Highgate W.		Transaction ID: SA11A1.6146
City State Zip Code Augusta GA 30909	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer self	Occupation homemaker	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Louise B. Otts		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 5
Mailing Address 6392 Wrightsboro Rd		Transaction ID: SA11A1.6086
City State Zip Code Harlem GA 30814	Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

SUBTOTAL of Receipts This Page (optional) ▶	5100.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Jennifer Packer		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 5	
Mailing Address 1239 Veeder Dr.		Transaction ID: SA11A1.6215	
City State Zip Code Hewlett NY 11557	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer self Occupation homemaker	Election Cycle-to-Date ▼ 500.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Paul Packer		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 5	
Mailing Address 1239 Veeder Dr.		Transaction ID: SA11A1.6221	
City State Zip Code Hewlett NY 11557	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Globis Capital Partners Occupation Managing Member	Election Cycle-to-Date ▼ 500.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. John L. Padgett		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 251 Moss Side Dr.		Transaction ID: SA11A1.5398	
City State Zip Code Athens GA 30607	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer R. E. Mgt. Occupation Owner	Election Cycle-to-Date ▼ 550.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
John L. Padgett

Mailing Address 251 Moss Side Dr.

City Athens State GA Zip Code 30607

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

Name of Employer R. E. Mgt. Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1550.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.5989

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
J. C. Palmer, III

Mailing Address 705 Wood Valley Rd.

City Waynesboro State GA Zip Code 30830

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

Name of Employer First National Bank of Waynesboro Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: SA11A1.5592

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 4004 Sharp Pl.

City Alexandria State VA Zip Code 22304

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

Name of Employer Akin Gump Strauss Haver & Feld, LLP Occupation Senior Advisor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: SA11A1.6083

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Homer F. Peeples, Jr.

Mailing Address 126 Grays Creek Dr.

City Savannah State GA Zip Code 31410

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: SA11A1.5372

Amount of Each Receipt this Period
 250.00

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

B. Full Name (Last, First, Middle Initial)
Barnard M. Portman

Mailing Address P. O. Box 9087

City Savannah State GA Zip Code 31412

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

Name of Employer self Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: SA11A1.6101

Amount of Each Receipt this Period
 150.00

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

C. Full Name (Last, First, Middle Initial)
William W. Price

Mailing Address 305 Avondale Dr.

City Sylvania State GA Zip Code 30467

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

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

Transaction ID: SA11A1.5875

Amount of Each Receipt this Period
 500.00

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

SUBTOTAL of Receipts This Page (optional)	900.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
David M. Puckett

Mailing Address 1944 Speir St.

City Savannah State GA Zip Code 31406

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

Name of Employer Positive Image Prosthetics & Orthotics Occupation CP, President

Receipt For: 2006 Election Cycle-to-Date

Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.5485

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Ann R. Purcell

Mailing Address 410 Willowpeg Way

City Rincon State GA Zip Code 31326

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

Name of Employer GA Dept. of Technical & Adult Educatio Occupation Board Member

Receipt For: 2006 Election Cycle-to-Date

Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.5477

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
James K. Reynolds

Mailing Address 120 Tallassee Oaks

City Athens State GA Zip Code 30606

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

Name of Employer Nissan & Mercedes-Benz & Volkswagen de Occupation Owner

Receipt For: 2006 Election Cycle-to-Date

Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.5985

Amount of Each Receipt this Period
1000.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Jo Nell Roberts

Mailing Address 1800 Stucky Rd.

City Statesboro State GA Zip Code 30461

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

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

Transaction ID: SA11A1.5887

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
R. Mixon Robinson

Mailing Address 125 King Ave.

City Athens State GA Zip Code 30606

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

Name of Employer Athens Orthopedic Clinic PA Occupation Orthopedic surgeon

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: SA11A1.5866

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Joe W. Rogers, Jr.

Mailing Address P. O. Box 8050

City Norcross State GA Zip Code 30091

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

Name of Employer Waffle House Occupation Chairman

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: SA11A1.6077

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Joyce B. Rogers		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 8 / 2 0 0 5
Mailing Address 5693 Lakeview Rd.		Transaction ID: SA11A1.5712
City Statesboro	State GA	Zip Code 30461
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Y-Delta, Inc.	Occupation Owner/VP	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ted O. Romine		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 5
Mailing Address P. O. Box 7035		Transaction ID: SA11A1.5611
City Garden City	State GA	Zip Code 31418
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Romine Enterprises, L. P.	Occupation Owner	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Joseph R. Ross		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 11 Country Club Dr.		Transaction ID: SA11A1.5542
City Savannah	State GA	Zip Code 31410
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Memorial Health	Occupation Senior VP/Gen.Counsel	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Stephen Rutner		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 1902 E. Chestnut Ct		Transaction ID: SA11A1.5558
City Statesboro	State GA	Zip Code 30458
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Georgia Southern University	Occupation Professor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) B. Stephen Rutner		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 5
Mailing Address 1902 E. Chestnut Ct		Transaction ID: SA11A1.5911
City Statesboro	State GA	Zip Code 30458
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Georgia Southern University	Occupation Professor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) C. Stephen Rutner		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 5
Mailing Address 1902 E. Chestnut Ct		Transaction ID: SA11A1.6209
City Statesboro	State GA	Zip Code 30458
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Georgia Southern University	Occupation Professor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 475.00	

SUBTOTAL of Receipts This Page (optional) ▶	275.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Harvey J. Sanders, Jr.

Mailing Address 2 Huntington Pl

City State Zip Code
Waynesboro GA 30830

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

Name of Employer
Medical Specialists, Inc.

Occupation
Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 27 / 2005

Transaction ID: SA11A1.6133

Amount of Each Receipt this Period
1100.00

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

B. Full Name (Last, First, Middle Initial)
Steve Sasso

Mailing Address 297 W. Ivanhoe

City State Zip Code
Gilbert AZ 85233

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

Name of Employer
Home Life Communities

Occupation
Division President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2100.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2005

Transaction ID: SA11A1.6276

Amount of Each Receipt this Period
2100.00

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

C. Full Name (Last, First, Middle Initial)
William N. Searcy

Mailing Address P. O. Box 8002

City State Zip Code
Savannah GA 31412

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

Name of Employer
Brannen, Searcy & Smith LLP

Occupation
Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 14 / 2005

Transaction ID: SA11A1.5785

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	3450.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
William N. Searcy

Mailing Address P. O. Box 8002

City Savannah State GA Zip Code 31412

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

Name of Employer Brannen, Searcy & Smith LLP Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: SA11A1.6168

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
James G. Shannon, Jr.

Mailing Address P. O. Box 220

City Newington State GA Zip Code 30446

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

Name of Employer Shannon's Farm Inc. Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: SA11A1.5521

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Stan Sheppard

Mailing Address 250 Rube Rd.

City Sylvania State GA Zip Code 30467

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

Name of Employer Tri-County Realty, Inc. Occupation Real Estate Broker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: SA11A1.6161

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <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 type="checkbox"/> 15	PAGE 73 / 148
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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. William S. Sherrill, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 7 / 2 0 0 5	
Mailing Address P. O. Box 14838		Transaction ID: SA11A1.6169	
City State Zip Code Augusta GA 30919	Amount of Each Receipt this Period 1100.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Norvell Fixture & Equipment	Occupation President	Election Cycle-to-Date 2100.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Steve M. Shirley		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 6 / 2 0 0 5	
Mailing Address 1150 Cleveland Rd.		Transaction ID: SA11A1.6039	
City State Zip Code Bogart GA 30622	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer NE Georgia Surgical Consultants	Occupation Physician	Election Cycle-to-Date 1000.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. L. H. Simkins, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 7 Indian Creek Rd.		Transaction ID: SA11A1.5545	
City State Zip Code Augusta GA 30909	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Simkins Land Co.	Occupation President	Election Cycle-to-Date 1250.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	2350.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
L. H. Simkins, Jr.

Mailing Address 7 Indian Creek Rd.

City State Zip Code
Augusta GA 30909

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

Name of Employer Occupation
Simkins Land Co. President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1750.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 07 / 2005

Transaction ID: SA11A1.5857

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Byron Lamar Smith

Mailing Address 144 Kelly St.

