

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
Forbes for Congress

ADDRESS (number and street) PO Box 15100
 Check if different than previously reported. (ACC)
Chesapeake VA 23328

2. **FEC IDENTIFICATION NUMBER** C00365692
CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
VA 04

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 01 01 2008 through 03 31 2008

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

Signature of Treasurer Electronically Filed by Cheryl L. Freauff Date 06 03 2008

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Forbes for Congress

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	116982.00	410514.76
(b) Total Contribution Refunds (from Line 20(d)).....	2300.00	2300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	114682.00	408214.76
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	69005.62	336223.85
(b) Total Offsets to Operating Expenditures (from Line 14).....	60.48	6001.97
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	68945.14	330221.88
8. Cash on Hand at Close of Reporting Period (from Line 27).....	398619.27	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Forbes for Congress

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

60785.00

233938.27

(ii) Unitemized.....

10447.00

26222.75

(iii) TOTAL of contributions

71232.00

260161.02

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

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

45750.00

150353.74

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

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

116982.00

410514.76

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

0.00

0.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

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

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

60.48

6001.97

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

1482.48

12495.76

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

118524.96

429012.49

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	69005.62	336223.85
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	2300.00	2300.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2300.00	2300.00
21. OTHER DISBURSEMENTS.....	5000.00	21693.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	76305.62	360216.85

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	356399.93
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	118524.96
25. SUBTOTAL (add Line 23 and Line 24).....	474924.89
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	76305.62
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	398619.27

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Samuel Adams		Date of Receipt MM / DD / YYYY 02 / 22 / 2008
	Mailing Address 532 Ingleside Ave		Transaction ID: 80313.C10077
	City Emporia	State VA	Zip Code 23847
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer self employed Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation real estate investor 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)

B.	Full Name (Last, First, Middle Initial) Lofton Allen		Date of Receipt MM / DD / YYYY 02 / 22 / 2008
	Mailing Address 205 Shore Dr		Transaction ID: 80313.C10078
	City Emporia	State VA	Zip Code 23847
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Election Cycle-to-Date ▼ 200.00	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) Lofton Allen		Date of Receipt MM / DD / YYYY 03 / 13 / 2008
	Mailing Address 205 Shore Dr		Transaction ID: 80313.C10296
	City Emporia	State VA	Zip Code 23847
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Election Cycle-to-Date ▼ 225.00	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	625.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

<p>A. Full Name (Last, First, Middle Initial) William Bain</p> <p>Mailing Address 19509 Bain Rd</p> <p>City State Zip Code Dinwiddie VA 23841</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer self employed Occupation farmer</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 8</p> <p>Transaction ID: 80313.C10307</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>
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<p>B. Full Name (Last, First, Middle Initial) Gary Barlow</p> <p>Mailing Address 3347 Nansemond River Dr</p> <p>City State Zip Code Suffolk VA 23435-0902</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Franks Trucking Center In-c. Occupation Professional</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 8</p> <p>Transaction ID: 80313.C10117</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Nina Blaha</p> <p>Mailing Address 10149 Squirrel Level Road</p> <p>City State Zip Code Petersburg VA 23803-7847</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">450.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 8</p> <p>Transaction ID: 80317.C10324</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>
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SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Elizabeth Bradshaw

Mailing Address PO Box 895

City State Zip Code
Franklin VA 23851

FEC ID number of contributing federal political committee. C

Name of Employer Requested Occupation Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
03 / 04 / 2008

Transaction ID: 80313.C10150

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 1342 Devonshire Ct

City State Zip Code
Suffolk VA 23434

FEC ID number of contributing federal political committee. C

Name of Employer Northrup Grumman Occupation Machine Operator/Laborer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
03 / 04 / 2008

Transaction ID: 80313.C10099

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)
Mary Brown

Mailing Address 1342 Devonshire Ct.

City State Zip Code
Suffolk VA 23434

FEC ID number of contributing federal political committee. C

Name of Employer Suffolk Public Schools Occupation SUPERVISOR

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
03 / 04 / 2008

Transaction ID: 80313.C10100

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) 1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 108
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Daniel Bunting

Mailing Address 1314 Fairway Dr.

City State Zip Code
Chesapeake VA 23320-9402

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 04 / 2008

Transaction ID: 80313.C10118

Amount of Each Receipt this Period
100.00

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

B.

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

Mailing Address 217 Meadow Ln

City State Zip Code
Franklin VA 23851

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

Name of Employer Occupation
Union Camp Inc. Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 04 / 2008

Transaction ID: 80313.C10151

Amount of Each Receipt this Period
100.00

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

C.

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

Mailing Address 217 Meadow Ln

City State Zip Code
Franklin VA 23851

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

Name of Employer Occupation
Union Camp Inc. Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2008

Transaction ID: 80408.C10490

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) ▶ **450.00**

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

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

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

FOR LINE NUMBER: PAGE 9 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Mary Canada
 Mailing Address 9203 Wigneil St
 City State Zip Code
 Suffolk VA 23433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The Canada Company Contractor
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 0 4 / 2 0 0 8
Transaction ID: 80313.C10106
 Amount of Each Receipt this Period
 200.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Jacqueline Capecci
 Mailing Address 495 Ravencroft Dr
 City State Zip Code
 Petersburg VA 23805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 self employed RN
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 0 4 / 2 0 0 8
Transaction ID: 80313.C10104
 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)
Mel Chaskin
 Mailing Address 12025 Seven Hills Ln
 City State Zip Code
 Clifton VA 20124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Vanguard Research Inc. President
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 1 3 / 2 0 0 8
Transaction ID: 80313.C10287
 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) ► 700.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 10 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Samuel Clay
Mailing Address 25110 Courthouse Rd
City State Zip Code
Stony Creek VA 23882
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Clay Home Medical Owner
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 03 / 04 / 2008
Transaction ID: 80313.C10102
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)
Kevin Cosgrove
Mailing Address 1424 Baffly Loop
City State Zip Code
Chesapeake VA 23320
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Hunton and Williams Attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00
Date of Receipt 03 / 31 / 2008
Transaction ID: 80408.C10491
Amount of Each Receipt this Period 100.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Christian Creteur
Mailing Address 3083 Tyre Neck Rd
City State Zip Code
Chesapeake VA 23321
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Retired physician
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00
Date of Receipt 03 / 04 / 2008
Transaction ID: 80313.C10107
Amount of Each Receipt this Period 200.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 800.00
TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Judith Dailey
Mailing Address 1265 West Rd
City Chesapeake State VA Zip Code 23323
FEC ID number of contributing federal political committee. **C**
Name of Employer Great Bridge Vet. Hospital Occupation Business Manager
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 1000.00
Date of Receipt 03 / 04 / 2008
Transaction ID: 80313.C10095
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)
James Derderian
Mailing Address 4720 32nd Street North
City Arlington State VA Zip Code 22207
FEC ID number of contributing federal political committee. **C**
Name of Employer Stanton Park Group LLC Occupation President
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 1500.00
Date of Receipt 02 / 14 / 2008
Transaction ID: 80313.C10305
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)
John Dicks
Mailing Address 3803 Sulgrave Rd
City Richmond State VA Zip Code 23221
FEC ID number of contributing federal political committee. **C**
Name of Employer FutureLaw, LLC Occupation Attorney
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 200.00
Date of Receipt 03 / 04 / 2008
Transaction ID: 80313.C10142
Amount of Each Receipt this Period 100.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 108

(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
William Dodson

Mailing Address 3809 Portsmouth Blvd.

City State Zip Code
Chesapeake VA 23321

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 0 8

Transaction ID: 80317.C10320

Amount of Each Receipt this Period 300.00

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

B.

Full Name (Last, First, Middle Initial)
Paula Dunkum

Mailing Address 701 Keeling Ct

City State Zip Code
Chesapeake VA 23322

FEC ID number of contributing federal political committee. C

Name of Employer self employed Occupation Self Employed

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 0 8

Transaction ID: 80317.C10344

Amount of Each Receipt this Period 50.00

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

C.

Full Name (Last, First, Middle Initial)
Jennifer Ely

Mailing Address 1105 Kyle Court

City State Zip Code
Chesapeake VA 23322

FEC ID number of contributing federal political committee. C

Name of Employer self employed Occupation author

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 0 8

Transaction ID: 80317.C10319

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) 850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Beryl Ferguson
Mailing Address 6471 Powder Horn Dr
City Norfolk State VA Zip Code 23518-5322
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 200.00
Date of Receipt 03 / 04 / 2008
Transaction ID: 80313.C10124
Amount of Each Receipt this Period 100.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
William Fuller
Mailing Address 1424 Blue Heron Rd
City Virginia Beach State VA Zip Code 23454-1700
FEC ID number of contributing federal political committee. **C**
Name of Employer Fulco Development Inc. Occupation real estate developer
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2200.00
Date of Receipt 03 / 04 / 2008
Transaction ID: 80313.C10096
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)
Dennis Gartman
Mailing Address 9136 River Crescent
City Suffolk State VA Zip Code 23433
FEC ID number of contributing federal political committee. **C**
Name of Employer Gartman Letter LLC Occupation publisher
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2560.00
Date of Receipt 03 / 27 / 2008
Transaction ID: 80408.C10464
Amount of Each Receipt this Period 1280.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2380.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Dennis Gartman

Mailing Address 9136 River Crescent

City State Zip Code
Suffolk VA 23433

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

Name of Employer: Gartman Letter LLC Occupation: publisher

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3580.00

Date of Receipt: 03 / 27 / 2008
Transaction ID: 80408.C10465
 Amount of Each Receipt this Period: 1020.00

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

B. Full Name (Last, First, Middle Initial)
Margaret Gartman

Mailing Address 9136 River Crescent

City State Zip Code
Suffolk VA 23433

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

Name of Employer: Gartman Letter LLC Occupation: President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt: 02 / 05 / 2008
Transaction ID: 80313.C10061
 Amount of Each Receipt this Period: 2300.00

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

C. Full Name (Last, First, Middle Initial)
Rosalin Gilbert

Mailing Address 860 Hillwell Rd

City State Zip Code
Chesapeake VA 23322

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 150.00

Date of Receipt: 03 / 04 / 2008
Transaction ID: 80313.C10156
 Amount of Each Receipt this Period: 50.00

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

SUBTOTAL of Receipts This Page (optional) ► **3370.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 108

(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Rosalin Gilbert

Mailing Address 860 Hillwell Rd

City	State	Zip Code
Chesapeake	VA	23322

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2008

Transaction ID: 80408.C10494

Amount of Each Receipt this Period

50.00

Receipt

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

B.

Full Name (Last, First, Middle Initial)
Thelma Gilbert

Mailing Address 860 Hillwell Rd

City	State	Zip Code
Chesapeake	VA	23322-3837

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 150.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2008

Transaction ID: 80313.C10155

Amount of Each Receipt this Period

50.00

Receipt

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

C.

