

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
NEUGEBAUER CONGRESSIONAL COMMITTEE

ADDRESS (number and street) P.O. Box 54175  
 Check if different than previously reported. (ACC)  
Lubbock TX 79453

2. **FEC IDENTIFICATION NUMBER** C00384016  
**CITY** **STATE** **ZIP CODE** **STATE** **DISTRICT**  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)  
TX 19

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

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

5. Covering Period 04 01 2005 through 06 30 2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer JAMES P. CUMMINGS, TREASURER

Signature of Treasurer Electronically Filed by JAMES P. CUMMINGS, TREASURER Date 09 29 2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

NEUGEBAUER CONGRESSIONAL COMMITTEE

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	205295.00	374741.52
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	288.92
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	205295.00	374452.60
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	78876.54	388521.38
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	7610.96
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	78876.54	380910.42
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>171445.45</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>220000.00</b>	

**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  
 NEUGEBAUER CONGRESSIONAL COMMITTEE

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To: 

M	M
0	6

D	D
3	0

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).....

99400.00

130912.75

(ii) Unitemized.....

895.00

3164.00

(iii) TOTAL of contributions

100295.00

134076.75

from individuals..... ▶

0.00

30.74

(b) Political Party Committees.....

105000.00

240634.03

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS (other than loans)

205295.00

374741.52

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

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

0.00

2595.14

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

100000.00

100000.00

(c) TOTAL LOANS

100000.00

100000.00

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

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

0.00

7610.96

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

0.00

0.00

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

305295.00

484947.62

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	78876.54	388521.38
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	100000.00	100000.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	100000.00	100000.00
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	288.92
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	288.92
21. OTHER DISBURSEMENTS.....	10000.00	22138.68
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	188876.54	510948.98

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	55026.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	305295.00
25. SUBTOTAL (add Line 23 and Line 24).....	360321.99
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	188876.54
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	171445.45

# 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 5 / 108
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Action Committee for Rural Electrification		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2005
Mailing Address 4301 Wilson Blvd		Transaction ID: 50711.C5002
City Arlington	State VA	Zip Code 22203-1867
FEC ID number of contributing federal political committee. <b>C</b> C00002972		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt <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) <b>B.</b> AFLAC Incorporated PAC		Date of Receipt M M / D D / Y Y Y Y Y 06 / 02 / 2005
Mailing Address 1932 Wynnton Road		Transaction ID: 50711.C4842
City Columbus	State GA	Zip Code 31999-0001
FEC ID number of contributing federal political committee. <b>C</b> C00034157		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt <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) <b>C.</b> American Bankers Association PAC		Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2005
Mailing Address 1120 Connecticut Ave NW		Transaction ID: 50711.C4797
City Washington	State DC	Zip Code 20036-3905
FEC ID number of contributing federal political committee. <b>C</b> C00004275		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Receipt <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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SG-2003	Election Cycle-to-Date ▼ 9000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	7000.00
<b>TOTAL</b> 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 6 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
American Bankers Association PAC

Mailing Address 1120 Connecticut Ave NW

City State Zip Code  
Washington DC 20036-3905

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
11000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 27 / 2005

Transaction ID: 50711.C4907

Amount of Each Receipt this Period  
2000.00

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

**B.** Full Name (Last, First, Middle Initial)  
American Crystal Sugar Company PAC

Mailing Address 101 3rd St N

City State Zip Code  
Moorhead MN 56560-1952

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 06 / 2005

Transaction ID: 50711.C4841

Amount of Each Receipt this Period  
2000.00

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

**C.** Full Name (Last, First, Middle Initial)  
American Medical Association

Mailing Address 1101 Vermont Ave NW

City State Zip Code  
Washington DC 20005-3519

FEC ID number of contributing federal political committee. **C** C70001847

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
Debt-2004

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 06 / 2005

Transaction ID: 50711.C4802

Amount of Each Receipt this Period  
5000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	9000.00
<b>TOTAL</b> 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 7 / 108
	(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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. American Medical Association</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 5
Mailing Address 1101 Vermont Ave NW		Transaction ID: 50711.C4803
City Washington	State DC	Zip Code 20005-3519
FEC ID number of contributing federal political committee. <b>C</b> C70001847		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Receipt <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 ▼ 10000.00	

Full Name (Last, First, Middle Initial) <b>B. American Sugarbeet Growers Assn. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 5
Mailing Address 1156 15th St NW		Transaction ID: 50711.C4809
City Washington	State DC	Zip Code 20005-1704
FEC ID number of contributing federal political committee. <b>C</b> C00167684		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt <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) <b>C. Andrews &amp; Kurth PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 5
Mailing Address 600 Travis St Suite 400		Transaction ID: 50711.C4880
City Houston	State TX	Zip Code 77002-3009
FEC ID number of contributing federal political committee. <b>C</b> C00089540		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt <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	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7000.00
<b>TOTAL</b> 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 / 108
	<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)  
**NEUGEBAUER CONGRESSIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Associated Builders and Contractors</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 06 / 2005	
Mailing Address 1300 17th St N Suite 800		<b>Transaction ID: 50711.C4804</b>	
City State Zip Code Arlington VA 22209-3811		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C C70003355</b>		Receipt <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>B. Associated General Contractors of America</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2005	
Mailing Address 333 John Carlyle St Ste 200		<b>Transaction ID: 50711.C4973</b>	
City State Zip Code Alexandria VA 22314-5770		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C C00082917</b>		Receipt <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>C. Bank of America Corporation PAC</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 19 / 2005	
Mailing Address 730 15th St NW		<b>Transaction ID: 50711.C4807</b>	
City State Zip Code Washington DC 20005-1001		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C C00043489</b>		Receipt <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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Debt-2003		Election Cycle-to-Date ▼ 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> 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 9 / 108
	(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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Bank of America Corporation PAC

Mailing Address 730 15th St NW

City State Zip Code  
Washington DC 20005-1001

FEC ID number of contributing federal political committee. **C** C00043489

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

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

**Transaction ID:** 50711.C4837

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Brinker International PAC

Mailing Address 6820 Lyndon B Johnson Fwy

City State Zip Code  
Dallas TX 75240-6511

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

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  
0 6 / 3 0 / 2 0 0 5

**Transaction ID:** 50711.C4983

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Burlington Northern Santa Fe Corporation

Mailing Address PO Box 961039  
3017 Lou Menk Drive

City State Zip Code  
Fort Worth TX 76161-0039

FEC ID number of contributing federal political committee. **C** C00235739

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  
0 6 / 3 0 / 2 0 0 5

**Transaction ID:** 50711.C5009

Amount of Each Receipt this Period  
2000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> 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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Cargill Incorporated PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 5
Mailing Address PO Box 9300 Department 5		Transaction ID: 50711.C4899
City State Zip Code Minneapolis MN 55440-9300	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00067884		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer  Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ G-2004	Occupation  Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Cargill Incorporated PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 5
Mailing Address PO Box 9300 Department 5		Transaction ID: 50711.C4900
City State Zip Code Minneapolis MN 55440-9300	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00067884		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer  Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> ChevronTexaco Employees PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 5
Mailing Address 6001 Bollinger Canyon Rd Building A2108		Transaction ID: 50711.C4823
City State Zip Code San Ramon CA 94583-2324	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00035006		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer  Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Election Cycle-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> 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 11 / 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

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

Mailing Address 1500 Market St

City Philadelphia State PA Zip Code 19102-2150

FEC ID number of contributing federal political committee. **C** C00248716

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  
 0 6 / 3 0 / 2 0 0 5

**Transaction ID:** 50711.C4974

Amount of Each Receipt this Period  
 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Committee for Advancement of Cotton

Mailing Address PO Box 820292

City Memphis State TN Zip Code 38182-0292

FEC ID number of contributing federal political committee. **C** C00023028

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

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

**Transaction ID:** 50711.C4901

Amount of Each Receipt this Period  
 2000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Council of Insurance Agents & Brokers

Mailing Address 701 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2661

FEC ID number of contributing federal political committee. **C** C00039578

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  
 0 6 / 3 0 / 2 0 0 5

**Transaction ID:** 50711.C5010

Amount of Each Receipt this Period  
 1000.00

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

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

**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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Council of Insurance Agents & Brokers

Mailing Address 701 Pennsylvania Ave NW

City State Zip Code  
Washington DC 20004-2661

FEC ID number of contributing federal political committee. **C** C00039578

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  
06 / 30 / 2005

**Transaction ID:** 50711.C4975

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Credit Union Legislative Action Council

Mailing Address 601 Pennsylvania Ave NW  
South Building Suite 600

City State Zip Code  
Washington DC 20004-2601

FEC ID number of contributing federal political committee. **C** C00007880

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  
06 / 30 / 2005

**Transaction ID:** 50711.C4977

Amount of Each Receipt this Period  
2000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Dairy Farmers Of America Inc DEPAC

Mailing Address PO Box 909700

City State Zip Code  
Kansas City MO 64190-9700

FEC ID number of contributing federal political committee. **C** C00001388

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  
05 / 02 / 2005

**Transaction ID:** 50711.C4815

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> 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 13 / 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Dairy Farmers Of America Inc DEPAC

Mailing Address PO Box 909700

City State Zip Code  
Kansas City MO 64190-9700

FEC ID number of contributing federal political committee. **C** C00001388

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 Y  
 06 / 30 / 2005

**Transaction ID:** 50711.C4988

Amount of Each Receipt this Period  
 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Dealers Election Action Committee PAC

Mailing Address 8400 Westpark Dr

City State Zip Code  
Mc Lean VA 22102-5116

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 28 / 2005

**Transaction ID:** 50711.C4813

Amount of Each Receipt this Period  
 2000.00

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

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

Mailing Address PO Box 365

City State Zip Code  
Washington DC 20044-0365

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

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  
 06 / 30 / 2005

**Transaction ID:** 50711.C4987

Amount of Each Receipt this Period  
 1000.00

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

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

**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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Dominion PAC Mailing Address PO Box 26666 P.O. Box 26666 City Richmond State VA Zip Code 23261-6666 FEC ID number of contributing federal political committee. <b>C</b> C00108209 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		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 7 / 2 0 0 5 Transaction ID: 50711.C4908 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
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<b>B.</b> Full Name (Last, First, Middle Initial) Duke Energy PAC Mailing Address 422 S Church St City Charlotte State NC Zip Code 28202-1900 FEC ID number of contributing federal political committee. <b>C</b> C00083535 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		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 5 Transaction ID: 50711.C4812 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
--	--	---

<b>C.</b> Full Name (Last, First, Middle Initial) Electric Delivery PAC Mailing Address 1601 Bryan St City Dallas State TX Zip Code 75201-3401 FEC ID number of contributing federal political committee. <b>C</b> C00255992 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		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 3 / 2 0 0 5 Transaction ID: 50711.C4828 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> 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 15 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

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

Mailing Address 1601 Bryan St

City State Zip Code  
Dallas TX 75201-3401

FEC ID number of contributing federal political committee. **C** C00255992

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  
06 / 30 / 2005

**Transaction ID:** 50711.C4986

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
ENPAC Federal

Mailing Address 101 Constitution Ave NW  
Suite 200 East

City State Zip Code  
Washington DC 20001-2133

FEC ID number of contributing federal political committee. **C** C00363879

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
SG-2003

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 09 / 2005

**Transaction ID:** 50711.C4822

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Farm Credit Council PAC

Mailing Address 50 F St NW  
Suite 900

City State Zip Code  
Washington DC 20001-1530

FEC ID number of contributing federal political committee. **C** C00193631

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 29 / 2005

**Transaction ID:** 50711.C4944

Amount of Each Receipt this Period  
5000.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Farm Credit Council PAC