City State Zip Code
Reidsville GA 30453

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

Name of Employer Occupation
BLS Development Inc. Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 23 / 2005

Transaction ID: SA11A1.5826

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Charles E. Smith, Jr.

Mailing Address 3717 River Road

City State Zip Code
Wadley GA 30477

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

Name of Employer Occupation
self farmer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2005

Transaction ID: SA11A1.6183

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Linda M. Smith

Mailing Address 105 Renfrew Dr.

City Athens State GA Zip Code 30606

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

Name of Employer self Occupation homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 9 / 2 0 0 5

Transaction ID: SA11A1.5919

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
W. H. Smith, III

Mailing Address 5886 Banks Dairy Rd

City Statesboro State GA Zip Code 30458

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

Name of Employer self Occupation Farmer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: SA11A1.5615

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Mary H. Stafford

Mailing Address P. O. Box 460

City Richmond Hi State GA Zip Code 31324

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

Name of Employer Mulberry Co. Occupation Co-Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: SA11A1.5549

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. S. Allan Stocks		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 5	
Mailing Address 1330 Interstate Pky		Transaction ID: SA11A1.6238	
City State Zip Code Augusta GA 30909	Amount of Each Receipt this Period 2100.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Eye Physicians and Surgeons	Occupation Physician		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00		

Full Name (Last, First, Middle Initial) B. Jesse C. Stone		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 5	
Mailing Address 533 Jones Ave.		Transaction ID: SA11A1.5540	
City State Zip Code Waynesboro GA 30830	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self	Occupation attorney		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Jesse C. Stone		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 1 / 2 0 0 5	
Mailing Address 533 Jones Ave.		Transaction ID: SA11A1.6073	
City State Zip Code Waynesboro GA 30830	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self	Occupation attorney		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 700.00		

SUBTOTAL of Receipts This Page (optional) ▶	2800.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
J. P. Stubbs

Mailing Address 102 Pine Needle Ct.

City Statesboro State GA Zip Code 30459

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

Name of Employer Stubbs Oil Co., Inc. Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: SA11A1.5536

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
R. C. Stubbs, Jr.

Mailing Address 113 Sylvan Terrace

City Sylvania State GA Zip Code 30467

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.6029

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Joe D. Tanner

Mailing Address 50 Hunt Plaza Suite

City Atlanta State GA Zip Code 30303

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

Name of Employer Joe Tanner & Associates Occupation President/CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: SA11A1.6075

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Charles K. Tarbutton

Mailing Address P. O. Box 269

City Sandersville State GA Zip Code 31082

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

Name of Employer Sandersville Railroad Co. Occupation Asst. VP

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2005

Transaction ID: SA11A1.5574

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Hugh M. Tarbutton

Mailing Address P. O. Box 269

City Sandersville State GA Zip Code 31082

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

Name of Employer Tarbutton Brothers Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt
MM / DD / YYYY
10 / 12 / 2005

Transaction ID: SA11A1.5394

Amount of Each Receipt this Period
2100.00

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

C. Full Name (Last, First, Middle Initial)
Lyudmila A. Tavrovsky

Mailing Address 1714 Ashebark Ln.

City Marietta State GA Zip Code 30068

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

Name of Employer Atlanta Institute of Medicine & Resear Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2005

Transaction ID: SA11A1.5600

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	4100.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
John R. Toler

Mailing Address 211 E. Jones St.

City Savannah State GA Zip Code 31401

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.5503

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
T. Barrett Trotter

Mailing Address 13 Bristlecone Way

City Augusta State GA Zip Code 30909

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

Name of Employer self Occupation Orthodontist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

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

Transaction ID: SA11A1.5409

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Charles Upchurch

Mailing Address P.O. Box 1824

City Athens State GA Zip Code 30603

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

Name of Employer Mister U Enterprises LLC Occupation Partner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ .00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.6433

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **350.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Joseph V. Usher

Mailing Address 16 Commodore Ct.

City Savannah State GA Zip Code 31410

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

Name of Employer Hancock Askew & Co. LLP Occupation CPA

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 12 / 2005

Transaction ID: SA11A1.5400

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Mark D. Valente, III

Mailing Address 7055 Leestone St.

City Springfield State VA Zip Code 22151

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

Name of Employer Valente & Associates Occupation consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
11 / 14 / 2005

Transaction ID: SA11A1.5768

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Vyacheslav Vladimirovskiy

Mailing Address 525 Jasmen Ct.

City Norcross State GA Zip Code 30093

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

Name of Employer Cadillac Occupation Senior Designer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2005

Transaction ID: SA11A1.5613

Amount of Each Receipt this Period
1000.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Frank C. Vlossak, IV		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 5	
Mailing Address 4001 North 9th St.,		Transaction ID: SA11A1.6069	
City Arlington	State VA	Zip Code 22203	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Williams & Jensen	Occupation Partner	Election Cycle-to-Date 250.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼		

Full Name (Last, First, Middle Initial) B. Mark Vrana		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 5	
Mailing Address 1231 Wild Azalea Ln		Transaction ID: SA11A1.6008	
City Athens	State GA	Zip Code 30606	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Hematology & Oncology of NE Georgia	Occupation Physician	Election Cycle-to-Date 1000.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼		

Full Name (Last, First, Middle Initial) C. Helen Morris Watson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 112 Woodlawn Dr.		Transaction ID: SA11A1.5492	
City Statesboro	State GA	Zip Code 30458	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Homemaker	Occupation Homemaker	Election Cycle-to-Date 500.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Jacquelyn Watson

Mailing Address 8 Amberwood Dr.

City Savannah State GA Zip Code 31405

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

Name of Employer self Occupation CPA

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11A1.5659

Amount of Each Receipt this Period
 200.00

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

B. Full Name (Last, First, Middle Initial)
Sandra H. Way

Mailing Address 233 Ben Anderson St

City Mount Verno State GA Zip Code 30445

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

Name of Employer Way Acceptance Co. Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 6 / 2 0 0 5

Transaction ID: SA11A1.5557

Amount of Each Receipt this Period
 250.00

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

C. Full Name (Last, First, Middle Initial)
Paul D. Webster, III

Mailing Address 517 Scotts Way

City Augusta State GA Zip Code 30909

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11A1.6207

Amount of Each Receipt this Period
 1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1450.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Alan Weissman		Date of Receipt MM / DD / YYYY 11 / 14 / 2005
Mailing Address 60 Rye Road		Transaction ID: SA11A1.5729
City Rye	State NY	Zip Code 10580
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1050.00
Name of Employer self	Occupation Real Estate Developer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2050.00	

Full Name (Last, First, Middle Initial) B. Giselle Weissman		Date of Receipt MM / DD / YYYY 11 / 14 / 2005
Mailing Address 60 Rye Road		Transaction ID: SA11A1.5751
City Rye	State NY	Zip Code 10580
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1050.00
Name of Employer self	Occupation homemaker	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1050.00	

Full Name (Last, First, Middle Initial) C. Leo F. Wells, III		Date of Receipt MM / DD / YYYY 12 / 31 / 2005
Mailing Address P. O. Box 926040		Transaction ID: SA11A1.6200
City Norcross	State GA	Zip Code 30010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Wells Real Estate Funds	Occupation CEO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	4100.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. W. N. Wessinger		Date of Receipt MM / DD / YYYY 11 / 02 / 2005
Mailing Address 24 Tiffany Pl.		Transaction ID: SA11A1.5619
City Savannah	State GA	Zip Code 31406
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer Memorial Health/University Medical Ctr	Occupation Physician	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Donald C. Whaley		Date of Receipt MM / DD / YYYY 12 / 16 / 2005
Mailing Address 270 Langston Chapel		Transaction ID: SA11A1.5966
City Statesboro	State GA	Zip Code 30458
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 150.00
Name of Employer Retired	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. C. Barry Whitney		Date of Receipt MM / DD / YYYY 10 / 26 / 2005
Mailing Address 24-8th Street		Transaction ID: SA11A1.5529
City Augusta	State GA	Zip Code 30901
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer S.M.Whitney Whse. Inc.	Occupation Farmer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	650.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Danny L. Wiginton

Mailing Address 118 Jefferson St.