Full Name (Last, First, Middle Initial)
Thelma Gilbert

Mailing Address 860 Hillwell Rd

City	State	Zip Code
Chesapeake	VA	23322-3837

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2008

Transaction ID: 80408.C10495

Amount of Each Receipt this Period

50.00

Receipt

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

SUBTOTAL of Receipts This Page (optional) ▶

150.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
John Gregory
 Mailing Address 9111 Peabody St
 City Manassas State VA Zip Code 20110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gregory Construction Occupation construction
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
 Date of Receipt 03 / 17 / 2008
Transaction ID: 80317.C10410
 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)
Elizabeth Grizzard
 Mailing Address 10642 Lowground Road
 City Emporia State VA Zip Code 23847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Southside VA Community College Occupation Assistant to President
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 485.00
 Date of Receipt 03 / 10 / 2008
Transaction ID: 80317.C10321
 Amount of Each Receipt this Period 285.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Andrew Halataei
 Mailing Address 330 N Greenbrier St
 City Arlington State VA Zip Code 22203-1328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Stanton Park Group LLC Occupation lobbyist
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
 Date of Receipt 01 / 25 / 2008
Transaction ID: 80131.C10051
 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) ► 1035.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 108

(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

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

Mailing Address 112 Cedar Rd

City	State	Zip Code
Chesapeake	VA	23322-5239

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

Name of Employer Retired Occupation Retired

Receipt For: 2008	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify) ▼	1300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2008

Transaction ID: 80313.C10148

Amount of Each Receipt this Period

100.00

Receipt

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

B.

Full Name (Last, First, Middle Initial)
F. Woodrow Harris

Mailing Address 1105 West End Drive

City	State	Zip Code
Emporia	VA	23847

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

Name of Employer City of Emporia Occupation Probation Supervisor

Receipt For: 2008	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify) ▼	200.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2008

Transaction ID: 80317.C10412

Amount of Each Receipt this Period

200.00

Receipt

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

C.

Full Name (Last, First, Middle Initial)
Ed Hartman

Mailing Address 22579 Main Street

City	State	Zip Code
Courtland	VA	23837

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

Name of Employer Mid Atlantic Gir LLC Occupation Owner

Receipt For: 2008	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify) ▼	250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2008

Transaction ID: 80317.C10411

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) ▶

550.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Edward Harvey

Mailing Address 2689 Shorehaven Drive

City State Zip Code
Virginia Beach VA 23454

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Alion Science and Technology Defense Contractor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4600.00

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

Transaction ID: 80313.C10060

Amount of Each Receipt this Period
2300.00

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

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

Mailing Address 706 Aquila Dr

City State Zip Code
Chesapeake VA 23322-8034

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Southern Aggregates LLC Vice President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2200.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80408.C10482

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)
William Hoddinott

Mailing Address 233 Haviland Rd

City State Zip Code
Chesapeake VA 23320-4715

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 0 8

Transaction ID: 80313.C10146

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) 3400.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 108
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

<p>A. Full Name (Last, First, Middle Initial) Patricia Horne</p> <p>Mailing Address 611 Temple Avenue</p> <p>City State Zip Code Emporia VA 23847-2254</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Southern Va. Regional Med. Ctr Nuclear Med. Technologist</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">250.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 22 / 2008</p> <p>Transaction ID: 80313.C10079</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. Full Name (Last, First, Middle Initial) Elizabeth Hotchkiss</p> <p>Mailing Address 204 Meadow Lane</p> <p>City State Zip Code Franklin VA 23851-1843</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Homemaker homemaker</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">250.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 10 / 2008</p> <p>Transaction ID: 80317.C10325</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>C. Full Name (Last, First, Middle Initial) Gregory Ireland</p> <p>Mailing Address 1028 Waters Rd</p> <p>City State Zip Code Chesapeake VA 23322</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation G.S. Ireland Inc. President</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">4600.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 14 / 2008</p> <p>Transaction ID: 80313.C10304</p> <p>Amount of Each Receipt this Period 2300.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	2800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

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

Mailing Address 218 N Sparrow Rd

City State Zip Code
Chesapeake VA 23325

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
D D Jones Transfer and Warehouse Owner

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

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 1 7 / 2 0 0 8

Transaction ID: 80317.C10406

Amount of Each Receipt this Period
1000.00

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

3300.00

B. Full Name (Last, First, Middle Initial)
Susan Kelly

Mailing Address 1308 Prestwick Ct

City State Zip Code
Chesapeake VA 23320-9446

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Jo-Kell, Inc. President

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

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: 80313.C10054

Amount of Each Receipt this Period
2300.00

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

4600.00

C. Full Name (Last, First, Middle Initial)
Linus Kojelis

Mailing Address 116 Marshall St

City State Zip Code
Petersburg VA 23803-4545

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
self-employed consultant

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

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 1 7 / 2 0 0 8

Transaction ID: 80317.C10418

Amount of Each Receipt this Period
125.00

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

225.00

SUBTOTAL of Receipts This Page (optional) 3425.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 108
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Christopher Lacivita

Mailing Address 3075 French Hill Dr

City State Zip Code
Powhatan VA 23139-4531

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

Name of Employer self employed Occupation Political Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
MM / DD / YYYY
02 / 22 / 2008

Transaction ID: 80313.C10080

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)
John Mcginn

Mailing Address 4301 Blackthorne Court

City State Zip Code
Virginia Beach VA 23455

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

Name of Employer Alion Science and Technology Occupation Operations Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt
MM / DD / YYYY
02 / 05 / 2008

Transaction ID: 80313.C10059

Amount of Each Receipt this Period
2300.00

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

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

Mailing Address 212 Dogwood Dr

City State Zip Code
Fredericksburg VA 22405-6111

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

Name of Employer McQuiddy Incorporated Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
MM / DD / YYYY
02 / 05 / 2008

Transaction ID: 80313.C10070

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) ► **3050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 108
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

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

Mailing Address 2451 N Taylor St

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
Alpine Group Govt Relation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
02 / 22 / 2008

Transaction ID: 80313.C10076

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)
Jerrold Miller

Mailing Address 2 Harper Ave

City State Zip Code
Portsmouth VA 23707

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

Name of Employer Occupation
Earl Industries President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2008

Transaction ID: 80408.C10476

Amount of Each Receipt this Period
1200.00

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

C. Full Name (Last, First, Middle Initial)
Jerrold Miller

Mailing Address 2 Harper Ave

City State Zip Code
Portsmouth VA 23707

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

Name of Employer Occupation
Earl Industries President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2008

Transaction ID: 80408.C10477

Amount of Each Receipt this Period
1100.00

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

SUBTOTAL of Receipts This Page (optional) ► 2800.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Juan Montero

Mailing Address 524 Woodards Ford Rd

City Chesapeake State VA Zip Code 23322

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

Name of Employer self employed Occupation surgeon

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

Date of Receipt 03 / 10 / 2008
Transaction ID: 80317.C10318
 Amount of Each Receipt this Period 1000.00

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

Amount of Each Receipt this Period 1400.00

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

Mailing Address 224 Melonie Dr.

City Chesapeake State VA Zip Code 23322

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

Name of Employer Great Bridge Baptist Church Occupation Professional

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

Date of Receipt 03 / 17 / 2008
Transaction ID: 80317.C10405
 Amount of Each Receipt this Period 1000.00

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

Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Kerry Nothnagel

Mailing Address 332 Woodberry Dr

City Chesapeake State VA Zip Code 23322

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

Name of Employer Transystems Corp Occupation civil engineer

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

Date of Receipt 03 / 19 / 2008
Transaction ID: 80317.C10314
 Amount of Each Receipt this Period 500.00

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

Amount of Each Receipt this Period 1500.00

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 108
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
William Patton

Mailing Address 2066 Defense Road

City State Zip Code
Petersburg VA 23805

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 04 / 2008

Transaction ID: 80313.C10101

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)
G. W. Pegram

Mailing Address 3100 Shore Drive
Apt 921

City State Zip Code
Virginia Beach VA 23451

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

Name of Employer self employed Occupation physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 04 / 2008

Transaction ID: 80313.C10121

Amount of Each Receipt this Period
100.00

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

C.

Full Name (Last, First, Middle Initial)
Annette Peoples

Mailing Address 1328 Head Of River Rd

City State Zip Code
Chesapeake VA 23322

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

Name of Employer Homemaker Occupation homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2008

Transaction ID: 80317.C10342

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ► 1200.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 108
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
W. Wayne Perry

Mailing Address 5265 River Club Drive

City State Zip Code
Suffolk VA 23435

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

Name of Employer Occupation
Community Personal Care healthcare executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
03 / 04 / 2008

Transaction ID: 80313.C10110

Amount of Each Receipt this Period
200.00

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

B.

Full Name (Last, First, Middle Initial)
Patrick Joseph Pettey

Mailing Address 10301 Chapel Road

City State Zip Code
Potomac MD 20854

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

Name of Employer Occupation
Williams & Jensen, PLLC principal

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
02 / 05 / 2008

Transaction ID: 80313.C10068

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)
Michael Pitt

Mailing Address 100 Swimming Point Walk

City State Zip Code
Portsmouth VA 23704

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

Name of Employer Occupation
Marcus Santos & Kojok Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
03 / 04 / 2008

Transaction ID: 80313.C10111

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 108
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

<p>A. Full Name (Last, First, Middle Initial) Henry Plaster</p> <p>Mailing Address 5407 Albemarle Street</p> <p>City State Zip Code Bethesda MD 20816</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Plaster & Associates, LLC</p> <p>Occupation President</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt 03 / 17 / 2008</p> <p>Transaction ID: 80317.C10408</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) William Ramsey</p> <p>Mailing Address 605 Edgewood Arch</p> <p>City State Zip Code Chesapeake VA 23322-5836</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer US Navy</p> <p>Occupation Captain</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 350.00</p>	<p>Date of Receipt 03 / 31 / 2008</p> <p>Transaction ID: 80408.C10492</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) Edward Reed</p> <p>Mailing Address 1310 Prestwick Ct</p> <p>City State Zip Code Chesapeake VA 23320</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Givens Inc.</p> <p>Occupation President</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 4600.00</p>	<p>Date of Receipt 02 / 05 / 2008</p> <p>Transaction ID: 80313.C10062</p> <p>Amount of Each Receipt this Period 2300.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	2900.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 27 / 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)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Teri Rigell
Mailing Address 915 First Colonial Road, Ste. 100
City Virginia Beach State VA Zip Code 23454
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation homemaker
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Date of Receipt 02 / 05 / 2008
Transaction ID: 80313.C10063
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)
Ronald Ritter
Mailing Address 732 Schoolhouse Road
City Chesapeake State VA Zip Code 23322
FEC ID number of contributing federal political committee. **C**
Name of Employer Earl Industries Occupation Senior Vice President
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Date of Receipt 01 / 31 / 2008
Transaction ID: 80313.C10055
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)
Susan Ritter
Mailing Address 732 School House Road
City Chesapeake State VA Zip Code 23322
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation homemaker
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Date of Receipt 01 / 31 / 2008
Transaction ID: 80313.C10075
Amount of Each Receipt this Period 200.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **3300.00**
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 108

(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Wayne Roach

Mailing Address 11305 Laurel Cove Lane

City State Zip Code
Chesterfield VA 23838-8915

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Alleghany Warehouse Co. VP - Operations

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

200.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 04 / 2008

Transaction ID: 80313.C10126

Amount of Each Receipt this Period
100.00

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

B.