Mailing Address 50 F St NW  
Suite 900

City Washington State DC Zip Code 20001-1530

FEC ID number of contributing federal political committee. **C** C00193631

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 11000.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2005

Transaction ID: 50711.C4943

Amount of Each Receipt this Period  
5000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Federal National Mortgage Assn. PAC

Mailing Address 3900 Wisconsin Ave NW

City Washington State DC Zip Code 20016-2806

FEC ID number of contributing federal political committee. **C** C00393520

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2005

Transaction ID: 50711.C4833

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
First Command Political Action Committee

Mailing Address 1 Firstcomm Plz  
Po Box 2387

City Fort Worth State TX Zip Code 76109-4953

FEC ID number of contributing federal political committee. **C** C00325647

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2005

Transaction ID: 50711.C4985

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7000.00
<b>TOTAL</b> 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 17 / 108
	(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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Florida Power & Light PAC

Mailing Address PO Box 1400

City State Zip Code  
West Palm Beach FL 33402-1400

FEC ID number of contributing federal political committee. **C** C00064774

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  
04 / 25 / 2005

**Transaction ID:** 50711.C4810

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address 1299 Pennsylvania Ave NW  
Ste 1100

City State Zip Code  
Washington DC 20004-2400

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

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  
05 / 24 / 2005

**Transaction ID:** 50711.C4838

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Independent Community Bankers Of America

Mailing Address 1 Thomas Cir NW  
Suite 400

City State Zip Code  
Washington DC 20005-5801

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 27 / 2005

**Transaction ID:** 50711.C4909

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> 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 18 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Independent Insurance Agents Of America</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 21 / 2005	
Mailing Address 412 First Street, SE Suite 300		Transaction ID: 50711.C4902	
City State Zip Code Washington DC 20003-1804		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00022343		Receipt <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>B. Independent Insurance Agents Of America</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2005	
Mailing Address 412 First Street, SE Suite 300		Transaction ID: 50711.C4976	
City State Zip Code Washington DC 20003-1804		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00022343		Receipt <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	

Full Name (Last, First, Middle Initial) <b>C. J. P. Morgan Chase &amp; Co. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 28 / 2005	
Mailing Address 270 Park Ave		Transaction ID: 50711.C4936	
City State Zip Code New York NY 10017-2014		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00003830		Receipt <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	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> 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 / 108
	<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)  
**NEUGEBAUER CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
 Koch Industries, Inc PAC

Mailing Address **655 15th St NW  
 Suite 445**

City **Washington** State **DC** Zip Code **20005-5701**

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 ▼ **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 30 / 2005**

**Transaction ID: 50711.C5005**

Amount of Each Receipt this Period  
**1000.00**

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

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

Mailing Address **1550 Crystal Dr  
 Crystal Square Two, Suite 300**

City **Arlington** State **VA** Zip Code **22202-4112**

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

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  
**06 / 27 / 2005**

**Transaction ID: 50711.C4911**

Amount of Each Receipt this Period  
**1000.00**

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

**C.** Full Name (Last, First, Middle Initial)  
 Mortgage Bankers Association of America

Mailing Address **1919 Pennsylvania Ave NW**

City **Washington** State **DC** Zip Code **20006-3400**

FEC ID number of contributing federal political committee. **C C00004812**

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  
**05 / 13 / 2005**

**Transaction ID: 50711.C4829**

Amount of Each Receipt this Period  
**1000.00**

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 / 108
	(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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mortgage Bankers Association of America</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2005	
Mailing Address 1919 Pennsylvania Ave NW		Transaction ID: 50711.C5004	
City Washington	State DC	Amount of Each Receipt this Period 1000.00	
Zip Code 20006-3400		Receipt <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. <b>C</b> C00004812			
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 ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. National Association of Health Underwriters</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 06 / 2005	
Mailing Address 2000 14th St N Suite 450		Transaction ID: 50711.C4840	
City Arlington	State VA	Amount of Each Receipt this Period 1000.00	
Zip Code 22201-2500		Receipt <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. <b>C</b> C00283135			
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 ▼ 1250.00	

Full Name (Last, First, Middle Initial) <b>C. National Association of Wheat Growers PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 28 / 2005	
Mailing Address 415 2nd St NE Suite 300		Transaction ID: 50711.C4937	
City Washington	State DC	Amount of Each Receipt this Period 1000.00	
Zip Code 20002-4900		Receipt <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. <b>C</b> C00139964			
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	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> 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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) National Beer Wholesalers Association PAC Mailing Address 1101 King St Suite 600 City Alexandria State VA Zip Code 22314-2950 FEC ID number of contributing federal political committee. <b>C</b> C00144766 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 ▼ 7500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 5 Transaction ID: 50711.C4984 Amount of Each Receipt this Period 2500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
--	--	---

B. Full Name (Last, First, Middle Initial) National Cattlemens Beef Association PAC Mailing Address 9110 E Nichols Ave POBox 3469 City Centennial State CO Zip Code 80112-3450 FEC ID number of contributing federal political committee. <b>C</b> C00028787 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		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 3 / 2 0 0 5 Transaction ID: 50711.C4878 Amount of Each Receipt this Period 2000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
--	--	---

C. Full Name (Last, First, Middle Initial) National Roofing Contractors Association Mailing Address 324 4th St NE City Washington State DC Zip Code 20002-5821 FEC ID number of contributing federal political committee. <b>C</b> C00244863 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		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 5 Transaction ID: 50711.C4979 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5500.00
<b>TOTAL</b> 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 22 / 108
	(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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. National Turkey Federation PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 5	
Mailing Address 1225 New York Ave NW Suite 400		<b>Transaction ID: 50711.C4834</b>	
City State Zip Code Washington DC 20005-6156		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C C00076182</b>		Receipt <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>B. NRA Political Victory Fund</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 5	
Mailing Address 11250 Waples Mill Rd		<b>Transaction ID: 50711.C4903</b>	
City State Zip Code Fairfax VA 22030-7400		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C C00053553</b>		Receipt <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 ▼ 5950.00	

Full Name (Last, First, Middle Initial) <b>C. Plumbing Heating Cooling Contractors-PHC</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 5	
Mailing Address 180 S Washington St		<b>Transaction ID: 50711.C4980</b>	
City State Zip Code Falls Church VA 22046-2900		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C C00157875</b>		Receipt <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 ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> 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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Precision Metalforming Association Voice		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2005	
Mailing Address 6363 Oak Tree Blvd		Transaction ID: 50711.C4981	
City State Zip Code Independence OH 44131-2556		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00082271		Receipt <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>B.</b> Promoting Republicans You Can Elect		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2005	
Mailing Address 1155 21st St NW Suite 300		Transaction ID: 50711.C4913	
City State Zip Code Washington DC 20036-3308		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00330068		Receipt <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) <b>C.</b> Property Casualty Insurers Association		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2005	
Mailing Address 2600 S River Rd		Transaction ID: 50711.C4830	
City State Zip Code Des Plaines IL 60018-3203		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00066472		Receipt <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	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> 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 24 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) RJ Reynolds PAC Mailing Address PO Box 718 City Winston Salem State NC Zip Code 27102-0718 FEC ID number of contributing federal political committee. <b>C</b> C00042002 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		Date of Receipt <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>0</td><td>5</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: 50711.C4832 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> Receipt <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	0	5		1	6		2	0	0	5	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	6		2	0	0	5														
1000.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) RJ Reynolds PAC Mailing Address PO Box 718 City Winston Salem State NC Zip Code 27102-0718 FEC ID number of contributing federal political committee. <b>C</b> C00042002 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 ▼ 2000.00		Date of Receipt <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>0</td><td>6</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 50711.C4905 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> Receipt <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	0	6		2	2		2	0	0	5	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		2	2		2	0	0	5														
1000.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) Schwans PAC Mailing Address 115 W College Dr City Marshall State MN Zip Code 56258-1747 FEC ID number of contributing federal political committee. <b>C</b> C00360362 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ G-2004 Election Cycle-to-Date ▼ 1000.00		Date of Receipt <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>0</td><td>4</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> Transaction ID: 50711.C4805 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> Receipt <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	0	4		1	4		2	0	0	5	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		1	4		2	0	0	5														
1000.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>3000.00</b>
<b>TOTAL</b> 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 25 / 108
	(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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

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

Mailing Address 1301 K St NW  
Suite 600 East Tower

City Washington State DC Zip Code 20005-7002

FEC ID number of contributing federal political committee. **C** C00216127

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 21 / 2005

**Transaction ID:** 50711.C4904

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
South Texas Sugar Cane Producers

Mailing Address PO Drawer A

City Santa Rosa State TX Zip Code 78593

FEC ID number of contributing federal political committee. **C** C00185686

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
G-2004

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 14 / 2005

**Transaction ID:** 50711.C4806

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
South Texas Sugar Cane Producers

Mailing Address PO Drawer A

City Santa Rosa State TX Zip Code 78593

FEC ID number of contributing federal political committee. **C** C00185686

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2005

**Transaction ID:** 50711.C4845

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> 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 26 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Textron Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 27 / 2005	
Mailing Address 40 Westminster St		<b>Transaction ID: 50711.C4914</b>	
City State Zip Code Providence RI 02903-2525		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00123612		Receipt <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>B. Trucking PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 19 / 2005	
Mailing Address 430 1st St SE		<b>Transaction ID: 50711.C4836</b>	
City State Zip Code Washington DC 20003-1826		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00002881		Receipt <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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ G-2004		Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Union Pacific Corp. Fund For Effective G</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2005	
Mailing Address 600 13th St NW Suite 340		<b>Transaction ID: 50711.C4982</b>	
City State Zip Code Washington DC 20005-3005		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00010470		Receipt <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	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> 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 27 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. United States Beet Sugar Association Pol</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 0 5	
Mailing Address 1156 15th St NW Suite 1019		Transaction ID: 50711.C4846	
City State Zip Code Washington DC 20005-1704		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00063586		Receipt <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 ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. US Rice Producers PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 5	
Mailing Address 300 Independence Ave. SE Suite 700		Transaction ID: 50711.C4808	
City State Zip Code Washington DC 20003		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00383661		Receipt <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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SG-2003		Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. USA Rice Federation</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 5	
Mailing Address 4301 Fairfax Dr		Transaction ID: 50711.C4801	
City State Zip Code Arlington VA 22203-1633		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00308478		Receipt <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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SG-2003		Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2500.00
<b>TOTAL</b> 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 28 / 108
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
UST Inc. Executives Administrators And M

Mailing Address 100 W Putnam Ave

City State Zip Code  
Greenwich CT 06830-5342

FEC ID number of contributing federal political committee. **C** C00104851

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2005

Transaction ID: 50711.C4816

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Xcel Energy Employee Political Action Co

Mailing Address 1225 17th St Suite 900

City State Zip Code  
Denver CO 80202-5534

FEC ID number of contributing federal political committee. **C** C00107771

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 02 / 2005

Transaction ID: 50711.C4843

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	105000.00

**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 29 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. A. L. Ballard</b>		Date of Receipt MM / DD / YYYY 06 / 14 / 2005
Mailing Address 1021 Main St		<b>Transaction ID: 50711.C4881</b>
City Houston	State TX	Zip Code 77002-6506
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer Ballard Exploration Company	Occupation CEO	Receipt <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) <b>B. Nick Bamert</b>		Date of Receipt MM / DD / YYYY 06 / 20 / 2005
Mailing Address 201 State Highway 214		<b>Transaction ID: 50711.C4861</b>
City Muleshoe	State TX	Zip Code 79347-7247
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Bamert Seed Company	Occupation Executive	Receipt <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 ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. David Bass</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2005
Mailing Address 4201 Mockingbird Ln		<b>Transaction ID: 50711.C4945</b>
City Colleyville	State TX	Zip Code 76034-3842
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Self Employed	Occupation Physician	Receipt <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 ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> 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 / 108
	<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)  
**NEUGEBAUER CONGRESSIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Richard Mike Bennett