City State Zip Code
Huntsville AL 35801

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

Name of Employer Occupation
South Bank CEO

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: SA11A1.5531

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Etta G. Wilcher

Mailing Address 6624 Hwy 102 W

City State Zip Code
Mitchell GA 30820

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

Name of Employer Occupation
Retired Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

300.00

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

Transaction ID: SA11A1.6121

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Wendel H. Wilson

Mailing Address P. O. Box 1000

City State Zip Code
Springfield GA 31329

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

Name of Employer Occupation
Wilson & Kessler CPA, LLC CPA

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: SA11A1.5560

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Wesley Joseph Wingo

Mailing Address 3051 Nunnally Shoal

City State Zip Code
Good Hope GA 30641

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

Name of Employer Occupation
Emmanuel Praise Church Minister

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11A1.5778

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Ellis G. Wood

Mailing Address P. O. Box 2041

City State Zip Code
Statesboro GA 30459

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

Name of Employer Occupation
Ellis Wood Contracting Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: SA11A1.5534

Amount of Each Receipt this Period
250.00

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

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

Mailing Address P. O. Box 2041

City State Zip Code
Statesboro GA 30459

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

Name of Employer Occupation
Ellis Wood Contracting Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

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

Transaction ID: SA11A1.6118

Amount of Each Receipt this Period
200.00

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

SUBTOTAL of Receipts This Page (optional)	950.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 / 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Greg Woolard

Mailing Address P. O. Box 793

City State Zip Code
Glennville GA 30427

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

Name of Employer Occupation
Coastal Area Stores Vice President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11A1.5654

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 1320 Honeysuckle Dr

City State Zip Code
Watkinsville GA 30677

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

Name of Employer Occupation
Retired Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 3 / 2 0 0 5

Transaction ID: SA11A1.5828

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Helen Zeagler

Mailing Address 135 Indian Trail Ro

City State Zip Code
Sylvania GA 30467

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

Name of Employer Occupation
Screven Co. Board of Education teacher

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11A1.6437

Amount of Each Receipt this Period
500.00

Zeagler Farms attribution

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

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 148 (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Zeagler Farms Full Name (Last, First, Middle Initial) Mailing Address 135 Indian Trail Road City State Zip Code Sylvania GA 30467 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 6 / 2 0 0 5 Transaction ID: SA11A1.5979 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Sole proprietorship see attribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼ 500.00	

B. Craig Zoellner Full Name (Last, First, Middle Initial) Mailing Address 175 Virginia Place City State Zip Code Fayettevill GA 30214 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 5 Transaction ID: SA11A1.6432 Amount of Each Receipt this Period 550.00
Name of Employer Occupation Zoellner Grading Owner Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Zoellner Grading attribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM]
Election Cycle-to-Date ▼ .00	

C. Zoellner Grading Full Name (Last, First, Middle Initial) Mailing Address 175 Virginia Place City State Zip Code Fayetteville GA 30214 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 5 Transaction ID: SA11A1.6430 Amount of Each Receipt this Period 550.00
Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Sole proprietorship see memo entry <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional) ▶	1050.00
TOTAL This Period (last page this line number only) ▶	154550.00

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

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

FOR LINE NUMBER: PAGE 89 / 148
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
21ST CENTURY PAC

Mailing Address 1155 21st Street NW
Suite 300

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11C.6341

Amount of Each Receipt this Period
4000.00

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

B. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-PAC)

Mailing Address 222 S PROSPECT AVENUE
C/O FINANCE DEPT

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

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

Transaction ID: SA11C.6381

Amount of Each Receipt this Period
2000.00

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

C. Full Name (Last, First, Middle Initial)
AMERICAN FOREST & PAPER ASSOC PAC (AF&PAPAC) FKA FOREST INDUSTRIES PAC (FIPAC)

Mailing Address 1111 19TH STREET NW SUITE 800

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00029348

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11C.6350

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional) ► **8000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 / 148
	<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)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. AMERICAN SUCCESS POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address 1155 21ST STREET NW SUITE 300		Transaction ID: SA11C.6339
City WASHINGTON State DC Zip Code 20036	FEC ID number of contributing federal political committee. C C00336644	Amount of Each Receipt this Period 2000.00
Name of Employer Occupation	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼	2000.00	

Full Name (Last, First, Middle Initial) B. ASSOCIATED BUILDERS AND CONTRACTORS PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 6 / 2 0 0 5
Mailing Address 4250 North Fairfax Drive 9th Floor		Transaction ID: SA11C.6379
City Arlington State VA Zip Code 22203	FEC ID number of contributing federal political committee. C C00010421	Amount of Each Receipt this Period 2500.00
Name of Employer Occupation	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼	2500.00	

Full Name (Last, First, Middle Initial) C. BADGER FUND INC ; THE		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address 1055 Thomas Jeferson Street NW Suite 215		Transaction ID: SA11C.6354
City Washington State DC Zip Code 20007	FEC ID number of contributing federal political committee. C C00409680	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼	1000.00	

SUBTOTAL of Receipts This Page (optional)	5500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 91 / 148
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
BOB BARR LEADERSHIP FUND, THE

Mailing Address 4401 Northside Parkway Ste. 100
PMB 246

City Atlanta State GA Zip Code 30327

FEC ID number of contributing federal political committee. **C** C00340190

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: SA11C.6371

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
BOOZMAN FOR CONGRESS

Mailing Address PO BOX 671

City ROGERS State AR Zip Code 72757

FEC ID number of contributing federal political committee. **C** C00367979

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11C.6397

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
BUCKEYE POLITICAL ACTION COMMITTEE

Mailing Address 865 Macon Alley

City Columbus State OH Zip Code 43206

FEC ID number of contributing federal political committee. **C** C00356378

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11C.6395

Amount of Each Receipt this Period
1000.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 / 148
	<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)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. CARE POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address 228 S WASHINGTON ST STE 115		Transaction ID: SA11C.6284
City State Zip Code ALEXANDRIA VA 22314	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00389668		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. CAROLINA MAJORITY PAC		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address P.O. Box 65796		Transaction ID: SA11C.6312
City State Zip Code Washington DC 20035	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00376756		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. COMMITTEE FOR THE PRESERVATION OF CAPITALISM (CPC), THE		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address P.O. Box 65314		Transaction ID: SA11C.6345
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 4000.00	
FEC ID number of contributing federal political committee. C C00328468		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 93 / 148
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
COMMITTEE FOR THE PRESERVATION OF CAPITALISM (GPC), THE

Mailing Address P.O. Box 65314

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00328468

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11C.6346

Amount of Each Receipt this Period
5000.00

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

B. Full Name (Last, First, Middle Initial)
COMMITTEE TO RE-ELECT BOBBY JINDAL

Mailing Address PO BOX 8628

City State Zip Code
METAIRIE LA 70011

FEC ID number of contributing federal political committee. **C** C00408823

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11C.6296

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
CONAWAY FOR CONGRESS

Mailing Address PO Box 51272

City State Zip Code
Midland TX 79710

FEC ID number of contributing federal political committee. **C** C00383828

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11C.6335

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 94 / 148
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)

Full Name (Last, First, Middle Initial)
Mailing Address 5915 EASTMAN AVENUE SUITE 100

City MIDLAND State MI Zip Code 48640

FEC ID number of contributing federal political committee. **C** C00350462

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	5

Transaction ID: SA11C.6298

Amount of Each Receipt this Period

1000.00

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

B. CULBERSON FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 41964

City Houston State TX Zip Code 77241

FEC ID number of contributing federal political committee. **C** C00343236

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	5

Transaction ID: SA11C.6393

Amount of Each Receipt this Period

500.00

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

C. DEMOCRACY BELIEVERS POLITICAL ACTION COMMITTEE AKA DBPAC

Full Name (Last, First, Middle Initial)
Mailing Address 1155 21st Street NW Suite 300