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

Mailing Address 3416 Old Dominion Blvd

City State Zip Code
Alexandria VA 22305

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Williams & Jensen PC Attorney

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

1500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 05 / 2008

Transaction ID: 80313.C10071

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)
Thomas Rountree

Mailing Address 5469 Old Myrtle Road

City State Zip Code
Suffolk VA 23434-8316

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
self employed farmer

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2008

Transaction ID: 80317.C10323

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) 850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Edward Russell

Mailing Address 6325 N Center Dr., Bldg 18, Ste 22

City Norfolk State VA Zip Code 23502-4010

FEC ID number of contributing federal political committee. C

Name of Employer Kaufman & Canoles Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt M M / D D / Y Y Y Y
03 / 31 / 2008

Transaction ID: 80408.C10485

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)
Wayne Sawyer

Mailing Address 5635 Shoulders Hill Road
Bennetts Creek Nursery

City Suffolk State VA Zip Code 23435

FEC ID number of contributing federal political committee. C

Name of Employer Bennetts Creek Nursery Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
03 / 27 / 2008

Transaction ID: 80408.C10469

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)
J. R. Schmidtke

Mailing Address 4004 Nina Dr

City Chesapeake State VA Zip Code 23321-2020

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt M M / D D / Y Y Y Y
03 / 04 / 2008

Transaction ID: 80313.C10125

Amount of Each Receipt this Period 100.00

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

SUBTOTAL of Receipts This Page (optional) 2100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 108
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial) Earl Sealey		Date of Receipt MM / DD / YYYY 03 / 10 / 2008
Mailing Address 3509 Vinton Street		Transaction ID: 80317.C10340
City Hopewell	State VA	Zip Code 23860
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer self employed	Occupation retail sales	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 453.27	

B.

Full Name (Last, First, Middle Initial) William R. Shepherd Jr.		Date of Receipt MM / DD / YYYY 03 / 31 / 2008
Mailing Address 1414 South Military Highway		Transaction ID: 80408.C10483
City Chesapeake	State VA	Zip Code 23320
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Greenbrier Chrysler	Occupation jeep/dealer	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

C.

Full Name (Last, First, Middle Initial) Norman Slagle		Date of Receipt MM / DD / YYYY 03 / 04 / 2008
Mailing Address 401 Bluewater Ct		Transaction ID: 80313.C10119
City Chesapeake	State VA	Zip Code 23320-3558
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Vico Construction	Occupation engineer	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	1200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 108
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Jacqueline Smith

Mailing Address 1944 Lancing Crest Lane

City State Zip Code
Chesapeake VA 23323

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

Name of Employer Occupation
Homemaker homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2008

Transaction ID: 80317.C10317

Amount of Each Receipt this Period
2300.00

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

B.

Full Name (Last, First, Middle Initial)
Roland Smith

Mailing Address 1944 Lancing Crest Ln

City State Zip Code
Chesapeake VA 23323

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

Name of Employer Occupation
Hearndon Construction builder/developer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

6900.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 31 / 2008

Transaction ID: 80313.C10056

Amount of Each Receipt this Period
2300.00

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

C.

Full Name (Last, First, Middle Initial)
William Spencer

Mailing Address 9307 Summerlook Pl

City State Zip Code
Chesterfield VA 23832

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

Name of Employer Occupation
Xymid Llc Business Management

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 21 / 2008

Transaction ID: 80408.C10446

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) ► **5600.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

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

Mailing Address 9307 Summerlook PI

City State Zip Code
Chesterfield VA 23832

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

Name of Employer Occupation
Xymid Llc Business Management

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2008

Transaction ID: 80408.C10466

Amount of Each Receipt this Period
1300.00

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

4600.00

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

Mailing Address 428 Laurel St

City State Zip Code
Emporia VA 23847-2513

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

Name of Employer Occupation
City of Emporia, VA Emporia City Council

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 04 / 2008

Transaction ID: 80313.C10103

Amount of Each Receipt this Period
250.00

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

250.00

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

Mailing Address 1321 Baffly Loop

City State Zip Code
Chesapeake VA 23320

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

Name of Employer Occupation
Summit Group of VA Owner

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2008

Transaction ID: 80317.C10322

Amount of Each Receipt this Period
250.00

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

350.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 108

(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Jack Stumborg

Mailing Address 1509 Alanton Dr

City State Zip Code
Virginia Beach VA 23454-1605

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Atlantic Yacht Basin Yacht Storage and Repair

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2200.00

Date of Receipt MM / DD / YYYY
03 / 31 / 2008

Transaction ID: 80408.C10478

Amount of Each Receipt this Period
1700.00

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

B.

Full Name (Last, First, Middle Initial)
Len Swinehart

Mailing Address 3410 Martha Custis

City State Zip Code
Alexandria VA 22302

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Johnson Madigan Peck lobbyist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
02 / 05 / 2008

Transaction ID: 80313.C10069

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)
William H. Thomas

Mailing Address 2138 Haverford Drive

City State Zip Code
Chesapeake VA 23320

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt MM / DD / YYYY
03 / 04 / 2008

Transaction ID: 80313.C10116

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) 2300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

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

Mailing Address 1400 Elbow Rd

City Chesapeake State VA Zip Code 23320

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

Name of Employer Elbow Road Farm Inc Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt 03 / 04 / 2008
Transaction ID: 80313.C10123
 Amount of Each Receipt this Period 100.00

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

B. Full Name (Last, First, Middle Initial)
Mervin Troyer

Mailing Address 504 Woodards Ford Rd

City Chesapeake State VA Zip Code 23322

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

Name of Employer Cypress Point Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3560.00

Date of Receipt 01 / 31 / 2008
Transaction ID: 80313.C10057
 Amount of Each Receipt this Period 1780.00

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

C. Full Name (Last, First, Middle Initial)
Mervin Troyer

Mailing Address 504 Woodards Ford Rd

City Chesapeake State VA Zip Code 23322

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

Name of Employer Cypress Point Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4080.00

Date of Receipt 01 / 31 / 2008
Transaction ID: 80313.C10058
 Amount of Each Receipt this Period 520.00

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

SUBTOTAL of Receipts This Page (optional) ▶ 2400.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Jayantil Uka
Mailing Address 7414 Weather Worn Way
City Columbia State MD Zip Code 21046-1480
FEC ID number of contributing federal political committee. **C**
Name of Employer Martville Hospital Occupation physician
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt: MM / DD / YYYY 03 / 04 / 2008
Transaction ID: 80313.C10097
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)
Linda Vick
Mailing Address 29306 S. Main St., P.O.Box 204
City Newsoms State VA Zip Code 23874
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation homemaker
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt: MM / DD / YYYY 03 / 04 / 2008
Transaction ID: 80313.C10127
Amount of Each Receipt this Period 100.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Frank Vlossak
Mailing Address 4001 N 9th St Apt 1809
City Arlington State VA Zip Code 22203
FEC ID number of contributing federal political committee. **C**
Name of Employer Williams & Jensen PC Occupation Partner
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt: MM / DD / YYYY 02 / 05 / 2008
Transaction ID: 80313.C10067
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) ► 1600.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 36 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Ray Waters

Mailing Address 605 Oxbow Ct

City State Zip Code
Chesapeake VA 23322

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

Name of Employer Occupation
Hampton Roads Mech. Inc. pipe fitter

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2008

Transaction ID: 80317.C10409

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)
Bruce Watts

Mailing Address 500 Stuart Cir

City State Zip Code
Norfolk VA 23502-4455

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

Name of Employer Occupation
W&B Development Consulting LLC Partner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 04 / 2008

Transaction ID: 80313.C10105

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)
Bonita Whitlow

Mailing Address 325 Sign Pine Rd

City State Zip Code
Chesapeake VA 23322

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

Name of Employer Occupation
Retired Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 04 / 2008

Transaction ID: 80313.C10138

Amount of Each Receipt this Period
100.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (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)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Wiley Rein & Fielding LLP

Mailing Address 1776 K Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 03 / 17 / 2008

Transaction ID: 80317.C10398

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)
Scott McCaleb

Mailing Address 1776 K St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation
Wiley Rein & Feilding Partner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt 03 / 17 / 2008

Transaction ID: 80317.C10436

Amount of Each Receipt this Period 200.00

Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Partnership->Wiley Rein & Fielding LLP

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

Mailing Address 1776 K St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation
Wiley Rein & Feilding Partner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt 03 / 17 / 2008

Transaction ID: 80317.C10437

Amount of Each Receipt this Period 200.00

Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Partnership->Wiley Rein & Fielding LLP

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

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

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

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

FOR LINE NUMBER: PAGE 38 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Robert Pettit
 Mailing Address 1776 K St., NW
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wiley Rein & Feilding Occupation Partner
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00
 Date of Receipt 03 / 17 / 2008
Transaction ID: 80317.C10438
 Amount of Each Receipt this Period 200.00
 Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Partnership->Wiley Rein & Feilding LLP

B. Full Name (Last, First, Middle Initial)
Bert Rein
 Mailing Address 1776 K St., NW
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wiley Rein & Feilding Occupation Partner
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00
 Date of Receipt 03 / 17 / 2008
Transaction ID: 80317.C10439
 Amount of Each Receipt this Period 200.00
 Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Partnership->Wiley Rein & Feilding LLP

C. Full Name (Last, First, Middle Initial)
William Roberts
 Mailing Address 1776 K St., NW
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wiley Rein & Feilding Occupation Partner
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00
 Date of Receipt 03 / 17 / 2008
Transaction ID: 80317.C10440
 Amount of Each Receipt this Period 200.00
 Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 Partnership->Wiley Rein & Feilding LLP

SUBTOTAL of Receipts This Page (optional) ▶ 0.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 108
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Wiley Rein & Fielding LLP

Mailing Address 1776 K Street, NW

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2008

Transaction ID: 80408.C10489

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)
Rand Allen

Mailing Address Wiley, Rein LLP
1776 K St., NW

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation
Wiley, Rein LLP Partner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2008

Transaction ID: 80408.C10497

Amount of Each Receipt this Period
100.00

Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Partnership->Wiley Rein & Fielding LLP

C. Full Name (Last, First, Middle Initial)
Attison Barnes

Mailing Address Wiley, Rein LLP
1776 K St., NW

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation
Wiley, Rein LLP Partner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2008

Transaction ID: 80408.C10498

Amount of Each Receipt this Period
100.00

Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Partnership->Wiley Rein & Fielding LLP

SUBTOTAL of Receipts This Page (optional) ▶ **500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) John Barry		Date of Receipt MM / DD / YYYY 03 / 31 / 2008
	Mailing Address Wiley, Rein LLP 1776 K St., NW		Transaction ID: 80408.C10499
	City Washington	State DC	Zip Code 20006
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Wiley, Rein LLP	Occupation Partner	Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] Partnership->Wiley Rein & Fielding LLP
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00		

B.	Full Name (Last, First, Middle Initial) James Bayes		Date of Receipt MM / DD / YYYY 03 / 31 / 2008
	Mailing Address Wiley, Rein LLP 1776 K St., NW		Transaction ID: 80408.C10500
	City Washington	State DC	Zip Code 20006
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Wiley, Rein LLP	Occupation Partner	Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] Partnership->Wiley Rein & Fielding LLP
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00		

C.	Full Name (Last, First, Middle Initial) B. J. Willie		Date of Receipt MM / DD / YYYY 03 / 04 / 2008
	Mailing Address 4401 Kendel Way		Transaction ID: 80313.C10108
	City Suffolk	State VA	Zip Code 23435
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00		

SUBTOTAL of Receipts This Page (optional)	200.00
TOTAL This Period (last page this line number only)	60785.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Alion Science & Technology Corp PAC

Mailing Address 1750 Tysons Blvd Suite 1300

City State Zip Code
Mc Lean VA 22102

FEC ID number of contributing federal political committee. **C** C00431247

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 1 4 / 2 0 0 8

Transaction ID: 80313.C10303

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
Alion Science & Technology Corp PAC

Mailing Address 1750 Tysons Blvd Suite 1300

City State Zip Code
Mc Lean VA 22102

FEC ID number of contributing federal political committee. **C** C00431247

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 1 / 2 0 0 8

Transaction ID: 80408.C10445

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)
American Bankers Association PAC