Mailing Address 5405 19th Street

City Lubbock State TX Zip Code 79407-2105

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

Name of Employer All Saints School Occupation Administrator

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
06 / 30 / 2005

**Transaction ID:** 50711.C4946

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Andrew Biar

Mailing Address 10026 Meadow Lake Ln

City Houston State TX Zip Code 77042-2916

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

Name of Employer Strategic Public Affairs Occupation President

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
06 / 10 / 2005

**Transaction ID:** 50711.C4848

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Philip Blalock

Mailing Address 108 Roberts Ln

City Alexandria State VA Zip Code 22314-4622

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

Name of Employer Triangle Associates Occupation Associate

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
05 / 02 / 2005

**Transaction ID:** 50711.C4818

Amount of Each Receipt this Period  
500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **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 31 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

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

Mailing Address 2111 Airport Fwy

City State Zip Code  
Euless TX 76040-3918

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

Name of Employer Occupation  
Bank of the West Banker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 12 / 2005

Transaction ID: 50406.C4789

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 818 Connecticut Ave NW  
Suite 1100

City State Zip Code  
Washington DC 20006-2701

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

Name of Employer Occupation  
The National Group Attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 13 / 2005

Transaction ID: 50711.C4824

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Eric Blumrosen

Mailing Address 1000 Louisiana St

City State Zip Code  
Houston TX 77002-5011

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

Name of Employer Occupation  
Gordon Wyrn Sewell, LLP Partner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2005

Transaction ID: 50711.C4947

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **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 32 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Doyce Boesch

Mailing Address 1201 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2437

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

Name of Employer Boesch & Company Occupation Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼ SG-2003

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	5

Transaction ID: 50711.C4798

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
David Bole

Mailing Address 1265 Ridgewood PI

City Houston State TX Zip Code 77055-5083

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

Name of Employer R & D Energy 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
0	6	/	1	4	/	2	0	0	5

Transaction ID: 50711.C4882

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Pete Bonds

Mailing Address PO Box 79590

City Fort Worth State TX Zip Code 76179-0590

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

Name of Employer Self Employed Occupation Rancher

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	5

Transaction ID: 50711.C4875

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> 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 33 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Donald Bricker

Mailing Address 4202 78th St

City Lubbock State TX Zip Code 79423-1905

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

Name of Employer Covenant Medical Group Occupation Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
06 / 30 / 2005

Transaction ID: 50711.C4949

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Sammie Bricker

Mailing Address 4202 78th St

City Lubbock State TX Zip Code 79423-1905

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

Name of Employer Not In Workforce Occupation Housewife

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
06 / 30 / 2005

Transaction ID: 50711.C4948

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 1417 College Pkwy

City Lewisville State TX Zip Code 75077-2809

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

Name of Employer Information Requested Occupation Partner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
06 / 30 / 2005

Transaction ID: 50711.C4991

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **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 34 / 108
	<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)  
**NEUGEBAUER CONGRESSIONAL COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Bobby Cox Mailing Address PO Box 16569 City State Zip Code <b>Fort Worth TX 76162-0569</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 14 2005</b> <b>Transaction ID: 50711.C4894</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2000.00</b>
Name of Employer Bobby Cox Companies, Inc. Occupation <b>President</b>	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼ <b>2000.00</b>		

<b>B.</b> Full Name (Last, First, Middle Initial) Bobby Cox Mailing Address PO Box 16569 City State Zip Code <b>Fort Worth TX 76162-0569</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 14 2005</b> <b>Transaction ID: 50912.C5053</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>-2000.00</b>
Name of Employer Bobby Cox Companies, Inc. Occupation <b>President</b>	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Redesignation FROM Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> Debt Reduction G-2004
Election Cycle-to-Date ▼ <b>2000.00</b>		

<b>C.</b> Full Name (Last, First, Middle Initial) Bobby Cox Mailing Address PO Box 16569 City State Zip Code <b>Fort Worth TX 76162-0569</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 14 2005</b> <b>Transaction ID: 50912.C5054</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2000.00</b>
Name of Employer Bobby Cox Companies, Inc. Occupation <b>President</b>	Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ G-2004	Redesignation TO Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> Debt Reduction G-2004
Election Cycle-to-Date ▼ <b>2000.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>2000.00</b>
<b>TOTAL</b> 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 35 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Bobby Cox

Mailing Address PO Box 16569

City State Zip Code  
Fort Worth TX 76162-0569

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

Name of Employer Bobby Cox Companies, Inc. Occupation President

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 4100.00

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2005

Transaction ID: 50711.C4931

Amount of Each Receipt this Period  
2100.00

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

**B.** Full Name (Last, First, Middle Initial)  
Leona Cox

Mailing Address PO Box 16569

City State Zip Code  
Fort Worth TX 76162-0569

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

Name of Employer Not In Workforce Occupation Not In Workforce

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

Date of Receipt  
MM / DD / YYYY  
06 / 14 / 2005

Transaction ID: 50711.C4895

Amount of Each Receipt this Period  
2000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Leona Cox

Mailing Address PO Box 16569

City State Zip Code  
Fort Worth TX 76162-0569

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

Name of Employer Not In Workforce Occupation Not In Workforce

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

Date of Receipt  
MM / DD / YYYY  
06 / 14 / 2005

Transaction ID: 50912.C5051

Amount of Each Receipt this Period  
-2000.00

Redesignation FROM Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Debt Reduction G-2004

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4100.00</b>
<b>TOTAL</b> 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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Leona Cox

Mailing Address PO Box 16569

City State Zip Code  
Fort Worth TX 76162-0569

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

Name of Employer Not In Workforce  
Occupation Not In Workforce

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
G-2004

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
06 / 14 / 2005

**Transaction ID:** 50912.C5052

Amount of Each Receipt this Period  
2000.00

Redesignation TO Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Debt Reduction G-2004

**B.** Full Name (Last, First, Middle Initial)  
Jerry Crews

Mailing Address 8930 Sedgemoor Dr

City State Zip Code  
Tomball TX 77375-5156

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

Name of Employer Energy Quest Management, LLC  
Occupation Chief Operating Officer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 14 / 2005

**Transaction ID:** 50711.C4883

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Terry Crofoot

Mailing Address PO Box 53188

City State Zip Code  
Lubbock TX 79453-3188

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

Name of Employer Self Employed  
Occupation Ranching & Investments

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2005

**Transaction ID:** 50711.C4921

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **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 37 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Joyce Crooker

Mailing Address 2802 Parkway Rd

City State Zip Code  
Big Spring TX 79720-6348

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  
0 6 / 2 2 / 2 0 0 5

Transaction ID: 50711.C4923

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
William Crooker

Mailing Address 2802 Parkway Rd

City State Zip Code  
Big Spring TX 79720-6348

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

Name of Employer Howard County Occupation County Commissioner

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  
0 6 / 2 2 / 2 0 0 5

Transaction ID: 50711.C4922

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Hannah Curtis

Mailing Address PO Box 7673

City State Zip Code  
Abilene TX 79608-7673

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 ▼ 675.00

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

Transaction ID: 50711.C4859

Amount of Each Receipt this Period  
500.00

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

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

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

**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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

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

Mailing Address 1918 River Oaks Rd

City State Zip Code  
Abilene TX 79605-4815

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

Name of Employer Skinnys, Inc. Occupation CEO

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2005

Transaction ID: 50711.C4862

Amount of Each Receipt this Period  
2100.00

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

**B.** Full Name (Last, First, Middle Initial)  
Johnnye Davis

Mailing Address 2541 Palo Verde Dr

City State Zip Code  
Odessa TX 79762-5136

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

Name of Employer Barron Supply Occupation CEO

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2005

Transaction ID: 50711.C4939

Amount of Each Receipt this Period  
2100.00

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

**C.** Full Name (Last, First, Middle Initial)  
James DuBose

Mailing Address 2300 Medford Ct E

City State Zip Code  
Fort Worth TX 76109-1131

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

Name of Employer Colonial Savings Occupation Banker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2005

Transaction ID: 50711.C4950

Amount of Each Receipt this Period  
500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4700.00**

**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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Brad Dunn

Mailing Address 362 Tynebridge Ln

City State Zip Code  
Houston TX 77024-7425

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

Name of Employer Occupation  
Pin Oak Investment Advisors Executive

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  
06 / 30 / 2005

Transaction ID: 50711.C4951

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
J. A. Elkins

Mailing Address 1001 Fannin St

City State Zip Code  
Houston TX 77002-6706

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

Name of Employer Occupation  
Houston Trust Comapny Investor

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  
06 / 30 / 2005

Transaction ID: 50711.C4997

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Nita Gibson

Mailing Address 5306 69th St

City State Zip Code  
Lubbock TX 79424-1527

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) ▼

250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 20 / 2005

Transaction ID: 50711.C4874

Amount of Each Receipt this Period  
250.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Richard Gillham

Mailing Address 33 Sunnysgrove Dr

City State Zip Code  
Odessa TX 79761-2226

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  
06 / 29 / 2005

Transaction ID: 50711.C4940

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Tom Glass

Mailing Address 11510 Summerhill Ln

City State Zip Code  
Houston TX 77024-5218

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

Name of Employer Occupation  
Exxon Mobil Systems Analyst

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  
06 / 10 / 2005

Transaction ID: 50711.C4849

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Terry Grantham

Mailing Address 8404 Salem Ave

City State Zip Code  
Lubbock TX 79424-4122

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

Name of Employer Occupation  
Craig, Terrill & Hale, LLP Attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1050.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 30 / 2005

Transaction ID: 50711.C4952

Amount of Each Receipt this Period  
1050.00

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

**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: (check only one)	PAGE 41 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

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

Mailing Address 1608 Ashland Ave

City State Zip Code  
Fort Worth TX 76107-3808

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

Name of Employer Occupation  
Hayes Boone LLP 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  
06 / 10 / 2005

Transaction ID: 50711.C4877

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Wayne Greenwalt

Mailing Address 35 W Lakemist Cir

City State Zip Code  
Spring TX 77381-6172

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

Name of Employer Occupation  
Energy Quest 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  
06 / 14 / 2005

Transaction ID: 50711.C4884

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Richard Griffis

Mailing Address 5203 Riverside Oaks Dr

City State Zip Code  
Humble TX 77345-3052

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

Name of Employer Occupation  
Griffis & Associates, LLC Engineer

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  
06 / 30 / 2005

Transaction ID: 50711.C4998

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **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 42 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Kent Hance		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 9 / 2 0 0 5
Mailing Address 111 Congress Ave Suite 500		Transaction ID: 50711.C4941
City Austin State TX Zip Code 78701-4050	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Hance Scarborough Wright	Occupation Attorney	
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>B.</b> Alan Harris		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 5
Mailing Address 600 Travis Suite 3200		Transaction ID: 50711.C4850
City Houston State TX Zip Code 77022	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Locke, Liddell, & Sapp	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) <b>C.</b> Holt Hickman		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 5
Mailing Address PO Box 168		Transaction ID: 50711.C4896
City Fort Worth State TX Zip Code 76101-0168	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer SCS Frigette	Occupation Honorable Chairman	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> 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 43 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Will Holder