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00382036

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	5

Transaction ID: SA11C.6316

Amount of Each Receipt this Period

1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 / 148
	<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)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. DEMOCRACY BELIEVERS POLITICAL ACTION COMMITTEE AKA DBPAC		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address 1155 21st Street NW Suite 300		Transaction ID: SA11C.6317
City Washington State DC Zip Code 20036	FEC ID number of contributing federal political committee. C C00382036	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) B. DOING OUR NATION'S SERVICE POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address P.O. Box 9571		Transaction ID: SA11C.6348
City Alexandria State VA Zip Code 22304	FEC ID number of contributing federal political committee. C C00365411	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. FREEDOM PROJECT; THE		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 8 / 2 0 0 5
Mailing Address 111 C STREET SE		Transaction ID: SA11C.6361
City WASHINGTON State DC Zip Code 20003	FEC ID number of contributing federal political committee. C C00305805	Amount of Each Receipt this Period 5000.00
Name of Employer Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼ 10000.00		

SUBTOTAL of Receipts This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 96 / 148
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
FRELINGHUYSEN FOR CONGRESS

Mailing Address 19 CATTANO AVENUE

City State Zip Code
MORRISTOWN NJ 07960

FEC ID number of contributing federal political committee. **C** C00148684

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: SA11C.6367

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
FRIENDS OF CONNIE MACK

Mailing Address P.O. Box 60004
PMB 388

City State Zip Code
Ft. Myers FL 33906

FEC ID number of contributing federal political committee. **C** C00391243

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11C.6331

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
FRIENDS OF SAM JOHNSON

Mailing Address 1611 Avenue K

City State Zip Code
Plano TX 75074

FEC ID number of contributing federal political committee. **C** C00250720

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11C.6310

Amount of Each Receipt this Period
1000.00

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 / 148
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
FRIENDS OF ZACH WAMP

Mailing Address P.O. Box 24804
651 E. Fourth St. Suite 200

City State Zip Code
Chattanooga TN 37422

FEC ID number of contributing federal political committee. **C** C00300681

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11C.6321

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
GEOFF DAVIS FOR CONGRESS

Mailing Address 3161 Dixie Highway
Suite F

City State Zip Code
Erlanger KY 41018

FEC ID number of contributing federal political committee. **C** C00369470

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11C.6333

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
GEORGIA POWER COMPANY FEDERAL PAC INC.

Mailing Address 241 Ralph McGill Boulevard NE

City State Zip Code
Atlanta GA 30308

FEC ID number of contributing federal political committee. **C** C00119776

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11C.6377

Amount of Each Receipt this Period
1000.00

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 / 148
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
GOOD FUND, THE

Mailing Address PO BOX 3404

City State Zip Code
ALEXANDRIA VA 22302

FEC ID number of contributing federal political committee. **C** C00409185

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	5

Transaction ID: SA11C.6304

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
GROWTH AND PROSPERITY POLITICAL ACTION COMMITTEE

Mailing Address 2610 Ridge Road Drive Suite 300

City State Zip Code
Alexandria VA 22302

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	5

Transaction ID: SA11C.6294

Amount of Each Receipt this Period
4000.00

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

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

Mailing Address 2250 N ROCK RD #118-224

City State Zip Code
WICHITA KS 67226

FEC ID number of contributing federal political committee. **C** C00342386

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	6	/	2	0	0	5

Transaction ID: SA11C.6375

Amount of Each Receipt this Period
1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 / 148
	<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)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. HOOSIER POLITICAL ACTION COMMITTEE (HOOSIER PAC)		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address PO BOX 77089		Transaction ID: SA11C.6308
City State Zip Code WASHINGTON DC 20013	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00338848	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. IRL POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address PO BOX 10460		Transaction ID: SA11C.6343
City State Zip Code BURKE VA 22009	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00402982	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. JOE WILSON FOR CONGRESS COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 5
Mailing Address Post Office Box 2145		Transaction ID: SA11C.6401
City State Zip Code West Columbia SC 29171	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00368522	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 3000.00		

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 100 / 148
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)
 Mailing Address 655 15th Street NW Suite 445
 City State Zip Code
 Washington DC 20005
 FEC ID number of contributing federal political committee. **C** C00236489
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 2 7 / 2 0 0 5
Transaction ID: SA11C.6388
 Amount of Each Receipt this Period
 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)
 Mailing Address 655 15th Street NW Suite 445
 City State Zip Code
 Washington DC 20005
 FEC ID number of contributing federal political committee. **C** C00236489
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 2 7 / 2 0 0 5
Transaction ID: SA11C.6389
 Amount of Each Receipt this Period
 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
LEWIS FOR CONGRESS COMMITTEE
 Mailing Address P.O. Box 247
 City State Zip Code
 Redlands CA 92373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 0 5
Transaction ID: SA11C.6398
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **11000.00**
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 / 148
	<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)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. LEWIS FOR CONGRESS COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 5
Mailing Address P.O. Box 247		Transaction ID: SA11C.6399
City State Zip Code Redlands CA 92373	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. LONGHORN PAC		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address PO Box 40385 Suite 300		Transaction ID: SA11C.6329
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00402602	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. MAJORITY IN CONGRESS PAC		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address 601 N Ferncreek Ave Suite 200		Transaction ID: SA11C.6292
City State Zip Code Orlando FL 32803	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00402909	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 / 148
	<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)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. MAJORITY INITIATIVE TO KEEP ELECTING REPUBLICANS FUND		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address P. O. Box 65796		Transaction ID: SA11C.6325
City Washington State DC Zip Code 20035	FEC ID number of contributing federal political committee. C C00370791	Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) B. MCCRERY FOR CONGRESS COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address Post Office Box 52956 333 Texas Street Suite 1900		Transaction ID: SA11C.6408
City Shreveport State LA Zip Code 71135	FEC ID number of contributing federal political committee. C C00220186	Amount of Each Receipt this Period 67.66
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 67.66	

Full Name (Last, First, Middle Initial) C. MILEAD FUND		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address PO BOX 65796		Transaction ID: SA11C.6323
City WASHINGTON State DC Zip Code 20035	FEC ID number of contributing federal political committee. C C00377663	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	6067.66
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 / 148
	<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)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. NEUGEBAUER CONGRESSIONAL COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address P.O. Box 54175		Transaction ID: SA11C.6319
City Lubbock State TX Zip Code 79453	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00384016		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. NEW AMERICAN LEADERSHIP FUND		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address 1155 21st Street NW Suite 300		Transaction ID: SA11C.6300
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00384891		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. NORWOOD FOR CONGRESS		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 5
Mailing Address PO Box 499		Transaction ID: SA11C.6288
City Evans State GA Zip Code 30809	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00287367		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 / 148
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
OUTBACK STEAKHOUSE INC POLITICAL ACTION COMMITTEE