Mailing Address 1120 Connecticut Ave NW

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

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

Transaction ID: 80118.C10038

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) ▶ **5300.00**

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

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

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

FOR LINE NUMBER: PAGE 42 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
AT&T Inc Federal PAC
Mailing Address 175 E. Houston, Rm. 7-A-50
City San Antonio State TX Zip Code 78205
FEC ID number of contributing federal political committee. **C** C00109017
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt: 03 / 04 / 2008
Transaction ID: 80313.C10094
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)
AT&T Inc Federal PAC
Mailing Address 175 E. Houston, Rm. 7-A-50
City San Antonio State TX Zip Code 78205
FEC ID number of contributing federal political committee. **C** C00109017
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 6000.00
Date of Receipt: 03 / 04 / 2008
Transaction ID: 80313.C10098
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)
Branch Bank & Trust PAC
Mailing Address 150 S. Stratford Rd., Ste. 401
City Winston Salem State NC Zip Code 27104
FEC ID number of contributing federal political committee. **C** C00075291
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt: 03 / 17 / 2008
Transaction ID: 80317.C10404
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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Clear Channel Communications Inc. PAC

Mailing Address 200 E. Basse Road

City San Antonio State TX Zip Code 78209-8328

FEC ID number of contributing federal political committee. **C** C00279216

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 03 / 27 / 2008
Transaction ID: 80408.C10470
 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)
Committee for Advancement of SE Cotton

Mailing Address 139 Prominence Ct Suite 110

City Dawsonville State GA Zip Code 30534

FEC ID number of contributing federal political committee. **C** C00300426

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 03 / 17 / 2008
Transaction ID: 80317.C10407
 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)
CTIA-The Wireless Association PAC

Mailing Address 1400 16th Street, NW Suite 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00262295

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 01 / 25 / 2008
Transaction ID: 80131.C10047
 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) ► 2000.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

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

Mailing Address 1155 15th Street, NW, Suite 1000

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 3 1 / 2 0 0 8

Transaction ID: 80408.C10484

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

Mailing Address 8400 Westpark Drive

City State Zip Code
Mc Lean VA 22102

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

Name of Employer Occupation
National Auto Dealers Assn PAC auto dealers

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 3 1 / 2 0 0 8

Transaction ID: 80408.C10475

Amount of Each Receipt this Period
5000.00

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 20004-0365

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

Name of Employer Occupation
Deloitte & Touche PAC

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 1 / 2 0 0 8

Transaction ID: 80408.C10441

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) ► **8000.00**

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

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

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

FOR LINE NUMBER: PAGE 45 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

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

Mailing Address One James River Plaza, 20th Fl.
Box 26666

City Richmond State VA Zip Code 23261

FEC ID number of contributing federal political committee. **C** C00108209

Name of Employer Dominion PAC Occupation Political Action Committee

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 03 / 21 / 2008
Transaction ID: 80408.C10442
 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)
DRS Technologies Inc. Good Govt Fund

Mailing Address 5 Sylvan Way, Ste 500

City Parsippany State NJ Zip Code 07054

FEC ID number of contributing federal political committee. **C** C00275123

Name of Employer DRS Technologies Inc. PAC Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 03 / 17 / 2008
Transaction ID: 80317.C10390
 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)
DRS Technologies Inc. Good Govt Fund

Mailing Address 5 Sylvan Way, Ste 500

City Parsippany State NJ Zip Code 07054

FEC ID number of contributing federal political committee. **C** C00275123

Name of Employer DRS Technologies Inc. PAC Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3200.00

Date of Receipt 03 / 27 / 2008
Transaction ID: 80408.C10467
 Amount of Each Receipt this Period 1200.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **3200.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 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)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Federal Managers Association PAC

Mailing Address 1641 Prince Street

City State Zip Code
Alexandria VA 22314-2818

FEC ID number of contributing federal political committee. **C** C00164848

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2008

Transaction ID: 80317.C10395

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)
Fluor Corporation PAC

Mailing Address 403 East Capitol Street, SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00034132

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 02 / 2008

Transaction ID: 80118.C10039

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)
Fluor Corporation PAC

Mailing Address 403 East Capitol Street, SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00034132

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2008

Transaction ID: 80408.C10487

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional) ▶

3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 108

(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

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

Mailing Address 2941 Fairview Park Dr., Ste 100

City State Zip Code
Falls Church VA 22042-4523

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

Name of Employer
General Dynamics Voluntary PAC

Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3200.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 21 / 2008

Transaction ID: 80408.C10443

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)
Hercules Inc. Voluntary PAC

Mailing Address 1313 N. Market Street

City State Zip Code
Wilmington DE 19894

FEC ID number of contributing federal political committee. **C** C00402313

Name of Employer
Hercules Political Contri- b. Co

Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2008

Transaction ID: 80317.C10396

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)
Honeywell International PAC

Mailing Address Mr. Art Simonetti
101 Constitution Ave NW Ste 500 W

City State Zip Code
Washington DC 20001

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

Name of Employer

Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2008

Transaction ID: 80317.C10389

Amount of Each Receipt this Period

2000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional) ▶

4000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) International Paper PAC		Date of Receipt MM / DD / YYYY 03 / 21 / 2008
	Mailing Address 1101 Pennsylvania Ave NW #200		Transaction ID: 80408.C10444
	City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C C00034405	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer International Paper PAC		Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) KPMG PAC		Date of Receipt MM / DD / YYYY 03 / 31 / 2008
	Mailing Address PO Box 18254		Transaction ID: 80408.C10480
	City Washington State DC Zip Code 20036-9998	Amount of Each Receipt this Period 1500.00	
	FEC ID number of contributing federal political committee. C C00280222	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer KPMG PAC		Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1500.00	

C.	Full Name (Last, First, Middle Initial) Lockheed Martin Employees PAC		Date of Receipt MM / DD / YYYY 01 / 02 / 2008
	Mailing Address 1550 Crystal Drive Crystal Square Two, Ste. 300		Transaction ID: 80118.C10041
	City Arlington State VA Zip Code 22202	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C C00303024	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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 3000.00	

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 108
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

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

Mailing Address 1550 Crystal Drive
Crystal Square Two, Ste. 300

City Arlington State VA Zip Code 22202

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt 03 / 31 / 2008
Transaction ID: 80408.C10488
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)
Microsoft Corporation PAC

Mailing Address PO Box 97017

City Redmond State WA Zip Code 98073-9717

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Microsoft Corporation PAC Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 01 / 25 / 2008
Transaction ID: 80131.C10049
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)
Natl Thoroughbred Racing Association

Mailing Address 2525 Harrodsburg Rd

City Lexington State KY Zip Code 40504

FEC ID number of contributing federal political committee. **C** C00360008

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 03 / 17 / 2008
Transaction ID: 80317.C10391
Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 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)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
National Rifle Assn of America PAC

Mailing Address 11250 Waples Mill Road

City State Zip Code
Fairfax VA 22030-7400

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation
NRA Political Victory Fund

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2008

Transaction ID: 80408.C10486

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)
Physician Hospitals of America

Mailing Address 2600 S. Minnesota, Ste. 202

City State Zip Code
Sioux Falls SD 57105

FEC ID number of contributing federal political committee. **C** C00394163

Name of Employer Occupation

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2008

Transaction ID: 80317.C10397

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)
PricewaterhouseCoopers PAC

Mailing Address 1301 K Street NW Ste 800 West

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation
PricewaterhouseCoopers PAC

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2008

Transaction ID: 80408.C10479

Amount of Each Receipt this Period

1500.00

Receipt

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

SUBTOTAL of Receipts This Page (optional) ▶

3500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 108
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
SAIC VOLUNTARY PAC

Mailing Address 10260 Campus Point Dr MS-F2

City State Zip Code
San Diego CA 92121-1522

FEC ID number of contributing federal political committee. **C** C00300418

Name of Employer Science Applications Intl PAC
Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2008

Transaction ID: 80408.C10468

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)
Swedish Match PAC

Mailing Address 7300 Beaufont Springs Dr Ste 400

City State Zip Code
Richmond VA 23225

FEC ID number of contributing federal political committee. **C** C00215053

Name of Employer Swedish Match North America, I
Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2078.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 05 / 2008

Transaction ID: 80313.C10065

Amount of Each Receipt this Period
400.00

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

C. Full Name (Last, First, Middle Initial)
Swedish Match PAC

Mailing Address 7300 Beaufont Springs Dr Ste 400

City State Zip Code
Richmond VA 23225

FEC ID number of contributing federal political committee. **C** C00215053

Name of Employer Swedish Match North America, I
Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2678.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 05 / 2008

Transaction ID: 80313.C10066

Amount of Each Receipt this Period
600.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 108
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
US Oncology Good Govt Committee

Mailing Address 16825 Northchase Drive Suite 1300

City State Zip Code
Houston TX 77060

FEC ID number of contributing federal political committee. **C** C00339655

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 80131.C10048

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)
Verisign Inc. PAC

Mailing Address 1666 K St NW Ste 410

City State Zip Code
Washington DC 20006-1227

FEC ID number of contributing federal political committee. **C** C00359240

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 80131.C10050

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)
Verizon Communications Inc Good Govt

Mailing Address 1717 Arch St 47-S

City State Zip Code
Philadelphia PA 19103

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation
Verizon Communications PAC

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3550.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 3 1 / 2 0 0 8

Transaction ID: 80408.C10481

Amount of Each Receipt this Period
1250.00

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

SUBTOTAL of Receipts This Page (optional) ► **3250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 108
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Williams And Jensen PC PAC

Mailing Address 1155 21st St. NW STE 300

City State Zip Code
Washington DC 20036-3312

FEC ID number of contributing federal political committee. **C** C00039206

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

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

Transaction ID: 80313.C10064

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	45750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 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 type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Branch Banking & Trust

Mailing Address 238 South Battlefield Blvd

City State Zip Code
Chesapeake VA 23322-

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
11636.83

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: 80313.C10073

Amount of Each Receipt this Period

623.55

Other Receipt

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

B.

Full Name (Last, First, Middle Initial)
Branch Banking & Trust

Mailing Address 238 South Battlefield Blvd

City State Zip Code
Chesapeake VA 23322-

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
12090.56

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: 80313.C10302

Amount of Each Receipt this Period

453.73

Other Receipt

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

C.

Full Name (Last, First, Middle Initial)
Branch Banking & Trust

Mailing Address 238 South Battlefield Blvd

City State Zip Code
Chesapeake VA 23322-

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
12495.76

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: 80408.C10502

Amount of Each Receipt this Period

405.20

Other Receipt

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

SUBTOTAL of Receipts This Page (optional) ▶

1482.48

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

1482.48

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)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Mrs. Ann R. Wiggins

Transaction ID: 80118.E1958
Date of Disbursement

Mailing Address 520 Wickwood Drive

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

City Chesapeake State VA Zip Code 23322-

Amount of Each Disbursement this Period

274.05

Purpose of Disbursement
payroll

--

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

Candidate Name

--

PAYROLL

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Mrs. Ann R. Wiggins

Transaction ID: 80131.E1992
Date of Disbursement

Mailing Address 520 Wickwood Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	0	8

City Chesapeake State VA Zip Code 23322-

Amount of Each Disbursement this Period

274.05

Purpose of Disbursement
payroll

--

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

Candidate Name

--

PAYROLL

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Mrs. Ann R. Wiggins

Transaction ID: 80313.E1994
Date of Disbursement

Mailing Address 520 Wickwood Drive

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

City Chesapeake State VA Zip Code 23322-

Amount of Each Disbursement this Period

274.05

Purpose of Disbursement
payroll

--

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

Candidate Name

--

PAYROLL

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

822.15

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Mrs. Ann R. Wiggins

Mailing Address 520 Wickwood Drive

City Chesapeake State VA Zip Code 23322-

Purpose of Disbursement
SEE BELOW

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80313.E2012
Date of Disbursement

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

Amount of Each Disbursement this Period

147.88

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

SEE BELOW

B.