Mailing Address 16285 Park Ten Pl Ste 300

City State Zip Code  
Houston TX 77084-5114

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

Name of Employer Trademaker Homes Occupation Home Builder

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  
06 / 10 / 2005

Transaction ID: 50711.C4851

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Ned Holmes

Mailing Address 55 Waugh Dr

City State Zip Code  
Houston TX 77007-5837

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

Name of Employer Parkway Investments Occupation Executive

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  
06 / 10 / 2005

Transaction ID: 50711.C4852

Amount of Each Receipt this Period  
2000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Judson Holt

Mailing Address 302 Stafford St

City State Zip Code  
Houston TX 77079-2325

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

Name of Employer EPG, Inc. Occupation Partner

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  
06 / 30 / 2005

Transaction ID: 50711.C4953

Amount of Each Receipt this Period  
250.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> 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 44 / 108
	(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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Howard House</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2005	
Mailing Address 2163 Chilton Rd		Transaction ID: 50711.C4954	
City State Zip Code Houston TX 77019-1503	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Raymond James & Associates	Occupation Managing Director		
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>B. Hunton &amp; Williams</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 28 / 2005	
Mailing Address 1900 K St NW		Transaction ID: 50711.C4938	
City State Zip Code Washington DC 20006-1110	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <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		
NOTE: Does not trigger itemization			

Full Name (Last, First, Middle Initial) <b>C. Andrew Hutchison</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 28 / 2005	
Mailing Address 7704 Trenton Ave		Transaction ID: 50711.C4916	
City State Zip Code Lubbock TX 79424-0716	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self Employed		Occupation Home Builder	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2250.00
<b>TOTAL</b> 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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Brant Imperatore</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 15 / 2005	
Mailing Address 1531 Brookhaven Dr		Transaction ID: 50711.C4799	
City State Zip Code Mc Lean VA 22101-4128	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Barbour Griffith & Rogers	Occupation Associate		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SG-2003	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Regina Johnston</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2005	
Mailing Address 4619 91st St		Transaction ID: 50711.C4957	
City State Zip Code Lubbock TX 79424-5035	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Receipt <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 ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Bob Joiner</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2005	
Mailing Address 1108 12th Man Cir		Transaction ID: 50711.C4955	
City State Zip Code College Station TX 77845-8978	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Hotchkiss Insurance Agency		Occupation Vice President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> 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 46 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Marjorie Kastman</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2005
Mailing Address PO Box 5930		Transaction ID: 50711.C4956
City Lubbock	State TX	Zip Code 79408-5930
Amount of Each Receipt this Period 1000.00		Receipt <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. <b>C</b>		
Name of Employer Self Employed	Occupation Investor	
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>B. Dee Kelly</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2005
Mailing Address 417 Rivercrest Dr		Transaction ID: 50711.C4993
City Fort Worth	State TX	Zip Code 76107-1639
Amount of Each Receipt this Period 250.00		Receipt <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. <b>C</b>		
Name of Employer Kelly Hart & Hollman	Occupation Partner	
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. Britt Lane</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 20 / 2005
Mailing Address 6667 Laurel Valley Dr		Transaction ID: 50711.C4868
City Fort Worth	State TX	Zip Code 76132-4476
Amount of Each Receipt this Period 2100.00		Receipt <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. <b>C</b>		
Name of Employer United Texas Entertainment	Occupation Vice President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3350.00
<b>TOTAL</b> 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 47 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Tammy Lane

Mailing Address 6667 Laurel Valley Dr

City State Zip Code  
Fort Worth TX 76132-4476

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

Name of Employer Not In Workforce Occupation  
Homemaker

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  
06 / 20 / 2005

Transaction ID: 50711.C4869

Amount of Each Receipt this Period  
2100.00

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

**B.** Full Name (Last, First, Middle Initial)  
Jeffrey Lawrence

Mailing Address 400 N View Ter

City State Zip Code  
Alexandria VA 22301-2612

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

Name of Employer The National Group Occupation  
Partner

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  
06 / 27 / 2005

Transaction ID: 50711.C4910

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Glenn LeMunyon

Mailing Address 1210 Suffield Dr

City State Zip Code  
Mc Lean VA 22101-2347

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

Name of Employer The Le Munyon Group Occupation  
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  
06 / 27 / 2005

Transaction ID: 50711.C4912

Amount of Each Receipt this Period  
500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3100.00**

**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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Timothy Locke

Mailing Address 2111 Woodmont Rd

City State Zip Code  
Alexandria VA 22307-1156

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

Name of Employer Occupation  
The Smith-Free Group Senior Vice President

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼ SG-2003

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 15 / 2005

Transaction ID: 50711.C4800

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Roger Lowe

Mailing Address PO Box 1430

City State Zip Code  
Littlefield TX 79339-1430

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

Name of Employer Occupation  
Pay-and-Save, Inc. Grocery

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2005

Transaction ID: 50711.C5001

Amount of Each Receipt this Period  
2100.00

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

**C.** Full Name (Last, First, Middle Initial)  
Randal Maffett

Mailing Address 5907 Island Heather Ct

City State Zip Code  
Humble TX 77345-1862

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

Name of Employer Occupation  
Self Employed Energy Investments

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2005

Transaction ID: 50711.C4958

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **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: (check only one)	PAGE 49 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Andrew Maloney

Mailing Address 3020 Macomb St NW

City Washington State DC Zip Code 20008-3317

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

Name of Employer Federalist Group, LLC Occupation PAC Director

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2005

Transaction ID: 50711.C4817

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address 3914 85th Pl

City Lubbock State TX Zip Code 79423-1926

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

Name of Employer John B. Malouf, Inc. Occupation Chairman

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2005

Transaction ID: 50711.C4924

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Matthew Malouf

Mailing Address 3811 Turtle Creek Blvd

City Dallas State TX Zip Code 75219-4461

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

Name of Employer Real Estate Co. Occupation Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼ Debt-2004

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 12 / 2005

Transaction ID: 50406.C4787

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> 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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Matthew Malouf

Mailing Address 3811 Turtle Creek Blvd

City State Zip Code  
Dallas TX 75219-4461

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

Name of Employer Real Estate Co. Occupation Owner

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  
06 / 30 / 2005

Transaction ID: 50711.C4959

Amount of Each Receipt this Period  
2100.00

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

**B.** Full Name (Last, First, Middle Initial)  
Michael Manners

Mailing Address 10482 Longstreet Rd

City State Zip Code  
Willis TX 77318-3346

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

Name of Employer Elan Development, LP Occupation Developer

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  
06 / 14 / 2005

Transaction ID: 50711.C4885

Amount of Each Receipt this Period  
2000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Michael McDougal

Mailing Address 7008 Salem Ave.

City State Zip Code  
Lubbock TX 79424

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

Name of Employer McDougal Properties Occupation 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  
06 / 30 / 2005

Transaction ID: 50711.C4960

Amount of Each Receipt this Period  
2100.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6200.00
<b>TOTAL</b> 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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

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

Mailing Address 6154 Piping Rock Ln

City State Zip Code  
Houston TX 77057-4406

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

Name of Employer Occupation  
Goldman, Sachs & Company Investment Management

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  
0 4 / 1 2 / 2 0 0 5

Transaction ID: 50406.C4791

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 108 W 8th St  
No 410

City State Zip Code  
Fort Worth TX 76102-6208

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

Name of Employer Occupation  
Self Employed Investor

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  
0 6 / 3 0 / 2 0 0 5

Transaction ID: 50711.C4992

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Larry Meyers

Mailing Address 412 1st St SE

City State Zip Code  
Washington DC 20003-1804

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

Name of Employer Occupation  
Meyers & Associates Executive

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
SG-2003

Election Cycle-to-Date ▼  
500.00

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

Transaction ID: 50711.C4827

Amount of Each Receipt this Period  
500.00

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

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

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

# 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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. John Mills</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2005	
Mailing Address 1922 Crescent Place		Transaction ID: 50711.C4926	
City Midland	State TX	Amount of Each Receipt this Period 1000.00	
Zip Code 79705-6407		Receipt <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 LPC Crude Oil Inc.	Occupation Oil & Gas		
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>B. W. A. Moncrief</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2005	
Mailing Address 950 Commerce St		Transaction ID: 50711.C4847	
City Fort Worth	State TX	Amount of Each Receipt this Period 500.00	
Zip Code 76102-5418		Receipt <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 Self Employed	Occupation Investor		
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>C. Marciano Morales</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2005	
Mailing Address 4006 89th St		Transaction ID: 50711.C4942	
City Lubbock	State TX	Amount of Each Receipt this Period 250.00	
Zip Code 79423-2901		Receipt <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 Caprock Home Health Services	Occupation President/CEO		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1750.00
<b>TOTAL</b> 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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Stephen Munisteri

Mailing Address 14 E Greenway Plz

City State Zip Code  
Houston TX 77046-1408

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

Name of Employer Self Employed 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  
06 / 30 / 2005

Transaction ID: 50711.C4961

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Linda Murdock

Mailing Address 3705 96th St

City State Zip Code  
Lubbock TX 79423-3824

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  
06 / 28 / 2005

Transaction ID: 50711.C4918

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Martin Mark Murdock

Mailing Address 3705 96th St

City State Zip Code  
Lubbock TX 79423-3824

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  
06 / 28 / 2005

Transaction ID: 50711.C4917

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **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 54 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Kenneth Musgrave</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 5
Mailing Address 3051 Highway 351		Transaction ID: 50711.C4873
City State Zip Code Abilene TX 79601	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self Employed	Occupation Real Estate Investments	
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>B. Walter Negley</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 5
Mailing Address 3539 Chevy Chase Dr		Transaction ID: 50711.C4999
City State Zip Code Houston TX 77019-3007	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer TSP	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) <b>C. Melissa Neugebauer</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 5
Mailing Address 2106 Vicksburg Ave		Transaction ID: 50711.C4963
City State Zip Code Lubbock TX 79407-2244	Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Not In Workforce	Occupation Homemaker	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3600.00
<b>TOTAL</b> 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 55 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Toby Neugebauer</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2005
Mailing Address 2106 Vicksburg Ave		Transaction ID: 50711.C4962
City Lubbock	State TX	Zip Code 79407-2244
FEC ID number of contributing federal political committee.	C	
Name of Employer Quantum Energy Partners	Occupation Partner	Amount of Each Receipt this Period 2100.00
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) <b>B. Kenneth Olive</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2005
Mailing Address PO Box 671787		Transaction ID: 50711.C4964
City Houston	State TX	Zip Code 77267-1787
FEC ID number of contributing federal political committee.	C	
Name of Employer The Oil and Gas Asset Clearin	Occupation President/CEO	Amount of Each Receipt this Period 500.00
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) <b>C. Jory Pacht</b>		Date of Receipt MM / DD / YYYY 06 / 14 / 2005
Mailing Address 18 Pembroke St		Transaction ID: 50711.C4886
City Sugar Land	State TX	Zip Code 77479-2930
FEC ID number of contributing federal political committee.	C	
Name of Employer Energy Quest	Occupation Executive Vice President	Amount of Each Receipt this Period 1000.00
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3600.00
<b>TOTAL</b> 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 56 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Joshua Parker