Mailing Address 2202 N WESTSHORE BOULEVARD 5TH FLO
OR

City State Zip Code
TAMPA FL 33607

FEC ID number of contributing federal political committee. **C** C00253153

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11C.6358

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
OXLEY FOR CONGRESS

Mailing Address PO BOX 2006

City State Zip Code
FINDLAY OH 45839

FEC ID number of contributing federal political committee. **C** C00142000

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11C.6302

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
PEOPLE FOR ENGLISH

Mailing Address PO BOX 1940

City State Zip Code
ERIE PA 16507

FEC ID number of contributing federal political committee. **C** C00283606

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: SA11C.6391

Amount of Each Receipt this Period
1000.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 105 / 148
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. PEOPLE FOR ENTERPRISE, TRADE, AND ECONOMIC GROWTH (PETE PAC)		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address 7804 Evening Lane		Transaction ID: SA11C.6352
City Alexandria	State VA	Zip Code 22306
FEC ID number of contributing federal political committee. C C00363770		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) B. PORTER FOR CONGRESS		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 7 / 2 0 0 5
Mailing Address PO Box 26087		Transaction ID: SA11C.6359
City Las Vegas	State NV	Zip Code 89126
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. PROCTER & GAMBLE COMPANY GOOD GOVERNMENT COMMITTEE (AKA P&G PAC), THE		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 6 / 2 0 0 5
Mailing Address One Procter & Gamble Plaza		Transaction ID: SA11C.6373
City Cincinnati	State OH	Zip Code 45202
FEC ID number of contributing federal political committee. C C00257329		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 106 / 148
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
PROSPERITY HELPS INSPIRE LIBERTY POLITICAL ACTION COMMITTEE (PHILPAC)
 Mailing Address PO BOX 26366
 City State Zip Code
 ALEXANDRIA VA 22313
 FEC ID number of contributing federal political committee. **C** C00375246
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5
Transaction ID: SA11C.6384
 Amount of Each Receipt this Period
 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
PROSPERITY PAC
 Mailing Address 7804 Evening Lane
 City State Zip Code
 Alexandria VA 22306
 FEC ID number of contributing federal political committee. **C** C00377689
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 4 / 2 0 0 5
Transaction ID: SA11C.6356
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
REFORM PAC
 Mailing Address PO BOX 15584
 City State Zip Code
 WASHINGTON DC 20003
 FEC ID number of contributing federal political committee. **C** C00315275
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 4 / 2 0 0 5
Transaction ID: SA11C.6337
 Amount of Each Receipt this Period
 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **6500.00**
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 107 / 148
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. RELY ON YOUR BELIEFS FUND		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 5
Mailing Address 209 Pennsylvania Avenue SE		Transaction ID: SA11C.6363
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00344648		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) B. REPUBLICAN MAJORITY FUND		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 5
Mailing Address PO Box 144 Suite 300		Transaction ID: SA11C.6386
City State Zip Code Alexandria VA 22313	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00296640		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00	

Full Name (Last, First, Middle Initial) C. ROGERS FOR CONGRESS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address Post Office Box 581		Transaction ID: SA11C.6282
City State Zip Code Brighton MI 48116	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00343863		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 / 148
	<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)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. ROGERS FOR CONGRESS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address Post Office Box 581		Transaction ID: SA11C.6411
City State Zip Code Brighton MI 48116	Amount of Each Receipt this Period 67.66	
FEC ID number of contributing federal political committee. C C00343863		In-kind - catering costs <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1067.66	

Full Name (Last, First, Middle Initial) B. ROS-LEHTINEN FOR CONGRESS		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 5
Mailing Address P O Box 52-2784		Transaction ID: SA11C.6365
City State Zip Code MIAMI FL 33152	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00280537		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. SCHWARZ FOR CONGRESS		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 5
Mailing Address POST OFFICE BOX 2063		Transaction ID: SA11C.6383
City State Zip Code BATTLE CREEK MI 49016	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C C00395822		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1567.66
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 / 148
	<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)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. SESSIONS FOR CONGRESS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address PO BOX 710		Transaction ID: SA11C.6413
City ROANOKE State TX Zip Code 76262	Amount of Each Receipt this Period 67.66	
FEC ID number of contributing federal political committee. C C00374645	In-kind - catering costs <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 67.66	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. SHELLEY MOORE CAPITO FOR CONGRESS		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 5
Mailing Address P.O. Box 11519		Transaction ID: SA11C.6290
City Charleston State WV Zip Code 25339	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C C00347849	In-kind - catering costs <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 500.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. TEXANS FOR HENRY BONILLA		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address P.O. Box 17292		Transaction ID: SA11C.6314
City San Antonio State TX Zip Code 78217	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00257402	In-kind - catering costs <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 1000.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1567.66
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 110 / 148
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
TROUTMAN SANDERS LLP POLITICAL ACTION COMMITTEE INC

Mailing Address 600 PEACHTREE ST NE SUITE 5200

City ATLANTA State GA Zip Code 30308

FEC ID number of contributing federal political committee. **C** C00311142

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: SA11C.6286

Amount of Each Receipt this Period
 500.00

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

B. Full Name (Last, First, Middle Initial)
UNITED IN FREEDOM

Mailing Address P.O. Box 1448

City Clifton Park State NY Zip Code 12065

FEC ID number of contributing federal political committee. **C** C00345033

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11C.6306

Amount of Each Receipt this Period
 1000.00

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

C. Full Name (Last, First, Middle Initial)
WALDEN FOR CONGRESS INC

Mailing Address PO Box 1091

City Hood River State OR Zip Code 97031

FEC ID number of contributing federal political committee. **C** C00333427

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11C.6327

Amount of Each Receipt this Period
 1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 111 / 148
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial)
A. WEYERHAEUSER COMPANY POLITICAL ACTION COMMITTEE

Mailing Address CH1M31

City State Zip Code
Federal Way WA 98063

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

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

Transaction ID: SA11C.6369

Amount of Each Receipt this Period
3000.00

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)	▶	113202.98

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 112 / 148
 (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
O MAXIE BURNS

Mailing Address 5417 NEWINGTON HIGHWAY

City State Zip Code
SYLVANIA GA 30467

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2100.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11D.6529

Amount of Each Receipt this Period
2100.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2100.00
TOTAL This Period (last page this line number only)	▶	2100.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 113 / 148
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input checked="" type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Farmers & Merchants Bank

Mailing Address 104 North Main Street
P.O. Box 559

City State Zip Code
Sylvania GA 30467

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
52920.49

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	3	/	2	0	0	5

Transaction ID: SA13B.6530

Amount of Each Receipt this Period
52678.08

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

SUBTOTAL of Receipts This Page (optional)	▶	52678.08
TOTAL This Period (last page this line number only)	▶	52678.08

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 / 148
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Bank of Newington		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 5
Mailing Address 224 Walton Street P.O. Box 68		Transaction ID: SA15.6407
City Newington State GA Zip Code 30446	Amount of Each Receipt this Period 181.76	
FEC ID number of contributing federal political committee. C		Interest <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 357.05	

Full Name (Last, First, Middle Initial) B. Bank of Newington		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address 224 Walton Street P.O. Box 68		Transaction ID: SA15.6406
City Newington State GA Zip Code 30446	Amount of Each Receipt this Period 176.53	
FEC ID number of contributing federal political committee. C		Interest <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 533.58	

Full Name (Last, First, Middle Initial) C. Farmers & Merchants Bank		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5
Mailing Address 104 North Main Street P.O. Box 559		Transaction ID: SA15.6418
City Sylvania State GA Zip Code 30467	Amount of Each Receipt this Period 132.72	
FEC ID number of contributing federal political committee. C		Interest <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 242.41	

SUBTOTAL of Receipts This Page (optional) ▶	491.01
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 / 148
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
Farmers & Merchants Bank

Mailing Address 104 North Main Street
P.O. Box 559

City State Zip Code
Sylvania GA 30467

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
53059.80

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 3 0 / 2 0 0 5

Transaction ID: SA15.6419

Amount of Each Receipt this Period
139.31

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

SUBTOTAL of Receipts This Page (optional)	▶	139.31
TOTAL This Period (last page this line number only)	▶	630.32

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Timothy R. Baker		Transaction ID: SB17.6497 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 5
Mailing Address 14 Mulberry Bluff Drive		Amount of Each Disbursement this Period 750.49 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Savannah State GA Zip Code 31406		
Purpose of Disbursement Travel expense reimbursement Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Timothy R. Baker		Transaction ID: SB17.6498 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 5
Mailing Address 14 Mulberry Bluff Drive		Amount of Each Disbursement this Period 4705.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Savannah State GA Zip Code 31406		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Timothy R. Baker		Transaction ID: SB17.6500 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 5
Mailing Address 14 Mulberry Bluff Drive		Amount of Each Disbursement this Period 4705.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Savannah State GA Zip Code 31406		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10161.83
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Bankcard Center		Transaction ID: SB17.6438 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 5
Mailing Address P.O. Box 569200		Amount of Each Disbursement this Period 746.78
City Dallas State TX Zip Code 75356	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit card payment - see memo entries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Bankcard Center		Transaction ID: SB17.6439 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address P.O. Box 569200		Amount of Each Disbursement this Period 766.81
City Dallas State TX Zip Code 75356	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit card payment - see memo entries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Bankcard Center		Transaction ID: SB17.6440 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address P.O. Box 569200		Amount of Each Disbursement this Period 1064.94
City Dallas State TX Zip Code 75356	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit card payment - see memo entries		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2578.53
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