Full Name (Last, First, Middle Initial)
FedEx Kinkos

Mailing Address 801 Volvo Parkway Ste 20

City Chesapeake State VA Zip Code 23320-

Purpose of Disbursement
shipping charges

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80313.E2019
Date of Disbursement

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

Amount of Each Disbursement this Period

23.42

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

[MEMO ITEM]

MEMO: SHIPPING CHARGES

C.

Full Name (Last, First, Middle Initial)
Food Lion

Mailing Address 2048 Campostella Road

City Chesapeake State VA Zip Code 23324-

Purpose of Disbursement
event supplies

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80313.E2018
Date of Disbursement

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

Amount of Each Disbursement this Period

10.40

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

[MEMO ITEM]

MEMO: EVENT SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶

147.88

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Food Lion</p> <p>Mailing Address 2048 Campostella Road</p> <p>City Chesapeake State VA Zip Code 23324-</p> <p>Purpose of Disbursement food & beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80313.E2014</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12.36"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: FOOD & BEVERAGE</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) U.S. Postal Service</p> <p>Mailing Address 1000 Starling Drive</p> <p>City Richmond State VA Zip Code 23229-</p> <p>Purpose of Disbursement postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80313.E2020</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="41.40"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: POSTAGE</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) U.S. Postal Service</p> <p>Mailing Address 1000 Starling Drive</p> <p>City Richmond State VA Zip Code 23229-</p> <p>Purpose of Disbursement postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80313.E2013</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: POSTAGE</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Mrs. Ann R. Wiggins	Transaction ID: 80313.E2038 Date of Disbursement 02 / 27 / 2008
	Mailing Address 520 Wickwood Drive	Amount of Each Disbursement this Period 274.05
	City Chesapeake State VA Zip Code 23322-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement payroll 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) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Mrs. Ann R. Wiggins	Transaction ID: 80313.E2075 Date of Disbursement 03 / 13 / 2008
	Mailing Address 520 Wickwood Drive	Amount of Each Disbursement this Period 274.05
	City Chesapeake State VA Zip Code 23322-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement payroll 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) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Mrs. Ann R. Wiggins	Transaction ID: 80408.E2130 Date of Disbursement 03 / 28 / 2008
	Mailing Address 520 Wickwood Drive	Amount of Each Disbursement this Period 274.05
	City Chesapeake State VA Zip Code 23322-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement payroll 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) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional)	▶	822.15
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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Applebees <hr/> Mailing Address 1520 Sams Circle <hr/> City Chesapeake State VA Zip Code 23320- <hr/> Purpose of Disbursement food & beverage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80131.E1973 Date of Disbursement 01 / 17 / 2008 <hr/> Amount of Each Disbursement this Period 54.02 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FOOD & BEVERAGE
B.	Full Name (Last, First, Middle Initial) Applebees <hr/> Mailing Address 1520 Sams Circle <hr/> City Chesapeake State VA Zip Code 23320- <hr/> Purpose of Disbursement food & beverage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E2052 Date of Disbursement 02 / 19 / 2008 <hr/> Amount of Each Disbursement this Period 57.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FOOD & BEVERAGE
C.	Full Name (Last, First, Middle Initial) Applebees <hr/> Mailing Address 1520 Sams Circle <hr/> City Chesapeake State VA Zip Code 23320- <hr/> Purpose of Disbursement food & beverage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E2059 Date of Disbursement 02 / 27 / 2008 <hr/> Amount of Each Disbursement this Period 26.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FOOD & BEVERAGE

SUBTOTAL of Disbursements This Page (optional) ▶	138.53
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Aristotle International, Inc.	Transaction ID: 80122.E1966 Date of Disbursement 01 / 22 / 2008
	Mailing Address 205 Pennsylvania Ave., SE	Amount of Each Disbursement this Period 1800.00
	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 hosting fee	Category/Type
	Candidate Name	HOSTING FEE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Aristotle International, Inc.	Transaction ID: 80317.E2094 Date of Disbursement 03 / 20 / 2008
	Mailing Address 205 Pennsylvania Ave., SE	Amount of Each Disbursement this Period 42.70
	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 % on 2/27 & 3/13/08 deposits	Category/Type
	Candidate Name	% ON 2/27 & 3/13/08 DEPOSITS
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Aristotle International, Inc.	Transaction ID: 80317.E2095 Date of Disbursement 03 / 20 / 2008
	Mailing Address 205 Pennsylvania Ave., SE	Amount of Each Disbursement this Period 11.00
	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 service charge	Category/Type
	Candidate Name	SERVICE CHARGE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1853.70
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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Aristotle International, Inc.	Transaction ID: 80408.E2119 Date of Disbursement 03 / 27 / 2008
	Mailing Address 205 Pennsylvania Ave., SE	Amount of Each Disbursement this Period 35.00
	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 % on 3/19 deposit 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) ▼
		% ON 3/19 DEPOSIT

B.	Full Name (Last, First, Middle Initial) Aristotle International, Inc.	Transaction ID: 80408.E2120 Date of Disbursement 03 / 27 / 2008
	Mailing Address 205 Pennsylvania Ave., SE	Amount of Each Disbursement this Period 1.00
	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 service 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) ▼
		SERVICE CHARGE

C.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: 80118.E1909 Date of Disbursement 01 / 03 / 2008
	Mailing Address PO Box 9001309	Amount of Each Disbursement this Period 64.14
	City Louisville State KY Zip Code 40290-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement phone service Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PHONE SERVICE

SUBTOTAL of Disbursements This Page (optional)	▶	100.14
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)
Forbes for Congress

<p>A. Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 9001309</p> <p>City Louisville State KY Zip Code 40290-</p> <p>Purpose of Disbursement phone service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80131.E1987</p> <p>Date of Disbursement 01 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 57.05</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>PHONE SERVICE</p>
<p>B. Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 9001309</p> <p>City Louisville State KY Zip Code 40290-</p> <p>Purpose of Disbursement phone service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80313.E2031</p> <p>Date of Disbursement 02 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 77.92</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>PHONE SERVICE</p>
<p>C. Full Name (Last, First, Middle Initial) Au Bon Pain</p> <p>Mailing Address 431 Boylston St.</p> <p>City Boston State MA Zip Code 02116-</p> <p>Purpose of Disbursement food & beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80313.E2009</p> <p>Date of Disbursement 01 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 220.93</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>FOOD & BEVERAGE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

355.90

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Best Buy Online	Transaction ID: 80408.E2147 Date of Disbursement 03 / 27 / 2008
	Mailing Address 1340 Greenbriar Pky	Amount of Each Disbursement this Period 143.82
	City Chesapeake State VA Zip Code 23320-2898	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement office supplies Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		OFFICE SUPPLIES

B.	Full Name (Last, First, Middle Initial) Blooming-Dales Florist	Transaction ID: 80131.E1972 Date of Disbursement 01 / 18 / 2008
	Mailing Address 335 - D Centerville Turnpike	Amount of Each Disbursement this Period 105.95
	City Chesapeake State VA Zip Code 23322-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement flowers Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FLOWERS

C.	Full Name (Last, First, Middle Initial) Blooming-Dales Florist	Transaction ID: 80131.E1984 Date of Disbursement 01 / 22 / 2008
	Mailing Address 335 - D Centerville Turnpike	Amount of Each Disbursement this Period 115.45
	City Chesapeake State VA Zip Code 23322-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement flowers Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FLOWERS

SUBTOTAL of Disbursements This Page (optional)	365.22
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)
Forbes for Congress

<p>A. Full Name (Last, First, Middle Initial) Blooming-Dales Florist</p> <p>Mailing Address 335 - D Centerville Turnpike</p> <p>City Chesapeake State VA Zip Code 23322-</p> <p>Purpose of Disbursement flowers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80131.E1985 Date of Disbursement 01 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 140.65</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>FLOWERS</p>
<p>B. Full Name (Last, First, Middle Initial) Blooming-Dales Florist</p> <p>Mailing Address 335 - D Centerville Turnpike</p> <p>City Chesapeake State VA Zip Code 23322-</p> <p>Purpose of Disbursement flowers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80313.E2054 Date of Disbursement 02 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 83.90</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>FLOWERS</p>
<p>C. Full Name (Last, First, Middle Initial) Blooming-Dales Florist</p> <p>Mailing Address 335 - D Centerville Turnpike</p> <p>City Chesapeake State VA Zip Code 23322-</p> <p>Purpose of Disbursement flowers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80313.E2055 Date of Disbursement 02 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 276.10</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>FLOWERS</p>

SUBTOTAL of Disbursements This Page (optional) ▶

500.65

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)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Bravo

Mailing Address 193 Central Park Ave.

City Virginia Beach State VA Zip Code 23462-

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80313.E2051
Date of Disbursement

02 / 19 / 2008

Amount of Each Disbursement this Period

48.62

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

FOOD & BEVERAGE

B.

Full Name (Last, First, Middle Initial)
Bravo

Mailing Address 193 Central Park Ave.

City Virginia Beach State VA Zip Code 23462-

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80408.E2109
Date of Disbursement

03 / 05 / 2008

Amount of Each Disbursement this Period

100.92

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

FOOD & BEVERAGE

C.

Full Name (Last, First, Middle Initial)
California Pizza Kitchen

Mailing Address 1201 S Hayes St

City Arlington State VA Zip Code 22202-

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80408.E2101
Date of Disbursement

03 / 07 / 2008

Amount of Each Disbursement this Period

27.83

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

FOOD & BEVERAGE

SUBTOTAL of Disbursements This Page (optional) ▶

177.37

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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Capitol Hill Club <hr/> Mailing Address 300 First Street, SE <hr/> City Washington State DC Zip Code 20003- <hr/> Purpose of Disbursement food & beverage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80118.E1910 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 8	Amount of Each Disbursement this Period 52.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FOOD & BEVERAGE
B.	Full Name (Last, First, Middle Initial) Capitol Hill Club <hr/> Mailing Address 300 First Street, SE <hr/> City Washington State DC Zip Code 20003- <hr/> Purpose of Disbursement food & beverage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80131.E1988 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 8	Amount of Each Disbursement this Period 52.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FOOD & BEVERAGE
C.	Full Name (Last, First, Middle Initial) Catherine R. Dean <hr/> Mailing Address 809 Contrell Court <hr/> City Chesapeake State VA Zip Code 23320- <hr/> Purpose of Disbursement payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E1995 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 8	Amount of Each Disbursement this Period 632.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL

SUBTOTAL of Disbursements This Page (optional)	737.22
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)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Catherine R. Dean

Transaction ID: 80313.E2039
Date of Disbursement

Mailing Address 809 Contrell Court

/ /

City Chesapeake State VA Zip Code 23320-

Amount of Each Disbursement this Period

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

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

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

PAYROLL

State: District:

B.

Full Name (Last, First, Middle Initial)
Catherine R. Dean

Transaction ID: 80313.E2076
Date of Disbursement

Mailing Address 809 Contrell Court

/ /

City Chesapeake State VA Zip Code 23320-

Amount of Each Disbursement this Period

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

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

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

PAYROLL

State: District:

C.