Mailing Address PO Box 1359

City State Zip Code  
Denver City TX 79323-1359

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

Name of Employer Occupation  
Kidd Oil Field Service, Inc. Oil Business

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

250.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2005

Transaction ID: 50711.C4860

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Bob Perry

Mailing Address 18630 Barbuda Ln

City State Zip Code  
Houston TX 77058-4008

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

Name of Employer Occupation  
Perry Homes CEO

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

1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2005

Transaction ID: 50711.C4856

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Doylene Perry

Mailing Address 18630 Barbuda Ln

City State Zip Code  
Houston TX 77058-4008

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

Name of Employer Occupation  
Not In Workforce Homemaker

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

1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2005

Transaction ID: 50711.C4857

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> 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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Townes Pressler</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 14 / 2005	
Mailing Address 3 Riverway # 630		<b>Transaction ID: 50711.C4887</b>	
City Houston	State TX	Amount of Each Receipt this Period 250.00	
Zip Code 77056-1919		Receipt <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. <b>C</b>			
Name of Employer Peregrine Oil & Gas, LP	Occupation Oil and Gas		
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>B. Kendall Purgason</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 14 / 2005	
Mailing Address 229 Warrenton Dr		<b>Transaction ID: 50711.C4888</b>	
City Houston	State TX	Amount of Each Receipt this Period 250.00	
Zip Code 77024-6225		Receipt <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. <b>C</b>			
Name of Employer Information Requested	Occupation Information Requested		
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. Timothy Rupli</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 25 / 2005	
Mailing Address 1301 Pennsylvania Ave NW Ste 500		<b>Transaction ID: 50711.C4811</b>	
City Washington	State DC	Amount of Each Receipt this Period 1000.00	
Zip Code 20004-1701		Receipt <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. <b>C</b>			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> 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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Pat Rutherford

Mailing Address 5 E Greenway Plz Ste 220

City State Zip Code  
Houston TX 77046-0597

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

Name of Employer Occupation  
Independent Oil & Gas Owner

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

1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2005

Transaction ID: 50711.C5000

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Douglas Sanford

Mailing Address 9307 Quinton Ave

City State Zip Code  
Lubbock TX 79424-5109

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

Name of Employer Occupation  
Sanford Insurance Agency CEO

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

1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2005

Transaction ID: 50711.C4927

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Kay Sanford

Mailing Address 9307 Quinton Ave

City State Zip Code  
Lubbock TX 79424-5109

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

Name of Employer Occupation  
Not In Workforce Not In Workforce

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

1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2005

Transaction ID: 50711.C4928

Amount of Each Receipt this Period  
1000.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Jack Schanck

Mailing Address 4325 Lake Run Dr

City State Zip Code  
Missouri City TX 77459-3262

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

Name of Employer R & D Energy Occupation CEO

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  
06 / 10 / 2005

Transaction ID: 50711.C4858

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Gary Schubert

Mailing Address PO Box 6056

City State Zip Code  
Hobbs NM 88241-6056

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

Name of Employer Self Employed Occupation Farming

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  
06 / 22 / 2005

Transaction ID: 50711.C4929

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Joe Sharp

Mailing Address 4009 Airport Fwy

City State Zip Code  
Bedford TX 76021-6174

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

Name of Employer First Baird Bancshares Occupation CEO

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  
06 / 30 / 2005

Transaction ID: 50711.C4994

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **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 60 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
L. D. Sipes

Mailing Address 902 Citation

City State Zip Code  
Midland TX 79705-1805

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

Name of Employer Occupation  
Chisos Operating, Inc. Engineer

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  
0 6 / 2 3 / 2 0 0 5

Transaction ID: 50711.C4932

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Irvin Skibell

Mailing Address 16313 Scotland Way

City State Zip Code  
Edmond OK 73013-1129

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) ▼

2100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 5

Transaction ID: 50711.C4965

Amount of Each Receipt this Period  
2100.00

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

**C.** Full Name (Last, First, Middle Initial)  
Jeanne Skibell

Mailing Address 16313 Scotland Way

City State Zip Code  
Edmond OK 73013-1129

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) ▼

2100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 5

Transaction ID: 50711.C4966

Amount of Each Receipt this Period  
2100.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5200.00**

**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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Alan Smith

Mailing Address 5130 Academy St

City State Zip Code  
Houston TX 77005-1002

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

Name of Employer Occupation  
Quantum Energy Partners Finance

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  
06 / 14 / 2005

Transaction ID: 50711.C4889

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Joe Smith

Mailing Address 3782 High Meadows Dr

City State Zip Code  
Abilene TX 79605-6502

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) ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 20 / 2005

Transaction ID: 50711.C4867

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Stephen Smith

Mailing Address 2001 Bryan Street Suite 800

City State Zip Code  
Dallas TX 75201

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

Name of Employer Occupation  
WM Rigg Company Insurance Broker

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  
04 / 12 / 2005

Transaction ID: 50406.C4788

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **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 62 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

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

Mailing Address PO Box 6840

City Lubbock State TX Zip Code 79493-6840

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

Name of Employer United Supermarkets Occupation Chairman of the Board

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
06 / 23 / 2005

Transaction ID: 50711.C4933

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Robert Statham

Mailing Address 200 Palo Pinto St

City Weatherford State TX Zip Code 76086-4354

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

Name of Employer Self Employed Occupation Insurance

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
06 / 30 / 2005

Transaction ID: 50711.C4989

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Daniel Steele

Mailing Address 15314 Climbing Branch Dr

City Houston State TX Zip Code 77068-2117

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

Name of Employer Sterling Bank Occupation Banker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
06 / 14 / 2005

Transaction ID: 50711.C4890

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Wayne Stohenberg

Mailing Address 300 Crescent Ct Suite 200

City State Zip Code  
Dallas TX 75201-7814

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

Name of Employer Self Employed Occupation Investment 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  
0 4 / 1 2 / 2 0 0 5

Transaction ID: 50406.C4790

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Forrest Surles

Mailing Address 11306 Ella Lee Ln

City State Zip Code  
Houston TX 77077-6808

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

Name of Employer The Forrest Group, LLC Occupation Life Insurance Sales

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  
0 6 / 3 0 / 2 0 0 5

Transaction ID: 50711.C4967

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Bruce Swanson

Mailing Address 3415 Locke Ln

City State Zip Code  
Houston TX 77027-4121

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

Name of Employer Sentine Trust Co. Occupation Chief Investments 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  
0 6 / 3 0 / 2 0 0 5

Transaction ID: 50711.C4968

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **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 64 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Nicholas Taylor</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 5	
Mailing Address 4711 Cherokee Trl		Transaction ID: 50406.C4786	
City State Zip Code Dallas TX 75209-1917	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Churchill Capital Company	Occupation Real Estate		
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>B. Tex Timberlake</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 5	
Mailing Address 9104 Salem Dr		Transaction ID: 50711.C4969	
City State Zip Code Lubbock TX 79424-5000	Amount of Each Receipt this Period 2100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Service Title Company	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) <b>C. Matthew Trant</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 5	
Mailing Address 6305 Haviland Dr		Transaction ID: 50711.C4825	
City State Zip Code Bethesda MD 20817-5911	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer The National Group	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		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3100.00
<b>TOTAL</b> 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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Jana Trotter

Mailing Address 3409 Fm 1058

City Hereford State TX Zip Code 79045-7417

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

Name of Employer Not In Workforce Occupation Housewife

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  
0 6 / 2 0 / 2 0 0 5

Transaction ID: 50711.C4864

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Johnny Trotter

Mailing Address 3409 Fm 1058

City Hereford State TX Zip Code 79045-7417

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

Name of Employer Bar-G Feedyard Occupation Executive

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  
0 6 / 2 0 / 2 0 0 5

Transaction ID: 50711.C4863

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mr. S. Wil Vanloh, „JR

Mailing Address 3208 Locke Ln

City Houston State TX Zip Code 77019-6208

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

Name of Employer Self-Employed Occupation Oil and Gas

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  
0 6 / 3 0 / 2 0 0 5

Transaction ID: 50711.C4971

Amount of Each Receipt this Period  
2000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **4000.00**

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

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

Use separate schedule(s) 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)  
**NEUGEBAUER CONGRESSIONAL COMMITTEE**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Vince Versage</p> <p>Mailing Address 211 Duke St</p> <p>City State Zip Code Alexandria VA 22314-3805</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation The National Group Attorney</p> <p>Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt MM / DD / YYYY 05 / 13 / 2005</p> <p><b>Transaction ID:</b> 50711.C4826</p> <p>Amount of Each Receipt this Period 2000.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) John Walker</p> <p>Mailing Address 7 Pine Grove Cir</p> <p>City State Zip Code Houston TX 77024-3022</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Information Requested Information Requested</p> <p>Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt MM / DD / YYYY 06 / 14 / 2005</p> <p><b>Transaction ID:</b> 50711.C4893</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) Terry Weaver</p> <p>Mailing Address 5440 Twin Creeks Dr</p> <p>City State Zip Code Midlothian TX 76065-5283</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Sterling Development Co. President</p> <p>Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt MM / DD / YYYY 06 / 30 / 2005</p> <p><b>Transaction ID:</b> 50711.C4970</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	--

<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<p><b>3250.00</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

**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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Keller Webster

Mailing Address 6951 Colfax Dr

City State Zip Code  
Dallas TX 75231-5709

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

Name of Employer Occupation  
KWA Construction Builder

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 12 / 2005

Transaction ID: 50406.C4785

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Richard Weekley

Mailing Address 3708 Inverness Dr.

City State Zip Code  
Houston TX 77019-1104

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

Name of Employer Occupation  
Weekley Properties 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  
06 / 14 / 2005

Transaction ID: 50711.C4891

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Jim Wise

Mailing Address 2106 Sunshine Point Dr

City State Zip Code  
Humble TX 77345-1679

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 ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 14 / 2005

Transaction ID: 50711.C4892

Amount of Each Receipt this Period  
500.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Donald Wood

Mailing Address 3 La Paz Circle

City State Zip Code  
Odessa TX 79765-8914

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

Name of Employer Occupation  
Permean Enterprises Manager

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  
06 / 20 / 2005

**Transaction ID:** 50711.C4865

Amount of Each Receipt this Period  
2100.00

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

**B.** Full Name (Last, First, Middle Initial)  
Lynne Wood

Mailing Address 3 La Paz Cir

City State Zip Code  
Odessa TX 79765-8914

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

Name of Employer Occupation  
Homemaker Homemaker

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  
06 / 20 / 2005

**Transaction ID:** 50711.C4866

Amount of Each Receipt this Period  
2100.00

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

**C.** Full Name (Last, First, Middle Initial)  
Janna Worley

Mailing Address 125 Bowie Ln

City State Zip Code  
Levelland TX 79336-8003

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

Name of Employer Occupation  
Worley Welding Works, Inc. Secretary/Treasurer

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  
06 / 23 / 2005

**Transaction ID:** 50711.C4934

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4700.00</b>
<b>TOTAL</b> 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 / 108
	<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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mike Worley</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 5
Mailing Address 125 Bowie Ln		Transaction ID: 50711.C4935
City State Zip Code Levelland TX 79336-8003	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Worley Welding Works, Inc.	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) <b>B. J. W. Wright</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 8 / 2 0 0 5
Mailing Address 1912 Albany Ave		Transaction ID: 50711.C4919
City State Zip Code Lubbock TX 79407-2100	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Associated Supply Co. (AS-CO)	Occupation Chairman of the Board	
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>C. W. B. Wright</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 5
Mailing Address 4602 92nd St		Transaction ID: 50711.C4972
City State Zip Code Lubbock TX 79424-5034	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Associated Supply Co. (AS-CO)	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	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	99400.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 70 / 108	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input checked="" type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
HCSB Kerrville

Mailing Address 1145 Junction Hwy

City	State	Zip Code
Kerrville	TX	78028-4903

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

Name of Employer	Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
100000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	9	/	2	0	0	5

Transaction ID: 50713.C5011

Amount of Each Receipt this Period  
100000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	100000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	100000.00

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Adobe Farms, Inc.</b>		Transaction ID: 50711.E2082 Date of Disbursement 04 / 01 / 2005	
Mailing Address 5508 87th St		Amount of Each Disbursement this Period 3000.00	
City Lubbock State TX Zip Code 79424-4546	Purpose of Disbursement FEC DATA PROCESSING	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEC DATA PROCESSING	