<p>A. Elizabeth Barton</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 3173 Parkridge Crescent</p> <p>City Atlanta State GA Zip Code 30341</p> <p>Purpose of Disbursement Travel expense reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB17.6450</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="269.17"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>B. BP Oil</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 17874 Hwy 67</p> <p>City Statesboro State GA Zip Code 30458</p> <p>Purpose of Disbursement Credit card - travel expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB17.6569</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="28.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		<p>[MEMO ITEM]</p>

<p>C. BP Oil</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 17874 Hwy 67</p> <p>City Statesboro State GA Zip Code 30458</p> <p>Purpose of Disbursement Credit card - travel expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB17.6575</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="36.90"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		<p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="269.17"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Brown's Office Centre		Transaction ID: SB17.6544 Date of Disbursement 10 / 19 / 2005
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 42.75
City State Zip Code Sylvania GA 30467	Purpose of Disbursement Credit card - office supplies	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Brown's Office Centre		Transaction ID: SB17.6557 Date of Disbursement 11 / 21 / 2005
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 12.84
City State Zip Code Sylvania GA 30467	Purpose of Disbursement Credit card - office supplies	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Max Burns		Transaction ID: SB17.6473 Date of Disbursement 10 / 19 / 2005
Mailing Address 5417 Newington Hwy.		Amount of Each Disbursement this Period 804.00
City State Zip Code Sylvania GA 30467	Purpose of Disbursement Travel expense reimbursement	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	804.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 120 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Capitol Strategy Group Inc		Transaction ID: SB17.6445 Date of Disbursement 10 / 19 / 2005
Mailing Address 2451 Cumberland Parkway Suite 3265		Amount of Each Disbursement this Period 3889.02
City Atlanta State GA Zip Code 30339	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Consultant: Fundraising	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Complete Campaigns		Transaction ID: SB17.6510 Date of Disbursement 10 / 02 / 2005
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 15.00
City San Diego State CA Zip Code 92102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit card processing fee	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Complete Campaigns		Transaction ID: SB17.6511 Date of Disbursement 10 / 06 / 2005
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 50.00
City San Diego State CA Zip Code 92102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit card processing fee	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3954.02
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Complete Campaigns		Transaction ID: SB17.6521 Date of Disbursement 10 / 17 / 2005
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 100.00
City San Diego State CA Zip Code 92102	Purpose of Disbursement Credit card processing fee	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. Complete Campaigns		Transaction ID: SB17.6517 Date of Disbursement 10 / 31 / 2005
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 10.00
City San Diego State CA Zip Code 92102	Purpose of Disbursement Credit card processing fee	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) C. Complete Campaigns		Transaction ID: SB17.6516 Date of Disbursement 11 / 03 / 2005
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 17.50
City San Diego State CA Zip Code 92102	Purpose of Disbursement Credit card processing fee	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional) ▶	127.50
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Complete Campaigns		Transaction ID: SB17.6520 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 5
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 2.50
City San Diego State CA Zip Code 92102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit card processing fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Complete Campaigns		Transaction ID: SB17.6446 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 5
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 1350.00
City San Diego State CA Zip Code 92102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Campaign software	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Complete Campaigns		Transaction ID: SB17.6515 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 5
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 1.25
City San Diego State CA Zip Code 92102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit card processing fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1353.75
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Complete Campaigns		Transaction ID: SB17.6514 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 5
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 25.00
City San Diego State CA Zip Code 92102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit card processing fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Complete Campaigns		Transaction ID: SB17.6513 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 5
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 25.00
City San Diego State CA Zip Code 92102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit card processing fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Complete Campaigns		Transaction ID: SB17.6512 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 5
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 105.00
City San Diego State CA Zip Code 92102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit card processing fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	155.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

PAGE 124 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Complete Campaigns		Transaction ID: SB17.6522 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 7 / 2 0 0 5
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 105.00
City San Diego State CA Zip Code 92102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit card processing fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CompUSA		Transaction ID: SB17.6532 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 5
Mailing Address 242 Rob C. Daniel Jr. Pkwy.		Amount of Each Disbursement this Period 42.79
City Augusta State GA Zip Code 30901	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit card - office supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Crystal Tech		Transaction ID: SB17.6543 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 6135 North 7th Street Suite 101		Amount of Each Disbursement this Period 16.44
City Phoenix State AZ Zip Code 85014	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit card - web hosting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	105.00
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)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Crystal Tech		Transaction ID: SB17.6554 Date of Disbursement 11 / 21 / 2005
Mailing Address 6135 North 7th Street Suite 101		Amount of Each Disbursement this Period 16.44
City Phoenix State AZ Zip Code 85014	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit card - web hosting		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Emelyn Hunter CPA		Transaction ID: SB17.6452 Date of Disbursement 10 / 10 / 2005
Mailing Address 1115 South Main Street		Amount of Each Disbursement this Period 300.00
City Sylvania State GA Zip Code 30467	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Accounting		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Emelyn Hunter CPA		Transaction ID: SB17.6453 Date of Disbursement 11 / 21 / 2005
Mailing Address 1115 South Main Street		Amount of Each Disbursement this Period 300.00
City Sylvania State GA Zip Code 30467	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Accounting		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 126 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Fairfield Inn		Transaction ID: SB17.6573 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 10 Stephen S. Green Drive		Amount of Each Disbursement this Period 221.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Savannah State GA Zip Code 31408	[MEMO ITEM]	
Purpose of Disbursement Credit card - lodging		Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Farmers & Merchants Bank		Transaction ID: SB17.6465 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 104 North Main Street P.O. Box 559		Amount of Each Disbursement this Period 563.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Sylvania State GA Zip Code 30467	Category/ Type	
Purpose of Disbursement Payroll taxes		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Candidate Name	State: District:	

Full Name (Last, First, Middle Initial) C. Farmers & Merchants Bank		Transaction ID: SB17.6455 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 5
Mailing Address 104 North Main Street P.O. Box 559		Amount of Each Disbursement this Period 4.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Sylvania State GA Zip Code 30467	Category/ Type	
Purpose of Disbursement Payroll processing		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Candidate Name	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	568.58
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 127 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Farmers & Merchants Bank		Transaction ID: SB17.6467 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 5
Mailing Address 104 North Main Street P.O. Box 559		Amount of Each Disbursement this Period 2020.60
City Sylvania State GA Zip Code 30467	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll taxes Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Farmers & Merchants Bank		Transaction ID: SB17.6456 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 5
Mailing Address 104 North Main Street P.O. Box 559		Amount of Each Disbursement this Period 4.98
City Sylvania State GA Zip Code 30467	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll processing Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Farmers & Merchants Bank		Transaction ID: SB17.6468 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 5
Mailing Address 104 North Main Street P.O. Box 559		Amount of Each Disbursement this Period 2020.60
City Sylvania State GA Zip Code 30467	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll taxes Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4046.18
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 128 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Federal Express		Transaction ID: SB17.6560 Date of Disbursement 11 / 21 / 2005
Mailing Address 7929 Abercorn Street		Amount of Each Disbursement this Period 18.77
City Savannah State GA Zip Code 31406	Purpose of Disbursement Credit card - shipping	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Georgia Business Net Inc		Transaction ID: SB17.6461 Date of Disbursement 10 / 12 / 2005
Mailing Address P.O. Box 211006		Amount of Each Disbursement this Period 79.95
City Augusta State GA Zip Code 30917	Purpose of Disbursement Internet	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Georgia Business Net Inc		Transaction ID: SB17.6462 Date of Disbursement 11 / 13 / 2005
Mailing Address P.O. Box 211006		Amount of Each Disbursement this Period 79.95
City Augusta State GA Zip Code 30917	Purpose of Disbursement Internet	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	159.90
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 129 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. HostSouth Inc.		Transaction ID: SB17.6463 Date of Disbursement 11 / 13 / 2005
Mailing Address P.O. Box 8967		Amount of Each Disbursement this Period 2532.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Savannah State GA Zip Code 31412	Category/ Type	
Purpose of Disbursement Event equipment		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. ITC DeltaCom		Transaction ID: SB17.6469 Date of Disbursement 10 / 01 / 2005
Mailing Address P.O. Box 740597		Amount of Each Disbursement this Period 218.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30374	Category/ Type	
Purpose of Disbursement Telephone		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. ITC DeltaCom		Transaction ID: SB17.6470 Date of Disbursement 12 / 20 / 2005
Mailing Address P.O. Box 740597		Amount of Each Disbursement this Period 252.27 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30374	Category/ Type	
Purpose of Disbursement Telephone		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3002.77
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)