Full Name (Last, First, Middle Initial)
Catherine R. Dean

Transaction ID: 80408.E2131
Date of Disbursement

Mailing Address 809 Contrell Court

/ /

City Chesapeake State VA Zip Code 23320-

Amount of Each Disbursement this Period

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

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

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

PAYROLL

State: District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Mrs. Christiane Grubbs Mailing Address 3911 Maury Place City Alexandria State VA Zip Code 22309- Purpose of Disbursement campaign consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80118.E1920 Date of Disbursement 01 / 07 / 2008 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN CONSULTING
B.	Full Name (Last, First, Middle Initial) Mrs. Christiane Grubbs Mailing Address 3911 Maury Place City Alexandria State VA Zip Code 22309- Purpose of Disbursement campaign consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80131.E1990 Date of Disbursement 01 / 30 / 2008 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN CONSULTING
C.	Full Name (Last, First, Middle Initial) Mrs. Christiane Grubbs Mailing Address 3911 Maury Place City Alexandria State VA Zip Code 22309- Purpose of Disbursement campaign consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E2033 Date of Disbursement 02 / 27 / 2008 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN CONSULTING

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)

<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)
Forbes for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Christiane Grubbs

Mailing Address 3911 Maury Place

City Alexandria State VA Zip Code 22309-

Purpose of Disbursement campaign consulting
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80408.E2124
Date of Disbursement 03 / 28 / 2008

Amount of Each Disbursement this Period 1000.00

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

CAMPAIGN CONSULTING

B. Full Name (Last, First, Middle Initial)
Congressional Institute

Mailing Address 401 Wythe St., Ste. 103

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement donor gifts
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80118.E1965
Date of Disbursement 01 / 03 / 2008

Amount of Each Disbursement this Period 1978.00

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

DONOR GIFTS

C. Full Name (Last, First, Middle Initial)
Congressional Institute

Mailing Address 401 Wythe St., Ste. 103

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement donor gifts returned for credit
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80313.E2005
Date of Disbursement 02 / 01 / 2008

Amount of Each Disbursement this Period -1978.00

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

DONOR GIFTS RETURNED FOR CREDIT

SUBTOTAL of Disbursements This Page (optional) ► 1000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Continental Visinet Broadband	Transaction ID: 80118.E1911 Date of Disbursement																			
	Mailing Address 4551 Cox Road, Suite 100	<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>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	3		2	0	0	8												
	City State Zip Code Glen Allen VA 23060-	Amount of Each Disbursement this Period <table border="1"><tr><td>40.00</td></tr></table>	40.00																		
40.00																					
	Purpose of Disbursement web hosting	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																			
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		WEB HOSTING																			

B.	Full Name (Last, First, Middle Initial) Continental Visinet Broadband	Transaction ID: 80122.E1967 Date of Disbursement																			
	Mailing Address 4551 Cox Road, Suite 100	<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>1</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	2		2	0	0	8												
	City State Zip Code Glen Allen VA 23060-	Amount of Each Disbursement this Period <table border="1"><tr><td>40.00</td></tr></table>	40.00																		
40.00																					
	Purpose of Disbursement web hosting	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																			
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		WEB HOSTING																			

C.	Full Name (Last, First, Middle Initial) Continental Visinet Broadband	Transaction ID: 80313.E2083 Date of Disbursement																			
	Mailing Address 4551 Cox Road, Suite 100	<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>2</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	9		2	0	0	8												
	City State Zip Code Glen Allen VA 23060-	Amount of Each Disbursement this Period <table border="1"><tr><td>40.00</td></tr></table>	40.00																		
40.00																					
	Purpose of Disbursement web hosting	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																			
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		WEB HOSTING																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>120.00</td></tr></table>	120.00
120.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER: (check only one)

<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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Continental Visinet Broadband Mailing Address 4551 Cox Road, Suite 100 City Glen Allen State VA Zip Code 23060- Purpose of Disbursement web hosting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80317.E2087 Date of Disbursement 03 / 20 / 2008 Amount of Each Disbursement this Period 40.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WEB HOSTING
B.	Full Name (Last, First, Middle Initial) Court House Cafe Mailing Address 350 Battlefield Blvd S City Chesapeake State VA Zip Code 23322-5312 Purpose of Disbursement food & beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80408.E2115 Date of Disbursement 03 / 26 / 2008 Amount of Each Disbursement this Period 34.71 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FOOD & BEVERAGE
C.	Full Name (Last, First, Middle Initial) Mrs. Courtney Wolfe Mailing Address 6428 Olde Bullocks Circle City Suffolk State VA Zip Code 23435- Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80118.E1959 Date of Disbursement 01 / 15 / 2008 Amount of Each Disbursement this Period 840.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶	915.21
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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Mrs. Courtney Wolfe	Transaction ID: 80118.E1952 Date of Disbursement 01 / 15 / 2008
	Mailing Address 6428 Olde Bullocks Circle	Amount of Each Disbursement this Period 35.15
	City Suffolk State VA Zip Code 23435-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement mileage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MILEAGE

B.	Full Name (Last, First, Middle Initial) Mrs. Courtney Wolfe	Transaction ID: 80118.E1953 Date of Disbursement 01 / 15 / 2008
	Mailing Address 6428 Olde Bullocks Circle	Amount of Each Disbursement this Period 78.76
	City Suffolk State VA Zip Code 23435-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement mileage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MILEAGE

C.	Full Name (Last, First, Middle Initial) Mrs. Courtney Wolfe	Transaction ID: 80131.E1993 Date of Disbursement 01 / 30 / 2008
	Mailing Address 6428 Olde Bullocks Circle	Amount of Each Disbursement this Period 840.50
	City Suffolk State VA Zip Code 23435-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement payroll 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) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional)	▶	954.41
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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Mrs. Courtney Wolfe	Transaction ID: 80313.E2024 Date of Disbursement MM / DD / YYYY 02 / 14 / 2008
	Mailing Address 6428 Olde Bullocks Circle	Amount of Each Disbursement this Period 78.32
	City Suffolk State VA Zip Code 23435-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement travel	Category/Type
	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) ▼
		TRAVEL

B.	Full Name (Last, First, Middle Initial) Mrs. Courtney Wolfe	Transaction ID: 80313.E1996 Date of Disbursement MM / DD / YYYY 02 / 14 / 2008
	Mailing Address 6428 Olde Bullocks Circle	Amount of Each Disbursement this Period 840.50
	City Suffolk State VA Zip Code 23435-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement payroll	Category/Type
	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) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Mrs. Courtney Wolfe	Transaction ID: 80313.E2040 Date of Disbursement MM / DD / YYYY 02 / 27 / 2008
	Mailing Address 6428 Olde Bullocks Circle	Amount of Each Disbursement this Period 840.50
	City Suffolk State VA Zip Code 23435-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement payroll	Category/Type
	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) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional)	▶	1759.32
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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Mrs. Courtney Wolfe	Transaction ID: 80313.E2077 Date of Disbursement 03 / 13 / 2008
	Mailing Address 6428 Olde Bullocks Circle	Amount of Each Disbursement this Period 840.50
	City Suffolk State VA Zip Code 23435-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement payroll 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) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Mrs. Courtney Wolfe	Transaction ID: 80408.E2121 Date of Disbursement 03 / 28 / 2008
	Mailing Address 6428 Olde Bullocks Circle	Amount of Each Disbursement this Period 40.00
	City Suffolk State VA Zip Code 23435-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement food & beverage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FOOD & BEVERAGE

C.	Full Name (Last, First, Middle Initial) Mrs. Courtney Wolfe	Transaction ID: 80408.E2122 Date of Disbursement 03 / 28 / 2008
	Mailing Address 6428 Olde Bullocks Circle	Amount of Each Disbursement this Period 214.04
	City Suffolk State VA Zip Code 23435-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement reimburse travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSE TRAVEL

SUBTOTAL of Disbursements This Page (optional)	▶	1094.54
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Mrs. Courtney Wolfe

Mailing Address 6428 Olde Bullocks Circle

City Suffolk State VA Zip Code 23435-

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80408.E2132
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	0	8

Amount of Each Disbursement this Period

840.50

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

PAYROLL

B.

Full Name (Last, First, Middle Initial)
Cox Communications

Mailing Address PO Box 183124

City Columbus State OH Zip Code 43218-3124

Purpose of Disbursement
cable & internet

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80118.E1954
Date of Disbursement

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

Amount of Each Disbursement this Period

250.79

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

CABLE & INTERNET

C.

Full Name (Last, First, Middle Initial)
Cox Communications

Mailing Address PO Box 183124

City Columbus State OH Zip Code 43218-3124

Purpose of Disbursement
cable & internet

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80313.E2025
Date of Disbursement

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

Amount of Each Disbursement this Period

250.79

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

CABLE & INTERNET

SUBTOTAL of Disbursements This Page (optional) ▶

1342.08

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Cox Communications Mailing Address PO Box 183124 City Columbus State OH Zip Code 43218-3124 Purpose of Disbursement cable & internet Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E2063 Date of Disbursement 03 / 13 / 2008 Amount of Each Disbursement this Period 250.78 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CABLE & INTERNET
B.	Full Name (Last, First, Middle Initial) Direct Mail Of Hampton Roads Inc. Mailing Address 3712 Profit Way, Ste. F City Chesapeake State VA Zip Code 23323- Purpose of Disbursement direct 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) ▼	Transaction ID: 80313.E2026 Date of Disbursement 02 / 14 / 2008 Amount of Each Disbursement this Period 470.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 DIRECT MAIL
C.	Full Name (Last, First, Middle Initial) Dominion Va Power Mailing Address PO Box 26543 City Richmond State VA Zip Code 23290-0001 Purpose of Disbursement utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80131.E1989 Date of Disbursement 01 / 30 / 2008 Amount of Each Disbursement this Period 171.27 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 UTILITIES

SUBTOTAL of Disbursements This Page (optional) ▶	892.11
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)
Forbes for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Dominion Va Power</p> <p>Mailing Address PO Box 26543</p> <p>City Richmond State VA Zip Code 23290-0001</p> <p>Purpose of Disbursement utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80313.E2032</p> <p>Date of Disbursement 02 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 201.16</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>UTILITIES</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Dominion Va Power</p> <p>Mailing Address PO Box 26543</p> <p>City Richmond State VA Zip Code 23290-0001</p> <p>Purpose of Disbursement utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80408.E2123</p> <p>Date of Disbursement 03 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 151.89</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>UTILITIES</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) FedEx Kinkos</p> <p>Mailing Address 801 Volvo Parkway Ste 20</p> <p>City Chesapeake State VA Zip Code 23320-</p> <p>Purpose of Disbursement shipping charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80131.E1978</p> <p>Date of Disbursement 01 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 4.46</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>SHIPPING CHARGES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

357.51

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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) FedEx Kinkos Mailing Address 801 Volvo Parkway Ste 20 City Chesapeake State VA Zip Code 23320- Purpose of Disbursement shipping 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) ▼	Transaction ID: 80313.E2046 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 8	Amount of Each Disbursement this Period 4.46 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SHIPPING CHARGES
B.	Full Name (Last, First, Middle Initial) FedEx Kinkos Mailing Address 801 Volvo Parkway Ste 20 City Chesapeake State VA Zip Code 23320- Purpose of Disbursement shipping 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) ▼	Transaction ID: 80408.E2112 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 8	Amount of Each Disbursement this Period 4.53 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SHIPPING CHARGES
C.	Full Name (Last, First, Middle Initial) Food Lion Mailing Address 2048 Campostella Road City Chesapeake State VA Zip Code 23324- Purpose of Disbursement food for event Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E2011 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 8	Amount of Each Disbursement this Period 14.21 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FOOD FOR EVENT