Full Name (Last, First, Middle Initial) <b>B. Adobe Farms, Inc.</b>		Transaction ID: 50711.E2103 Date of Disbursement 04 / 11 / 2005	
Mailing Address 5508 87th St		Amount of Each Disbursement this Period 3050.00	
City Lubbock State TX Zip Code 79424-4546	Purpose of Disbursement FEC DATA PROCESSING	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEC DATA PROCESSING	

Full Name (Last, First, Middle Initial) <b>C. Adobe Farms, Inc.</b>		Transaction ID: 50711.E2128 Date of Disbursement 04 / 20 / 2005	
Mailing Address 5508 87th St		Amount of Each Disbursement this Period 350.00	
City Lubbock State TX Zip Code 79424-4546	Purpose of Disbursement REIMBURSEMENT DESK & FILE CABINETS	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	REIMBURSEMENT DESK & FILE CABINETS	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Adobe Farms, Inc.</b>		<b>Transaction ID:</b> 50711.E2130 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 5
Mailing Address 5508 87th St		Amount of Each Disbursement this Period 1163.67
City Lubbock State TX Zip Code 79424-4546	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement REIMBURSEMENT COMPUTER & SOFTWARE		REIMBURSEMENT COMPUTER & SOFTWARE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Adobe Farms, Inc.</b>		<b>Transaction ID:</b> 50711.E2132 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 5
Mailing Address 5508 87th St		Amount of Each Disbursement this Period 3000.00
City Lubbock State TX Zip Code 79424-4546	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement DATA PROCESSING MAY		DATA PROCESSING MAY
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Adobe Farms, Inc.</b>		<b>Transaction ID:</b> 50711.E2150 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 5
Mailing Address 5508 87th St		Amount of Each Disbursement this Period 3050.00
City Lubbock State TX Zip Code 79424-4546	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement DATA PROCESSING MAY		DATA PROCESSING MAY
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7213.67
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Adobe Farms, Inc.</b>		<b>Transaction ID:</b> 50711.E2157 Date of Disbursement 05 / 10 / 2005
Mailing Address 5508 87th St		Amount of Each Disbursement this Period 564.01
City Lubbock      State TX      Zip Code 79424-4546	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement COMPUTER & PRINTER	Candidate Name	COMPUTER & PRINTER
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Adobe Farms, Inc.</b>		<b>Transaction ID:</b> 50711.E2154 Date of Disbursement 05 / 10 / 2005
Mailing Address 5508 87th St		Amount of Each Disbursement this Period 50.00
City Lubbock      State TX      Zip Code 79424-4546	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement EXPENSE REIMBURSEMENT	Candidate Name	EXPENSE REIMBURSEMENT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Adobe Farms, Inc.</b>		<b>Transaction ID:</b> 50711.E2168 Date of Disbursement 05 / 24 / 2005
Mailing Address 5508 87th St		Amount of Each Disbursement this Period 100.00
City Lubbock      State TX      Zip Code 79424-4546	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement 2 MONITORS	Candidate Name	2 MONITORS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	714.01
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Adobe Farms, Inc.</b>		Transaction ID: 50711.E2171 Date of Disbursement 06 / 01 / 2005	
Mailing Address 5508 87th St		Amount of Each Disbursement this Period 3000.00	
City Lubbock State TX Zip Code 79424-4546	Purpose of Disbursement JUNE FEC PROCESSING	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	JUNE FEC PROCESSING	

Full Name (Last, First, Middle Initial) <b>B. Adobe Farms, Inc.</b>		Transaction ID: 50711.E2177 Date of Disbursement 06 / 10 / 2005	
Mailing Address 5508 87th St		Amount of Each Disbursement this Period 3050.00	
City Lubbock State TX Zip Code 79424-4546	Purpose of Disbursement DATA PROCESSING	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DATA PROCESSING	

Full Name (Last, First, Middle Initial) <b>C. Adobe Farms, Inc.</b>		Transaction ID: 50711.E2206 Date of Disbursement 06 / 21 / 2005	
Mailing Address 5508 87th St		Amount of Each Disbursement this Period 3050.00	
City Lubbock State TX Zip Code 79424-4546	Purpose of Disbursement DATA PROCESSING	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DATA PROCESSING	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	9100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Bellwether Consulting Group</b>		<b>Transaction ID:</b> 50711.E2087 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 5
Mailing Address 815 Slaters Ln		Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Alexandria State VA Zip Code 22314-1219	Category/Type FUNDRAISING CONSULTING	
Purpose of Disbursement FUNDRAISING CONSULTING	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FUNDRAISING CONSULTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Candidate Name	

Full Name (Last, First, Middle Initial) <b>B. Bellwether Consulting Group</b>		<b>Transaction ID:</b> 50711.E2158 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 5
Mailing Address 815 Slaters Ln		Amount of Each Disbursement this Period 644.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Alexandria State VA Zip Code 22314-1219	Category/Type INVOCIE # 1155	
Purpose of Disbursement INVOCIE # 1155	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	INVOCIE # 1155
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Candidate Name	

Full Name (Last, First, Middle Initial) <b>C. Bellwether Consulting Group</b>		<b>Transaction ID:</b> 50711.E2161 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 5
Mailing Address 815 Slaters Ln		Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Alexandria State VA Zip Code 22314-1219	Category/Type FUNDRAISING CONSULTING	
Purpose of Disbursement FUNDRAISING CONSULTING	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FUNDRAISING CONSULTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Candidate Name	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3644.90
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bellwether Consulting Group</p> <p>Mailing Address 815 Slaters Ln</p> <p>City Alexandria State VA Zip Code 22314-1219</p> <p>Purpose of Disbursement FUNDRAISING CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 50711.E2184</p> <p>Date of Disbursement 06 / 13 / 2005</p> <p>Amount of Each Disbursement this Period 395.40</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>FUNDRAISING CONSULTING</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bellwether Consulting Group</p> <p>Mailing Address 815 Slaters Ln</p> <p>City Alexandria State VA Zip Code 22314-1219</p> <p>Purpose of Disbursement FUNDRAISING CONSULTING JUNE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 50711.E2188</p> <p>Date of Disbursement 06 / 13 / 2005</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>FUNDRAISING CONSULTING JU-NE</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Cingular Wireless</p> <p>Mailing Address PO Box 650553</p> <p>City Dallas State TX Zip Code 75265-0553</p> <p>Purpose of Disbursement CELL PHONE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 50711.E2086</p> <p>Date of Disbursement 04 / 05 / 2005</p> <p>Amount of Each Disbursement this Period 99.30</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CELL PHONE</p>

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

1994.70

**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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Cingular Wireless</b>		<b>Transaction ID:</b> 50711.E2127 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 5
Mailing Address PO Box 650553		Amount of Each Disbursement this Period 270.27 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Dallas State TX Zip Code 75265-0553	Category/Type	
Purpose of Disbursement CELL PHONE	Candidate Name	CELL PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Cingular Wireless</b>		<b>Transaction ID:</b> 50711.E2175 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 5
Mailing Address PO Box 650553		Amount of Each Disbursement this Period 299.45 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Dallas State TX Zip Code 75265-0553	Category/Type	
Purpose of Disbursement CELL PHONE	Candidate Name	CELL PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Cingular Wireless</b>		<b>Transaction ID:</b> 50711.E2204 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 5
Mailing Address PO Box 650553		Amount of Each Disbursement this Period 279.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Dallas State TX Zip Code 75265-0553	Category/Type	
Purpose of Disbursement CELL PHONE	Candidate Name	CELL PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	849.22
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Computer Transition Services Inc.</b>		<b>Transaction ID:</b> 50711.E2126 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5
Mailing Address 3223 S Loop 289 Suite 556		Amount of Each Disbursement this Period 769.00
City Lubbock State TX Zip Code 79423-1337	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement COMPUTER SERVICES	Candidate Name	COMPUTER SERVICES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. 20/10 Design</b>		<b>Transaction ID:</b> 50711.E2202 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 5
Mailing Address 1131 Dodgson Rd		Amount of Each Disbursement this Period 1500.00
City West Chester State PA Zip Code 19382-7245	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PRODUCTION & DELIEVERY	Candidate Name	PRODUCTION & DELIEVERY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. 20/10 Design</b>		<b>Transaction ID:</b> 50711.E2201 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 5
Mailing Address 1131 Dodgson Rd		Amount of Each Disbursement this Period 500.00
City West Chester State PA Zip Code 19382-7245	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement ART AND SETUP	Candidate Name	ART AND SETUP
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2769.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. 20/10 Design</b>		<b>Transaction ID:</b> 50711.E2200 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 5
Mailing Address 1131 Dodgson Rd		Amount of Each Disbursement this Period 2000.00
City West Chester State PA Zip Code 19382-7245	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement LONE STAR PINS Candidate Name	Category/Type	LONE STAR PINS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Diamond C Communications</b>		<b>Transaction ID:</b> 50711.E2129 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 5
Mailing Address 7606 Trenton Ave		Amount of Each Disbursement this Period 105.00
City Lubbock State TX Zip Code 79424-0724	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement RE-ROUTE PHONE LINES Candidate Name	Category/Type	RE-ROUTE PHONE LINES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Diamond C Communications</b>		<b>Transaction ID:</b> 50711.E2156 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 5
Mailing Address 7606 Trenton Ave		Amount of Each Disbursement this Period 105.00
City Lubbock State TX Zip Code 79424-0724	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement RE-ROUTE PHONE LINES Candidate Name	Category/Type	RE-ROUTE PHONE LINES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2210.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Campaign Solutions/ E-Donations</b>		<b>Transaction ID:</b> 50711.E2152 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 5
Mailing Address 118 North Saint Asaph Street		Amount of Each Disbursement this Period 285.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Alexandria State VA Zip Code 22314-3110	Purpose of Disbursement BANK CHARGES Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	BANK CHARGES

Full Name (Last, First, Middle Initial) <b>B. Campaign Solutions/ E-Donations</b>		<b>Transaction ID:</b> 50711.E2170 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 5
Mailing Address 118 North Saint Asaph Street		Amount of Each Disbursement this Period 2125.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Alexandria State VA Zip Code 22314-3110	Purpose of Disbursement BANK CHARGES Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	BANK CHARGES

Full Name (Last, First, Middle Initial) <b>C. FedEx</b>		<b>Transaction ID:</b> 50711.E2215 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 5
Mailing Address PO Box 94515		Amount of Each Disbursement this Period 20.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Palatine State IL Zip Code 60094-4515	Purpose of Disbursement EXPRESS MAIL Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	EXPRESS MAIL