PAGE 130 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Keelan Commuications		Transaction ID: SB17.6471 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address P.O. Box 2776		Amount of Each Disbursement this Period 3150.52
City Arlington State VA Zip Code 22202	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Catering expense reimbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. Michelles the Pack and Ship		Transaction ID: SB17.6566 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 3412 Wrightsboro Road Suite 902		Amount of Each Disbursement this Period 92.84
City Augusta State GA Zip Code 30909	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit card - invitations	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. National Mail Services Inc.		Transaction ID: SB17.6474 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 3925 Roberts Road		Amount of Each Disbursement this Period 2115.45
City Martinez State GA Zip Code 30907	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising mailing costs	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	5265.97
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		Transaction ID: SB17.6476 Date of Disbursement																				
Mailing Address 320 FIRST STREET		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		0	1		2	0	0	5													
City WASHINGTON	State DC	Zip Code 20003																				
Purpose of Disbursement Blstat Fax		Amount of Each Disbursement this Period <table border="1"><tr><td>207.27</td></tr></table>	207.27																			
207.27																						
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:	Category/Type																					

Full Name (Last, First, Middle Initial) B. Office Depot		Transaction ID: SB17.6538 Date of Disbursement																				
Mailing Address 3675 Walton Way Extension		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		0	1		2	0	0	5													
City Augusta	State GA	Zip Code 30909																				
Purpose of Disbursement Credit card - office supplies		Amount of Each Disbursement this Period <table border="1"><tr><td>19.25</td></tr></table>	19.25																			
19.25																						
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:	Category/Type																					

Full Name (Last, First, Middle Initial) C. Office Depot		Transaction ID: SB17.6539 Date of Disbursement																				
Mailing Address 3675 Walton Way Extension		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		0	1		2	0	0	5													
City Augusta	State GA	Zip Code 30909																				
Purpose of Disbursement Credit card - office supplies		Amount of Each Disbursement this Period <table border="1"><tr><td>55.74</td></tr></table>	55.74																			
55.74																						
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:	Category/Type																					

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>207.27</td></tr></table>	207.27
207.27		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 132 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Office Depot		Transaction ID: SB17.6548 Date of Disbursement 10 / 19 / 2005
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 79.15
City Augusta State GA Zip Code 30909	Purpose of Disbursement Credit card - office supplies	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Office Depot		Transaction ID: SB17.6549 Date of Disbursement 10 / 19 / 2005
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 26.74
City Augusta State GA Zip Code 30909	Purpose of Disbursement Credit card - office supplies	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Office Depot		Transaction ID: SB17.6571 Date of Disbursement 11 / 21 / 2005
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 21.06
City Augusta State GA Zip Code 30909	Purpose of Disbursement Credit card - office supplies	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" 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)

PAGE 133 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Office Depot		Transaction ID: SB17.6572 Date of Disbursement 11 / 21 / 2005	
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 75.27	
City Augusta State GA Zip Code 30909	Purpose of Disbursement Credit card - office supplies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

Full Name (Last, First, Middle Initial) B. Office Max		Transaction ID: SB17.6555 Date of Disbursement 11 / 21 / 2005	
Mailing Address 715 Northside Drive East		Amount of Each Disbursement this Period 151.91	
City Statesboro State GA Zip Code 30458	Purpose of Disbursement Credit card - office supplies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

Full Name (Last, First, Middle Initial) C. Olsen & Shuvalov		Transaction ID: SB17.6478 Date of Disbursement 11 / 13 / 2005	
Mailing Address 1609 Shoal Creek Blvd. #203		Amount of Each Disbursement this Period 1296.36	
City Austin State TX Zip Code 78701	Purpose of Disbursement Printing	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

SUBTOTAL of Disbursements This Page (optional) ▶	1296.36
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 134 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Oriental Trading Company		Transaction ID: SB17.6580 Date of Disbursement 11 / 21 / 2005
Mailing Address P.O. Box 2308		Amount of Each Disbursement this Period 65.20
City Omaha State NE Zip Code 68103	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit card - decorations	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Nan C. Palmer		Transaction ID: SB17.6505 Date of Disbursement 10 / 07 / 2005
Mailing Address 705 Wood Valley Road		Amount of Each Disbursement this Period 200.46
City Waynesboro State GA Zip Code 30830	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Insurance reimbursement	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Nan C. Palmer		Transaction ID: SB17.6506 Date of Disbursement 11 / 01 / 2005
Mailing Address 705 Wood Valley Road		Amount of Each Disbursement this Period 1713.53
City Waynesboro State GA Zip Code 30830	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Salary	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1913.99
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Nan C. Palmer		Transaction ID: SB17.6507 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 5
Mailing Address 705 Wood Valley Road		Amount of Each Disbursement this Period 200.46
City Waynesboro State GA Zip Code 30830	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Insurance reimbursement Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Nan C. Palmer		Transaction ID: SB17.6508 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 5
Mailing Address 705 Wood Valley Road		Amount of Each Disbursement this Period 1713.53
City Waynesboro State GA Zip Code 30830	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Nan C. Palmer		Transaction ID: SB17.6509 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 5
Mailing Address 705 Wood Valley Road		Amount of Each Disbursement this Period 200.46
City Waynesboro State GA Zip Code 30830	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Insurance reimbursement Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2114.45
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 136 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. Phil Jones		Transaction ID: SB17.6482 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 5
Mailing Address 2001 Summer Ridge Drive		Amount of Each Disbursement this Period 1248.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Augusta State GA Zip Code 30904		
Purpose of Disbursement Photographer	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Phoenix-Commercial Printers		Transaction ID: SB17.6484 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 1026 Fenwick Street		Amount of Each Disbursement this Period 622.74 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Augusta State GA Zip Code 30901		
Purpose of Disbursement Printing	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Phoenix-Commercial Printers		Transaction ID: SB17.6485 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 5
Mailing Address 1026 Fenwick Street		Amount of Each Disbursement this Period 361.66 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Augusta State GA Zip Code 30901		
Purpose of Disbursement Printing	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2232.60
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Political Compliance Services Inc

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 373

City State Zip Code
Fairfax Station VA 22039

Purpose of Disbursement
Consultant: Compliance
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2006 Primary General Other (specify) ▼
State: District:

Transaction ID: SB17.6486
Date of Disbursement

10 / 07 / 2005

Amount of Each Disbursement this Period

750.00

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

B. Political Compliance Services Inc

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 373

City State Zip Code
Fairfax Station VA 22039

Purpose of Disbursement
Consultant: Compliance
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2006 Primary General Other (specify) ▼
State: District:

Transaction ID: SB17.6487
Date of Disbursement

11 / 13 / 2005

Amount of Each Disbursement this Period

750.00

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

C. Publix #522

Full Name (Last, First, Middle Initial)
Mailing Address 5500 Abercorn Street

City State Zip Code
Savannah GA 31405

Purpose of Disbursement
Credit card - catering
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2006 Primary General Other (specify) ▼
State: District:

Transaction ID: SB17.6558
Date of Disbursement

11 / 21 / 2005

Amount of Each Disbursement this Period

75.57

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 138 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. REPUBLICAN NATIONAL COMMITTEE		Transaction ID: SB17.6488	
Mailing Address 310 FIRST STREET SE		Date of Disbursement 10 / 13 / 2005	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 15000.00
Purpose of Disbursement Reimburse air travel		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Savannah Communication		Transaction ID: SB17.6562	
Mailing Address 11 Minus Avenue		Date of Disbursement 11 / 21 / 2005	
City Garden City	State GA	Zip Code 31406	Amount of Each Disbursement this Period 127.20
Purpose of Disbursement Credit card - production expense		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]
State: District:			