SUBTOTAL of Disbursements This Page (optional) ▶

23.20

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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Food Lion	Transaction ID: 80408.E2096 Date of Disbursement 03 / 10 / 2008
	Mailing Address 2048 Campostella Road	Amount of Each Disbursement this Period 82.14
	City Chesapeake State VA Zip Code 23324-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement supplies for event 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) ▼
		SUPPLIES FOR EVENT

B.	Full Name (Last, First, Middle Initial) J. Randy Forbes	Transaction ID: 80131.E1991 Date of Disbursement 01 / 30 / 2008
	Mailing Address 408 Parker Road	Amount of Each Disbursement this Period 1475.00
	City Chesapeake State VA Zip Code 23322-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement rent 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) ▼
		RENT

C.	Full Name (Last, First, Middle Initial) J. Randy Forbes	Transaction ID: 80313.E2034 Date of Disbursement 02 / 27 / 2008
	Mailing Address 408 Parker Road	Amount of Each Disbursement this Period 1475.00
	City Chesapeake State VA Zip Code 23322-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement rent 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) ▼
		RENT

SUBTOTAL of Disbursements This Page (optional)	3032.14
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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) J. Randy Forbes	Transaction ID: 80408.E2125 Date of Disbursement 03 / 28 / 2008
	Mailing Address 408 Parker Road	Amount of Each Disbursement this Period 1475.00
	City Chesapeake State VA Zip Code 23322-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement rent	Category/Type
	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) ▼
		RENT

B.	Full Name (Last, First, Middle Initial) H2O To Go, Inc.	Transaction ID: 80313.E2064 Date of Disbursement 03 / 13 / 2008
	Mailing Address 800 S. Battlefield Blvd.	Amount of Each Disbursement this Period 19.68
	City Chesapeake State VA Zip Code 23322-6670	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement drinking water & cooler rental	Category/Type
	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) ▼
		DRINKING WATER & COOLER RENTAL

C.	Full Name (Last, First, Middle Initial) Hilton Garden Inn	Transaction ID: 80313.E2056 Date of Disbursement 02 / 19 / 2008
	Mailing Address 800 Southpark Blvd	Amount of Each Disbursement this Period 250.00
	City Colonial Heights State VA Zip Code 23834-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement event catering	Category/Type
	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) ▼
		EVENT CATERING

SUBTOTAL of Disbursements This Page (optional)	▶	1744.68
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Hilton Garden Inn Mailing Address 800 Southpark Blvd City Colonial Heights State VA Zip Code 23834- Purpose of Disbursement event catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E2045 Date of Disbursement 02 / 25 / 2008 Amount of Each Disbursement this Period 1357.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EVENT CATERING
B.	Full Name (Last, First, Middle Initial) Joyce F. Hartman Mailing Address 4400 Ballahack Road City Chesapeake State VA Zip Code 23322- Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E1997 Date of Disbursement 02 / 14 / 2008 Amount of Each Disbursement this Period 674.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL
C.	Full Name (Last, First, Middle Initial) Joyce F. Hartman Mailing Address 4400 Ballahack Road City Chesapeake State VA Zip Code 23322- Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E2041 Date of Disbursement 02 / 27 / 2008 Amount of Each Disbursement this Period 674.63 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶	2706.31
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)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Joyce F. Hartman

Transaction ID: 80313.E2078
Date of Disbursement

Mailing Address 4400 Ballahack Road

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	8

City Chesapeake State VA Zip Code 23322-

Amount of Each Disbursement this Period

674.62

Purpose of Disbursement
payroll

Category/Type

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

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

PAYROLL

State: District:

B.

Full Name (Last, First, Middle Initial)
Joyce F. Hartman

Transaction ID: 80313.E2065
Date of Disbursement

Mailing Address 4400 Ballahack Road

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	8

City Chesapeake State VA Zip Code 23322-

Amount of Each Disbursement this Period

55.21

Purpose of Disbursement
reimburse office supplies

Category/Type

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

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

REIMBURSE OFFICE SUPPLIES

State: District:

C.

Full Name (Last, First, Middle Initial)
Joyce F. Hartman

Transaction ID: 80313.E2066
Date of Disbursement

Mailing Address 4400 Ballahack Road

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	8

City Chesapeake State VA Zip Code 23322-

Amount of Each Disbursement this Period

25.81

Purpose of Disbursement
reimburse travel

Category/Type

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

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

REIMBURSE TRAVEL

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

755.64

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Joyce F. Hartman	Transaction ID: 80408.E2133 Date of Disbursement 03 / 28 / 2008
	Mailing Address 4400 Ballahack Road	Amount of Each Disbursement this Period 674.63
	City Chesapeake State VA Zip Code 23322-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement payroll 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) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Max Press	Transaction ID: 80408.E2126 Date of Disbursement 03 / 28 / 2008
	Mailing Address 920 Battlefield Blvd, Suite 100	Amount of Each Disbursement this Period 102.90
	City Chesapeake State VA Zip Code 23322-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement office supplies Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		OFFICE SUPPLIES

C.	Full Name (Last, First, Middle Initial) Molly Maid	Transaction ID: 80118.E1955 Date of Disbursement 01 / 15 / 2008
	Mailing Address 811 Juniper Crescent #2	Amount of Each Disbursement this Period 150.00
	City Chesapeake State VA Zip Code 23320-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement office cleaning 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) ▼
		OFFICE CLEANING

SUBTOTAL of Disbursements This Page (optional)	▶	927.53
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Molly Maid	Transaction ID: 80317.E2088 Date of Disbursement 03 / 20 / 2008
	Mailing Address 811 Juniper Crescent #2	Amount of Each Disbursement this Period 85.00
	City Chesapeake State VA Zip Code 23320-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement office cleaning	OFFICE CLEANING
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Morgan, Meredith & Associates	Transaction ID: 80118.E1912 Date of Disbursement 01 / 03 / 2008
	Mailing Address 2875 Towerview Road Suite 1000	Amount of Each Disbursement this Period 4050.00
	City Herndon State VA Zip Code 20171-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement fundraising consulting	FUNDRAISING CONSULTING
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Morgan, Meredith & Associates	Transaction ID: 80118.E1913 Date of Disbursement 01 / 03 / 2008
	Mailing Address 2875 Towerview Road Suite 1000	Amount of Each Disbursement this Period 2.05
	City Herndon State VA Zip Code 20171-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement postage	POSTAGE
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4137.05
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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Morgan, Meredith & Associates	Transaction ID: 80118.E1914 Date of Disbursement 01 / 03 / 2008
	Mailing Address 2875 Towerview Road Suite 1000	Amount of Each Disbursement this Period 801.31
	City Herndon State VA Zip Code 20171-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Holiday cards	Category/Type
	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) ▼
		HOLIDAY CARDS

B.	Full Name (Last, First, Middle Initial) Morgan, Meredith & Associates	Transaction ID: 80313.E2027 Date of Disbursement 02 / 14 / 2008
	Mailing Address 2875 Towerview Road Suite 1000	Amount of Each Disbursement this Period 4050.00
	City Herndon State VA Zip Code 20171-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement fundraising consulting	Category/Type
	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) ▼
		FUNDRAISING CONSULTING

C.	Full Name (Last, First, Middle Initial) Morgan, Meredith & Associates	Transaction ID: 80313.E2028 Date of Disbursement 02 / 14 / 2008
	Mailing Address 2875 Towerview Road Suite 1000	Amount of Each Disbursement this Period 159.58
	City Herndon State VA Zip Code 20171-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement event expenses	Category/Type
	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) ▼
		EVENT EXPENSES

SUBTOTAL of Disbursements This Page (optional)	5010.89
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Morgan, Meredith & Associates	Transaction ID: 80313.E2029 Date of Disbursement 02 / 14 / 2008
	Mailing Address 2875 Towerview Road Suite 1000	Amount of Each Disbursement this Period 18.04
	City Herndon State VA Zip Code 20171-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement postage	Category/Type
	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) ▼
		POSTAGE

B.	Full Name (Last, First, Middle Initial) Morgan, Meredith & Associates	Transaction ID: 80313.E2035 Date of Disbursement 02 / 27 / 2008
	Mailing Address 2875 Towerview Road Suite 1000	Amount of Each Disbursement this Period 3086.86
	City Herndon State VA Zip Code 20171-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement direct mail expenses	Category/Type
	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) ▼
		DIRECT MAIL EXPENSES

C.	Full Name (Last, First, Middle Initial) Morgan, Meredith & Associates	Transaction ID: 80313.E2067 Date of Disbursement 03 / 13 / 2008
	Mailing Address 2875 Towerview Road Suite 1000	Amount of Each Disbursement this Period 4050.00
	City Herndon State VA Zip Code 20171-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement fundraising consulting	Category/Type
	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) ▼
		FUNDRAISING CONSULTING

SUBTOTAL of Disbursements This Page (optional)	7154.90
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Morgan, Meredith & Associates	Transaction ID: 80313.E2068 Date of Disbursement 03 / 13 / 2008
	Mailing Address 2875 Towerview Road Suite 1000	Amount of Each Disbursement this Period 11.07
	City Herndon State VA Zip Code 20171-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement postage	Category/Type
	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) ▼
		POSTAGE

B.	Full Name (Last, First, Middle Initial) Morgan, Meredith & Associates	Transaction ID: 80313.E2069 Date of Disbursement 03 / 13 / 2008
	Mailing Address 2875 Towerview Road Suite 1000	Amount of Each Disbursement this Period 97.05
	City Herndon State VA Zip Code 20171-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement event - faxes	Category/Type
	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) ▼
		EVENT - FAXES

C.	Full Name (Last, First, Middle Initial) Morgan, Meredith & Associates	Transaction ID: 80408.E2127 Date of Disbursement 03 / 28 / 2008
	Mailing Address 2875 Towerview Road Suite 1000	Amount of Each Disbursement this Period 2055.40
	City Herndon State VA Zip Code 20171-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement event expense - mailing	Category/Type
	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) ▼
		EVENT EXPENSE - MAILING

SUBTOTAL of Disbursements This Page (optional)	2163.52
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Nansemond-Suffolk Branch NAACP <hr/> Mailing Address PO Box 1547 <hr/> City Suffolk State VA Zip Code 23439- <hr/> Purpose of Disbursement advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80122.E1971 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 380.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ADVERTISING
B.	Full Name (Last, First, Middle Initial) Network Solutions <hr/> Mailing Address 13861 Sunrise Valley Dr., Ste. 300 <hr/> City Herndon State VA Zip Code 20171- <hr/> Purpose of Disbursement web domain Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E2084 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 134.91 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WEB DOMAIN
C.	Full Name (Last, First, Middle Initial) Network Solutions <hr/> Mailing Address 13861 Sunrise Valley Dr., Ste. 300 <hr/> City Herndon State VA Zip Code 20171- <hr/> Purpose of Disbursement web forwarding Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80317.E2089 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 108.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WEB FORWARDING

SUBTOTAL of Disbursements This Page (optional) ▶	622.91
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)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Occasions Catering

Mailing Address 910 Pennsylvania Ave., SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement event catering
Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80131.E1977
Date of Disbursement

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

Amount of Each Disbursement this Period

952.76

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

EVENT CATERING

B.