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2430.13
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. FedEx</b>		<b>Transaction ID:</b> 50711.E2155 <b>Date of Disbursement</b> 05 / 10 / 2005
Mailing Address PO Box 94515		Amount of Each Disbursement this Period 19.94
City Palatine State IL Zip Code 60094-4515	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement EXPRESS MAIL Candidate Name	Category/Type	EXPRESS MAIL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FedEx</b>		<b>Transaction ID:</b> 50711.E2205 <b>Date of Disbursement</b> 06 / 21 / 2005
Mailing Address PO Box 94515		Amount of Each Disbursement this Period 41.36
City Palatine State IL Zip Code 60094-4515	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement EXPRESS MAIL Candidate Name	Category/Type	EXPRESS MAIL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Hispanic Leadership Council</b>		<b>Transaction ID:</b> 50711.E2105 <b>Date of Disbursement</b> 04 / 14 / 2005
Mailing Address PO Box 2522		Amount of Each Disbursement this Period 300.00
City Abilene State TX Zip Code 79604-2522	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement BANQUET SPONSORSHIP Candidate Name	Category/Type	BANQUET SPONSORSHIP
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>361.30</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Roy Middleton</b>		<b>Transaction ID: 50711.E2176</b> Date of Disbursement 06 / 01 / 2005	
Mailing Address 3201 64th St		Amount of Each Disbursement this Period 500.00	
City Lubbock	State TX	Zip Code 79413-5701	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement RENT JUN 05		Category/ Type	
Candidate Name		RENT JUN 05	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Dana Neugebauer</b>		<b>Transaction ID: 50711.E2089</b> Date of Disbursement 04 / 05 / 2005	
Mailing Address 611 Pennsylvania Ave. SE #395		Amount of Each Disbursement this Period 343.94	
City Washington	State DC	Zip Code 20003-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement SEE BELOW		Category/ Type	
Candidate Name		SEE BELOW	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Dana Neugebauer</b>		<b>Transaction ID: 50711.E2096</b> Date of Disbursement 04 / 05 / 2005	
Mailing Address 611 Pennsylvania Ave. SE #395		Amount of Each Disbursement this Period 101.79	
City Washington	State DC	Zip Code 20003-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement FLAGS		Category/ Type	
Candidate Name		<b>[MEMO ITEM]</b> MEMO: FLAGS	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	843.94
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dana Neugebauer</b>		Transaction ID: 50711.E2095 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 5	
Mailing Address 611 Pennsylvania Ave. SE #395		Amount of Each Disbursement this Period 9.85	
City Washington State DC Zip Code 20003-	Purpose of Disbursement POSTAGE Candidate Name Category/ Type	<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:		<b>[MEMO ITEM]</b> MEMO: POSTAGE	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Dana Neugebauer</b>		Transaction ID: 50711.E2092 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 5	
Mailing Address 611 Pennsylvania Ave. SE #395		Amount of Each Disbursement this Period 46.00	
City Washington State DC Zip Code 20003-	Purpose of Disbursement GIFTS Candidate Name Category/ Type	<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:		<b>[MEMO ITEM]</b> MEMO: GIFTS	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Dana Neugebauer</b>		Transaction ID: 50711.E2091 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 5	
Mailing Address 611 Pennsylvania Ave. SE #395		Amount of Each Disbursement this Period 28.86	
City Washington State DC Zip Code 20003-	Purpose of Disbursement GIFTS Candidate Name Category/ Type	<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:		<b>[MEMO ITEM]</b> MEMO: GIFTS	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dana Neugebauer</b>		Transaction ID: 50711.E2093 Date of Disbursement MM / DD / YYYY 04 / 05 / 2005	
Mailing Address 611 Pennsylvania Ave. SE #395		Amount of Each Disbursement this Period 72.60	
City Washington State DC Zip Code 20003-	Purpose of Disbursement GIFTS	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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: GIFTS

Full Name (Last, First, Middle Initial) <b>B. Dana Neugebauer</b>		Transaction ID: 50711.E2090 Date of Disbursement MM / DD / YYYY 04 / 05 / 2005	
Mailing Address 611 Pennsylvania Ave. SE #395		Amount of Each Disbursement this Period 37.89	
City Washington State DC Zip Code 20003-	Purpose of Disbursement FLAG BOX	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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: FLAG BOX

Full Name (Last, First, Middle Initial) <b>C. Dana Neugebauer</b>		Transaction ID: 50711.E2094 Date of Disbursement MM / DD / YYYY 04 / 05 / 2005	
Mailing Address 611 Pennsylvania Ave. SE #395		Amount of Each Disbursement this Period 46.95	
City Washington State DC Zip Code 20003-	Purpose of Disbursement AUTO 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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: AUTO EXPENSE

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Dana Neugebauer</b>		<b>Transaction ID:</b> 50711.E2162 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 5
Mailing Address 611 Pennsylvania Ave. SE #395		Amount of Each Disbursement this Period 375.00
City Washington State DC Zip Code 20003-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement EXPENSE REIMBURSEMENT	Candidate Name	EXPENSE REIMBURSEMENT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Randy Neugebauer</b>		<b>Transaction ID:</b> 50711.E2097 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 5
Mailing Address P.O. Box 54175		Amount of Each Disbursement this Period 271.50
City Lubbock State TX Zip Code 79453-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW	Candidate Name	SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Randy Neugebauer</b>		<b>Transaction ID:</b> 50711.E2099 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 5
Mailing Address P.O. Box 54175		Amount of Each Disbursement this Period 162.35
City Lubbock State TX Zip Code 79453-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement STAPLES-ABILENE	Candidate Name	<b>[MEMO ITEM]</b> MEMO: STAPLES-ABILENE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	646.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

<p><b>A.</b> Randy Neugebauer</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address P.O. Box 54175</p> <p>City Lubbock State TX Zip Code 79453-</p> <p>Purpose of Disbursement RENTAL CAR</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: 50711.E2098</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <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="109.15"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: RENTAL CAR</p>
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<p><b>B.</b> NTS Communications</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 5307 W. Loop 289</p> <p>City Lubbock State TX Zip Code 79414-1610</p> <p>Purpose of Disbursement TELEPHONE</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: 50711.E2088</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <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="155.43"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>TELEPHONE</p>
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<p><b>C.</b> NTS Communications</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 5307 W. Loop 289</p> <p>City Lubbock State TX Zip Code 79414-1610</p> <p>Purpose of Disbursement TELEPHONE</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: 50711.E2148</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <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="66.92"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>TELEPHONE</p>
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<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="222.35"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. NTS Communications</b>		<b>Transaction ID:</b> 50711.E2178 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 5
Mailing Address 5307 W. Loop 289		Amount of Each Disbursement this Period 344.16 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lubbock State TX Zip Code 79414-1610	Category/Type <input type="checkbox"/> TELEPHONE	
Purpose of Disbursement TELEPHONE	Candidate Name	TELEPHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. U. S. Postmaster</b>		<b>Transaction ID:</b> 50711.E2084 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 5
Mailing Address 1515 Avenue G		Amount of Each Disbursement this Period 37.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lubbock State TX Zip Code 79402-9998	Category/Type <input type="checkbox"/> STAMPS	
Purpose of Disbursement STAMPS	Candidate Name	STAMPS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. U. S. Postmaster</b>		<b>Transaction ID:</b> 50711.E2083 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 5
Mailing Address 1515 Avenue G		Amount of Each Disbursement this Period 150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lubbock State TX Zip Code 79402-9998	Category/Type <input type="checkbox"/> RENEW PERMIT NUMBER	
Purpose of Disbursement RENEW PERMIT NUMBER	Candidate Name	RENEW PERMIT NUMBER
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	531.16
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. U. S. Postmaster</b>		<b>Transaction ID:</b> 50711.E2164 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 5
Mailing Address 1515 Avenue G		Amount of Each Disbursement this Period 34.00
City Lubbock State TX Zip Code 79402-9998	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement BOX RENT	Candidate Name	BOX RENT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. U. S. Postmaster</b>		<b>Transaction ID:</b> 50711.E2165 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 5
Mailing Address 1515 Avenue G		Amount of Each Disbursement this Period 444.00
City Lubbock State TX Zip Code 79402-9998	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement STAMPS	Candidate Name	STAMPS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Quick Print</b>		<b>Transaction ID:</b> 50711.E2167 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 5
Mailing Address 2301 Avenue Q		Amount of Each Disbursement this Period 494.59
City Lubbock State TX Zip Code 79411-2225	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement COPY & PRINTING	Candidate Name	COPY & PRINTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	972.59
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Scott Howell &amp; Company, Inc.</b>		<b>Transaction ID: 50711.E2100</b> Date of Disbursement MM / DD / YYYY 04 / 06 / 2005	
Mailing Address 208 N Market St		Amount of Each Disbursement this Period 10000.00	
City Dallas State TX Zip Code 75202-3205	Purpose of Disbursement MEDIA CONSULTING JAN-APRIL 05	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	MEDIA CONSULTING JAN-APRIL 05	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Scott Howell &amp; Company, Inc.</b>		<b>Transaction ID: 50711.E2133</b> Date of Disbursement MM / DD / YYYY 05 / 02 / 2005	
Mailing Address 208 N Market St		Amount of Each Disbursement this Period 10000.00	
City Dallas State TX Zip Code 75202-3205	Purpose of Disbursement MEDIA CONSULTING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	MEDIA CONSULTING	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Scott Howell &amp; Company, Inc.</b>		<b>Transaction ID: 50711.E2172</b> Date of Disbursement MM / DD / YYYY 06 / 01 / 2005	
Mailing Address 208 N Market St		Amount of Each Disbursement this Period 10000.00	
City Dallas State TX Zip Code 75202-3205	Purpose of Disbursement MEDIA CONSULTLING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	MEDIA CONSULTLING	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	30000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. The Magnolia Group</b>		<b>Transaction ID:</b> 50711.E2181 <b>Date of Disbursement</b> 06 / 13 / 2005
Mailing Address 3503 Dickason Suite B		Amount of Each Disbursement this Period 5000.00
City Dallas State TX Zip Code 75219-8527	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISING CONSULTING Candidate Name		FUNDRAISING CONSULTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2106 <b>Date of Disbursement</b> 04 / 18 / 2005
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 327.41
City Columbus State GA Zip Code 31902-3003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW Candidate Name		SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2107 <b>Date of Disbursement</b> 04 / 18 / 2005
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 71.34
City Columbus State GA Zip Code 31902-3003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TEXAS STATE DIRECTORY Candidate Name		<b>[MEMO ITEM]</b> MEMO: TEXAS STATE DIRECTO- RY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5327.41</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2109 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5	
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 5.29	
City Columbus State GA Zip Code 31902-3003	Purpose of Disbursement BANK CHARGE	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: BANK CHARGE	

Full Name (Last, First, Middle Initial) <b>B. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2108 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5	
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 250.78	
City Columbus State GA Zip Code 31902-3003	Purpose of Disbursement SATELLITE PHONE	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: SATELLITE PHONE	

Full Name (Last, First, Middle Initial) <b>C. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2117 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5	
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 331.65	
City Columbus State GA Zip Code 31902-3003	Purpose of Disbursement SEE BELOW	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SEE BELOW	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	331.65
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2119 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 28.00
City Columbus State GA Zip Code 31902-3003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEALS Candidate Name	Category/Type	<b>[MEMO ITEM]</b> MEMO: MEALS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2124 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 30.06
City Columbus State GA Zip Code 31902-3003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement GIVE AWAYS Candidate Name	Category/Type	<b>[MEMO ITEM]</b> MEMO: GIVE AWAYS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2118 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 337.40
City Columbus State GA Zip Code 31902-3003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement AIRFARE Candidate Name	Category/Type	<b>[MEMO ITEM]</b> MEMO: AIRFARE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Visa (Wells Fargo Remittance Center)</b>		Transaction ID: 50711.E2120 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5	
Mailing Address PO Box 23003		Amount of Each Disbursement this Period -119.00	
City Columbus State GA Zip Code 31902-3003	Purpose of Disbursement REFUND AIRFARE	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: REFUND AIRFARE	

Full Name (Last, First, Middle Initial) <b>B. Visa (Wells Fargo Remittance Center)</b>		Transaction ID: 50711.E2123 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5	
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 6.60	
City Columbus State GA Zip Code 31902-3003	Purpose of Disbursement AUTO EXPENSE	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: AUTO EXPENSE	

Full Name (Last, First, Middle Initial) <b>C. Visa (Wells Fargo Remittance Center)</b>		Transaction ID: 50711.E2122 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5	
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 38.00	
City Columbus State GA Zip Code 31902-3003	Purpose of Disbursement AUTO EXPESNE	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: AUTO EXPESNE	