Full Name (Last, First, Middle Initial) C. SCM Associates Inc		Transaction ID: SB17.6490	
Mailing Address P.O. Box 720		Date of Disbursement 10 / 19 / 2005	
City Jaffery	State NH	Zip Code 03452	Amount of Each Disbursement this Period 2639.42
Purpose of Disbursement Printing		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	17639.42
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 139 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. SCM Associates Inc		Transaction ID: SB17.6491 Date of Disbursement 11 / 13 / 2005
Mailing Address P.O. Box 720		Amount of Each Disbursement this Period 1260.86 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Jaffery State NH Zip Code 03452	Category/ Type	
Purpose of Disbursement Printing		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. SCM Associates Inc		Transaction ID: SB17.6492 Date of Disbursement 11 / 21 / 2005
Mailing Address P.O. Box 720		Amount of Each Disbursement this Period 7070.92 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Jaffery State NH Zip Code 03452	Category/ Type	
Purpose of Disbursement Printing		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Target		Transaction ID: SB17.6576 Date of Disbursement 11 / 21 / 2005
Mailing Address 235 Robert C Daniel Jr. Pkwy		Amount of Each Disbursement this Period 10.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
City Augusta State GA Zip Code 30909	Category/ Type	
Purpose of Disbursement Credit card - fundraising supplies		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	8331.78
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 140 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. The Stoneridge Group LLC		Transaction ID: SB17.6493 Date of Disbursement 11 / 13 / 2005
Mailing Address 554 West Main Street Building A, Suite 200		Amount of Each Disbursement this Period 1062.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Buford State GA Zip Code 30518		
Purpose of Disbursement Website Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. The Westin Savannah Harbor Resort & Spa		Transaction ID: SB17.6495 Date of Disbursement 11 / 15 / 2005
Mailing Address One Resort Drive		Amount of Each Disbursement this Period 17590.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Savannah State GA Zip Code 31421		
Purpose of Disbursement Catering Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. US-Flag.com		Transaction ID: SB17.6564 Date of Disbursement 11 / 21 / 2005
Mailing Address 3 Wesco Drive		Amount of Each Disbursement this Period 36.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
City Export State PA Zip Code 15632		
Purpose of Disbursement Credit card - decorations Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	18653.48
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 141 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. USPS		Transaction ID: SB17.6540 Date of Disbursement 10 / 01 / 2005
Mailing Address 113 South Main Street		Amount of Each Disbursement this Period 185.00
City State Zip Code Sylvania GA 30467	Purpose of Disbursement Credit card - postage	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. USPS		Transaction ID: SB17.6541 Date of Disbursement 10 / 01 / 2005
Mailing Address 113 South Main Street		Amount of Each Disbursement this Period 440.00
City State Zip Code Sylvania GA 30467	Purpose of Disbursement Credit card - postage	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. USPS		Transaction ID: SB17.6501 Date of Disbursement 10 / 19 / 2005
Mailing Address 113 South Main Street		Amount of Each Disbursement this Period 126.00
City State Zip Code Sylvania GA 30467	Purpose of Disbursement Postage	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	126.00
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)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. USPS		Transaction ID: SB17.6502 Date of Disbursement 10 / 19 / 2005
Mailing Address 113 South Main Street		Amount of Each Disbursement this Period 150.00
City State Zip Code Sylvania GA 30467	Purpose of Disbursement Postage	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. USPS		Transaction ID: SB17.6503 Date of Disbursement 10 / 19 / 2005
Mailing Address 113 South Main Street		Amount of Each Disbursement this Period 37.00
City State Zip Code Sylvania GA 30467	Purpose of Disbursement Postage	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. USPS		Transaction ID: SB17.6550 Date of Disbursement 10 / 19 / 2005
Mailing Address 113 South Main Street		Amount of Each Disbursement this Period 10.55
City State Zip Code Sylvania GA 30467	Purpose of Disbursement Credit card - postage	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	187.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 143 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial) A. USPS		Transaction ID: SB17.6568 Date of Disbursement 11 / 21 / 2005
Mailing Address 113 South Main Street		Amount of Each Disbursement this Period 74.00
City State Zip Code Sylvania GA 30467	Purpose of Disbursement Credit card - postage	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Vesta AT&T Prepaid		Transaction ID: SB17.6546 Date of Disbursement 10 / 19 / 2005
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 81.89
City State Zip Code Augusta GA 30909	Purpose of Disbursement Credit card - telephone	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Vinocity Wine Bar & Restaurant		Transaction ID: SB17.6551 Date of Disbursement 10 / 19 / 2005
Mailing Address 36 - 13th Street		Amount of Each Disbursement this Period 509.29
City State Zip Code Atlanta GA 30309	Purpose of Disbursement Credit card - catering	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" 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)

PAGE 144 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Full Name (Last, First, Middle Initial)

A. Willis Consulting

Mailing Address 3126 Bransford Road

City Augusta State GA Zip Code 30909

Purpose of Disbursement
Travel expense reimbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.6504

Date of Disbursement

10 / 19 / 2005

Amount of Each Disbursement this Period

255.96

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

SUBTOTAL of Disbursements This Page (optional)

255.96

TOTAL This Period (last page this line number only)

87610.51

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

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

FOR LINE NUMBER:
(check only one)

PAGE 145 / 148

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

A. Full Name (Last, First, Middle Initial)
MAX BURNS FOR CONGRESS

Mailing Address PO BOX 1965

City SYLVANIA State GA Zip Code 30467

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: GA District: 12

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB18.6442

Date of Disbursement

/ /

Amount of Each Disbursement this Period

52593.08

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

SUBTOTAL of Disbursements This Page (optional)

52593.08

TOTAL This Period (last page this line number only)

52593.08

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 146 / 148
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 13a <input checked="" type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
FRIENDS OF MAX BURNS

Transaction ID: SC/10.6530

LOAN SOURCE Full Name (Last, First, Middle Initial) Farmers & Merchants Bank	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 104 North Main Street P.O. Box 559	
City Sylvania State GA ZIP Code 30467	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
52678.08	0.00	52678.08

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 1 2 D D 1 3 Y Y Y Y 2 0 0 5	12/13/06	8.0 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial) O MAXIE BURNS	Name of Employer
Mailing Address 5417 NEWINGTON HIGHWAY	Occupation
City Sylvania State GA ZIP Code 30467	Amount Guaranteed Outstanding: 52678.08
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	52678.08
TOTALS This Period (last page in this line only)	52678.08

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
 Information found on
 Page 147 / 148
 of Schedule C

Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full) FRIENDS OF MAX BURNS	FEC IDENTIFICATION NUMBER C00412544
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Back Ref ID: SC/10.6530

LENDING INSTITUTION (LENDER) Full Name Farmers & Merchants Bank	Amount of Loan 52678.08	Interest Rate (APR) 8.00 %
---	----------------------------	-------------------------------

Mailing Address 104 North Main Street P.O. Box 559	Date Incurred or Established 12 13 2005
City Sylvania State Zip Code GA 30467	Date Due 12/13/06

A. Has loan been restructured? No Yes If yes, date originally incurred : [] [] [] [] [] []

B. If line of credit, Total Outstanding balance : [] [] [] [] [] [] .00

Amount of this Draw: [] [] [] [] [] [] .00

C. Are other parties secondarily liable for the debt incurred?
 No Yes (Endorsers and guarantors must be reported on Sch. C)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
 No Yes If yes, specify: Land

What is the value of this collateral?
52678.08

Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: _____

What is the estimated value?
0.00

A depository account must be established pursuant to 11 CFR 100.82 and 100.142.

Date account established: [] [] [] [] [] []

Location of account Address: _____
 City, State, Zip: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name Emelyn Hunter Signature _____	DATE 04 12 2006
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H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:
 I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above.
 II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
 III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name _____ Signature _____	DATE [] [] [] [] [] []
Title _____	

Form/Schedule: **F3A**

Transaction ID:

This report is amended in response to the Commission's letter dated March 16, 2006. The gross receipts for the primary election have been amended. In response to the Commission's question regarding the loan reported on this report, a hard copy of the Scheduled C-1 has been signed and forwarded to the Commission with a copy of the loan agreement.