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2125 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 10.59 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Columbus State GA Zip Code 31902-3003	[MEMO ITEM] MEMO: BANK CHARGE	
Purpose of Disbursement BANK CHARGE Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2110 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 206.64 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Columbus State GA Zip Code 31902-3003	SEE BELOW	
Purpose of Disbursement SEE BELOW Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2115 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 93.04 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Columbus State GA Zip Code 31902-3003	[MEMO ITEM] MEMO: HOTEL	
Purpose of Disbursement HOTEL Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	206.64
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2111 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 54.00
City Columbus State GA Zip Code 31902-3003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CONGRESSIONAL CLUB COOKBOOK Candidate Name		<b>[MEMO ITEM]</b> MEMO: CONGRESSIONAL CLUB COOKBOOK
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2112 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 45.00
City Columbus State GA Zip Code 31902-3003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement GIVE AWAYS Candidate Name		<b>[MEMO ITEM]</b> MEMO: GIVE AWAYS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2114 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 13.70
City Columbus State GA Zip Code 31902-3003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POSTAGE Candidate Name		<b>[MEMO ITEM]</b> MEMO: POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Visa (Wells Fargo Remittance Center)</b>		Transaction ID: 50711.E2116 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5	
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 0.90	
City Columbus State GA Zip Code 31902-3003	Purpose of Disbursement BANK CHARGE	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: BANK CHARGE	

Full Name (Last, First, Middle Initial) <b>B. Visa (Wells Fargo Remittance Center)</b>		Transaction ID: 50711.E2137 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 5	
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 256.40	
City Columbus State GA Zip Code 31902-3003	Purpose of Disbursement SEE BELOW	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SEE BELOW	

Full Name (Last, First, Middle Initial) <b>C. Visa (Wells Fargo Remittance Center)</b>		Transaction ID: 50711.E2138 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 5	
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 250.78	
City Columbus State GA Zip Code 31902-3003	Purpose of Disbursement SATELLITE PHONE	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: SATELLITE PHONE	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	256.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2139 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 5
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 5.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Columbus State GA Zip Code 31902-3003	Purpose of Disbursement BANK CHARGE Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2140 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 5
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 2.39 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Columbus State GA Zip Code 31902-3003	Purpose of Disbursement BANK CHARGE Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2141 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 5
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 756.11 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Columbus State GA Zip Code 31902-3003	Purpose of Disbursement SEE BELOW Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	758.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2145 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 5
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 157.00
City Columbus State GA Zip Code 31902-3003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: HOTEL	
Purpose of Disbursement HOTEL Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2144 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 5
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 177.76
City Columbus State GA Zip Code 31902-3003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: GIVE-A-WAYS	
Purpose of Disbursement GIVE-A-WAYS Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2146 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 5
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 417.30
City Columbus State GA Zip Code 31902-3003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: AIRFARE	
Purpose of Disbursement AIRFARE Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Visa (Wells Fargo Remittance Center)</b>		<b>Transaction ID:</b> 50711.E2147 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 5
Mailing Address PO Box 23003		Amount of Each Disbursement this Period 4.05 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Columbus State GA Zip Code 31902-3003	Purpose of Disbursement BANK CHARGE Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: BANK CHARGE

Full Name (Last, First, Middle Initial) <b>B. Wendell Wilbanks</b>		<b>Transaction ID:</b> 50711.E2208 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 5
Mailing Address 9803 Knoxville Ave		Amount of Each Disbursement this Period 289.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lubbock State TX Zip Code 79423-5144	Purpose of Disbursement EXPENSE REIMBURSEMENT Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	EXPENSE REIMBURSEMENT

Full Name (Last, First, Middle Initial) <b>C. Wrigley Partners, LP</b>		<b>Transaction ID:</b> 50711.E2151 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 5
Mailing Address 6604 Norwood Ave		Amount of Each Disbursement this Period 86.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lubbock State TX Zip Code 79413-5909	Purpose of Disbursement SECRETRIAL CONSULTING Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SECRETRIAL CONSULTING

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>375.75</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<b>78159.82</b>

**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 100 / 108

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input checked="" 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)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)  
**A.** Randy Neugebauer

Transaction ID: 50711.E2166  
Date of Disbursement

Mailing Address P.O. Box 54175

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	5

City Lubbock State TX Zip Code 79453-

Amount of Each Disbursement this Period

100000.00
-----------

Purpose of Disbursement  
Repay Loan made/Guar. By Cand Loan Repay

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

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

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

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

100000.00
-----------

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

100000.00
-----------

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 101 / 108

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Charles Boustany</b>		<b>Transaction ID: 50711.E2190</b> Date of Disbursement 06 / 16 / 2005
Mailing Address Suite 1400 800 Lafayette Street		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lafayette State LA Zip Code 70501-6800	<input type="checkbox"/> Category/ Type	
Purpose of Disbursement ROMP II		
Candidate Name CHARLES W. JR BOUSTANY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 07	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Shelley Capito</b>		<b>Transaction ID: 50711.E2191</b> Date of Disbursement 06 / 16 / 2005
Mailing Address 4815 Maccorkle Ave SE		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Charleston State WV Zip Code 25304-1948	<input type="checkbox"/> Category/ Type	
Purpose of Disbursement ROMP II		
Candidate Name SHELLEY MOORE CAPITO		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 02	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Chris Chocola</b>		<b>Transaction ID: 50713.E2217</b> Date of Disbursement 06 / 16 / 2005
Mailing Address Suite 330 100 East Wayne Street		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City South Bend State IN Zip Code 46601-2351	<input type="checkbox"/> Category/ Type	
Purpose of Disbursement ROMP II		
Candidate Name J CHRISTOPHER CHOCOLA		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Charles Dent</b>		Transaction ID: 50711.E2193 Date of Disbursement 06 / 16 / 2005
Mailing Address Suite 200 701 West Broad Street		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Bethlehem State PA Zip Code 18018-5229	Category/ Type	
Purpose of Disbursement ROMP II		
Candidate Name CHARLES W DENT		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jeff Fortenberry</b>		Transaction ID: 50711.E2194 Date of Disbursement 06 / 16 / 2005
Mailing Address PO Box 30265		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lincoln State NE Zip Code 68503-0265	Category/ Type	
Purpose of Disbursement ROMP II		
Candidate Name JEFFREY LANE FORTENBERRY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 01	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Robin Hayes</b>		Transaction ID: 50711.E2195 Date of Disbursement 06 / 16 / 2005
Mailing Address 137 Union St S		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Concord State NC Zip Code 28025-5011	Category/ Type	
Purpose of Disbursement ROMP II		
Candidate Name ROBERT CANNON HAYES		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

3000.00

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 103 / 108

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Randy Kuhl</b>		<b>Transaction ID: 50711.E2196</b> Date of Disbursement 06 / 16 / 2005	
Mailing Address 32 Denison Pkwy W		Amount of Each Disbursement this Period 1000.00	
City Corning State NY Zip Code 14830-2607	Purpose of Disbursement ROMP II	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name JOHN R JR KUHL	Category/ Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mike Rogers</b>		<b>Transaction ID: 50711.E2197</b> Date of Disbursement 06 / 16 / 2005	
Mailing Address 1129 Noble St		Amount of Each Disbursement this Period 1000.00	
City Anniston State AL Zip Code 36201-4665	Purpose of Disbursement ROMP II	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name MICHAEL ROGERS	Category/ Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Joe Schwarz</b>		<b>Transaction ID: 50711.E2198</b> Date of Disbursement 06 / 16 / 2005	
Mailing Address 142 N Mechanic St		Amount of Each Disbursement this Period 1000.00	
City Jackson State MI Zip Code 49201-1301	Purpose of Disbursement ROMP II	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name JOHN SCHWARZ	Category/ Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 104 / 108

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

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NAME OF COMMITTEE (In Full)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)  
Heather Wilson

Mailing Address ROOM 318 CHOB  
Cannon House Office Building

City Washington State DC Zip Code 20515-

Purpose of Disbursement  
ROMP II

Candidate Name  
HEATHER A. WILSON

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: NM District: 01

Transaction ID: 50711.E2199  
Date of Disbursement

06 / 16 / 2005

Amount of Each Disbursement this Period

1000.00

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

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

1000.00

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

10000.00



**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 105 / 108
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)  
 NEUGEBAUER CONGRESSIONAL COMMITTEE

**Transaction ID: LS50304.C2**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) The Honorable Randy Neugebauer	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SG-2003
Mailing Address P.O. Box 54175	
City Lubbock State TX ZIP Code 79453-	

Original Amount of Loan 150000.00	Cumulative Payment To Date 100000.00	Balance Outstanding at Close of This Period 50000.00
--------------------------------------	---	---

**TERMS**

Date Incurred M M 1 2 D D 3 1 Y Y Y Y 2 0 0 2	Date Due ONDEMAND	Interest Rate .0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	----------------------	--------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial) The Honorable Randy Neugebauer	Name of Employer US House of Representatives
Mailing Address P.O. Box 54175	Occupation Congressman
City Lubbock State TX ZIP Code 79453-	Amount Guaranteed Outstanding: 0.00
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:

<b>SUBTOTALS</b> This Period This Page (optional) .....	50000.00
<b>TOTALS</b> This Period (last page in this line only) .....	
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 106 / 108
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)  
 NEUGEBAUER CONGRESSIONAL COMMITTEE

**Transaction ID: LS50304.C3**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) The Honorable Randy Neugebauer	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ P-2003
Mailing Address P.O. Box 54175	
City Lubbock State TX ZIP Code 79453-	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
70000.00	0.00	70000.00

**TERMS**

Date Incurred M M D D Y Y Y Y 06 02 2003	Date Due ONDEMAND	Interest Rate .0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	----------------------	--------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial) The Honorable Randy Neugebauer	Name of Employer US House of Representatives
Mailing Address P.O. Box 54175	Occupation Congressman
City Lubbock State TX ZIP Code 79453-	Amount Guaranteed Outstanding: 0.00
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:

<b>SUBTOTALS</b> This Period This Page (optional) .....	70000.00
<b>TOTALS</b> This Period (last page in this line only) .....	
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 107 / 108
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 13a <input checked="" type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)  
 NEUGEBAUER CONGRESSIONAL COMMITTEE

**Transaction ID: LS50713.C5011**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) HCSB Kerrville	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1145 Junction Hwy	
City Kerrville State TX ZIP Code 78028-4903	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

**TERMS**

Date Incurred M M 05 D D 09 Y Y Y Y 2005	Date Due ONDEMAND	Interest Rate .0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	----------------------	--------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	<b>100000.00</b>
<b>TOTALS</b> This Period (last page in this line only) .....	<b>220000.00</b>
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Supplementary for  
Information found on  
Page 108 / 108  
of Schedule C

Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full) <b>NEUGEBAUER CONGRESSIONAL COMMITTEE</b>		<b>FEC IDENTIFICATION NUMBER</b> C00384016	
Back Ref ID: LS50713.C5011			
<b>LENDING INSTITUTION (LENDER)</b> Full Name HCSB		Amount of Loan 100000.00	Interest Rate (APR) 0.060 %
Mailing Address 1145 Junction HWY		Date Incurred or Established 05 23 2005	
City Kerrville	State TX	Zip Code 78028-	Date Due 20060509
A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		If yes, date originally incurred : 05 09 2005	
B. If line of credit, Amount of this Draw: 100000.00		Total Outstanding balance : 150000.00	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the value of this collateral? 0.00 Does the lender have a perfected security interest in it? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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. Unsecured - Guarneered by candidate			
G. COMMITTEE TREASURER Typed Name T. Mike Field Signature _____		DATE 05 23 2005	
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 J. David Williams Signature _____		DATE 05 23 2005	
Title Chairman			