Full Name (Last, First, Middle Initial)
Office Max

Mailing Address 1332 Greenbriar Pkwy

City Chesapeake State VA Zip Code 23320-

Purpose of Disbursement office supplies
Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80118.E1964
Date of Disbursement

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

Amount of Each Disbursement this Period

84.23

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

OFFICE SUPPLIES

C.

Full Name (Last, First, Middle Initial)
Office Max

Mailing Address 1332 Greenbriar Pkwy

City Chesapeake State VA Zip Code 23320-

Purpose of Disbursement office supplies
Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80118.E1962
Date of Disbursement

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

Amount of Each Disbursement this Period

91.81

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

OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

1128.80

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Office Max

Mailing Address 1332 Greenbriar Pkwy

City Chesapeake State VA Zip Code 23320-

Purpose of Disbursement
event supplies

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80313.E1999
Date of Disbursement

02 / 06 / 2008

Amount of Each Disbursement this Period

53.40

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

EVENT SUPPLIES

B.

Full Name (Last, First, Middle Initial)
Office Max

Mailing Address 1332 Greenbriar Pkwy

City Chesapeake State VA Zip Code 23320-

Purpose of Disbursement
event supplies

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80313.E1998
Date of Disbursement

02 / 08 / 2008

Amount of Each Disbursement this Period

75.17

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

EVENT SUPPLIES

C.

Full Name (Last, First, Middle Initial)
Office Max

Mailing Address 1332 Greenbriar Pkwy

City Chesapeake State VA Zip Code 23320-

Purpose of Disbursement
event supplies

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80313.E2048
Date of Disbursement

02 / 21 / 2008

Amount of Each Disbursement this Period

128.45

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

EVENT SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶

257.02

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Office Max	Transaction ID: 80408.E2102 Date of Disbursement 03 / 07 / 2008
	Mailing Address 1332 Greenbriar Pkwy	Amount of Each Disbursement this Period 30.18
	City Chesapeake State VA Zip Code 23320-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement office supplies Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		OFFICE SUPPLIES

B.	Full Name (Last, First, Middle Initial) Office Max	Transaction ID: 80408.E2111 Date of Disbursement 03 / 17 / 2008
	Mailing Address 1332 Greenbriar Pkwy	Amount of Each Disbursement this Period 41.99
	City Chesapeake State VA Zip Code 23320-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement office supplies Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		OFFICE SUPPLIES

C.	Full Name (Last, First, Middle Initial) Office Max	Transaction ID: 80408.E2150 Date of Disbursement 03 / 27 / 2008
	Mailing Address 1332 Greenbriar Pkwy	Amount of Each Disbursement this Period 165.06
	City Chesapeake State VA Zip Code 23320-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement office supplies Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)	▶	237.23
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Oriental Trading <hr/> Mailing Address 11201 Giles Road <hr/> City La Vista State NE Zip Code 68128- <hr/> Purpose of Disbursement office supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80408.E2118 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 58.45 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 OFFICE SUPPLIES
B.	Full Name (Last, First, Middle Initial) Outback Steakhouse <hr/> Mailing Address 355 Albemarle Square <hr/> City Charlottesville State VA Zip Code 22901- <hr/> Purpose of Disbursement food & beverage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80131.E1976 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 109.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FOOD & BEVERAGE
C.	Full Name (Last, First, Middle Initial) Outback Steakhouse <hr/> Mailing Address 355 Albemarle Square <hr/> City Charlottesville State VA Zip Code 22901- <hr/> Purpose of Disbursement food & beverage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80408.E2098 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 38.79 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FOOD & BEVERAGE

SUBTOTAL of Disbursements This Page (optional) ▶

207.14

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)
Forbes for Congress

A. Full Name (Last, First, Middle Initial) Postal Prep <hr/> Mailing Address 1226 Executive Blvd #113 <hr/> City Chesapeake State VA Zip Code 23320- <hr/> Purpose of Disbursement postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E2053 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 8
	Amount of Each Disbursement this Period 81.60
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	POSTAGE

B. Full Name (Last, First, Middle Initial) Postal Prep <hr/> Mailing Address 1226 Executive Blvd #113 <hr/> City Chesapeake State VA Zip Code 23320- <hr/> Purpose of Disbursement fundraising literature Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E2036 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 8
	Amount of Each Disbursement this Period 64.53
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	FUNDRAISING LITURATURE

C. Full Name (Last, First, Middle Initial) Red Hot And Blue <hr/> Mailing Address 169 Hillwood Ave. <hr/> City Falls Church State VA Zip Code 22046- <hr/> Purpose of Disbursement catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80408.E2113 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 8
	Amount of Each Disbursement this Period 658.08
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	CATERING

SUBTOTAL of Disbursements This Page (optional) ▶	804.21
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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Ruby Tuesday <hr/> Mailing Address 1225 Cedar Road <hr/> City Chesapeake State VA Zip Code 23322-7103 <hr/> Purpose of Disbursement food & beverage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80408.E2116 Date of Disbursement 03 / 24 / 2008 <hr/> Amount of Each Disbursement this Period 68.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FOOD & BEVERAGE
B.	Full Name (Last, First, Middle Initial) Sams Club <hr/> Mailing Address 1501 Sams Circle <hr/> City Chesapeake State VA Zip Code 23320- <hr/> Purpose of Disbursement fundraising event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80408.E2104 Date of Disbursement 03 / 06 / 2008 <hr/> Amount of Each Disbursement this Period 15.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING EVENT
C.	Full Name (Last, First, Middle Initial) Shell <hr/> Mailing Address 1426 Holland Road <hr/> City Suffolk State VA Zip Code 23434-6317 <hr/> Purpose of Disbursement gasoline Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E2010 Date of Disbursement 01 / 30 / 2008 <hr/> Amount of Each Disbursement this Period 33.52 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 GASOLINE

SUBTOTAL of Disbursements This Page (optional)	117.28
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)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Shell

Mailing Address 1426 Holland Road

City Suffolk State VA Zip Code 23434-6317

Purpose of Disbursement
gasoline

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80313.E2060
Date of Disbursement

02 / 27 / 2008

Amount of Each Disbursement this Period

42.07

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

GASOLINE

B.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address PO Box 689020

City Des Moines State IA Zip Code 50368-9020

Purpose of Disbursement
office supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80118.E1956
Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

1070.49

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

OFFICE SUPPLIES

C.

Full Name (Last, First, Middle Initial)
Virginia State Board Of Elections

Mailing Address 200 N. 9th St., Ste. 101

City Richmond State VA Zip Code 23219-

Purpose of Disbursement
election candidate registration

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80313.E2073
Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

3386.00

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

ELECTION CANDIDATE REGISTRATION

SUBTOTAL of Disbursements This Page (optional) ▶

4498.56

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)
Forbes for Congress

<p>A. Full Name (Last, First, Middle Initial) Sylvester Management</p> <p>Mailing Address 7522 Irmo Dr., Ste. 1</p> <p>City Columbia State SC Zip Code 29212-</p> <p>Purpose of Disbursement fundraising event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80408.E2108</p> <p>Date of Disbursement 03 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 475.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>FUNDRAISING EVENT</p>
<p>B. Full Name (Last, First, Middle Initial) Texas Roadhouse</p> <p>Mailing Address 1546 Sams Circle</p> <p>City Chesapeake State VA Zip Code 23320-</p> <p>Purpose of Disbursement food & beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80313.E2008</p> <p>Date of Disbursement 01 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 23.28</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>FOOD & BEVERAGE</p>
<p>C. Full Name (Last, First, Middle Initial) The Bombay Co</p> <p>Mailing Address 300 Monticello Ave.</p> <p>City Norfolk State VA Zip Code 23510-</p> <p>Purpose of Disbursement office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80118.E1963</p> <p>Date of Disbursement 01 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 616.74</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>OFFICE SUPPLIES</p>

SUBTOTAL of Disbursements This Page (optional)	1115.02
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
The Goodson Company

Mailing Address 1915 Park Ave

City Saint Louis State MO Zip Code 63104-2536

Purpose of Disbursement
stickers & firemens hats for parad
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80118.E1957
Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

4165.48

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

STICKERS & FIREMENS HATS FOR PARAD

B.

Full Name (Last, First, Middle Initial)
The Olive Garden

Mailing Address 1631 Ring Road

City Chesapeake State VA Zip Code 23320-

Purpose of Disbursement
food & beverage
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80313.E2000
Date of Disbursement

02 / 06 / 2008

Amount of Each Disbursement this Period

70.46

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

FOOD & BEVERAGE

C.

Full Name (Last, First, Middle Initial)
The Olive Garden

Mailing Address 1631 Ring Road

City Chesapeake State VA Zip Code 23320-

Purpose of Disbursement
food & beverage
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80313.E2042
Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

19.58

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

FOOD & BEVERAGE

SUBTOTAL of Disbursements This Page (optional) ▶

4255.52

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
The Olive Garden

Mailing Address 1631 Ring Road

City Chesapeake State VA Zip Code 23320-

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80313.E2058
Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

19.73

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

FOOD & BEVERAGE

B.

Full Name (Last, First, Middle Initial)
The Olive Garden

Mailing Address 1631 Ring Road

City Chesapeake State VA Zip Code 23320-

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80408.E2114
Date of Disbursement

03 / 26 / 2008

Amount of Each Disbursement this Period

22.01

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

FOOD & BEVERAGE

C.

Full Name (Last, First, Middle Initial)
Tortilla Coast

Mailing Address 400 1st St., SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
event catering

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80131.E1979
Date of Disbursement

01 / 24 / 2008

Amount of Each Disbursement this Period

506.01

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

EVENT CATERING

SUBTOTAL of Disbursements This Page (optional) ▶

547.75

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Tortilla Coast Mailing Address 400 1st St., SE City Washington State DC Zip Code 20003- Purpose of Disbursement event catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E2062 Date of Disbursement 02 / 27 / 2008 Amount of Each Disbursement this Period 352.03 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EVENT CATERING
B.	Full Name (Last, First, Middle Initial) Tortilla Coast Mailing Address 400 1st St., SE City Washington State DC Zip Code 20003- Purpose of Disbursement food & beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80408.E2110 Date of Disbursement 03 / 04 / 2008 Amount of Each Disbursement this Period 97.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FOOD & BEVERAGE
C.	Full Name (Last, First, Middle Initial) U.S. Postal Service Mailing Address 1000 Starling Drive City Richmond State VA Zip Code 23229- Purpose of Disbursement postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80131.E1982 Date of Disbursement 01 / 22 / 2008 Amount of Each Disbursement this Period 42.31 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 POSTAGE

SUBTOTAL of Disbursements This Page (optional) ▶	491.96
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) U.S. Postal Service Mailing Address 1000 Starling Drive City Richmond State VA Zip Code 23229- Purpose of Disbursement postage for event Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E2002 Date of Disbursement 02 / 04 / 2008 Amount of Each Disbursement this Period 205.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 POSTAGE FOR EVENT
B.	Full Name (Last, First, Middle Initial) U.S. Postal Service Mailing Address 1000 Starling Drive City Richmond State VA Zip Code 23229- Purpose of Disbursement postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E2086 Date of Disbursement 02 / 13 / 2008 Amount of Each Disbursement this Period 287.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 POSTAGE
C.	Full Name (Last, First, Middle Initial) U.S. Postal Service Mailing Address 1000 Starling Drive City Richmond State VA Zip Code 23229- Purpose of Disbursement postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80313.E2050 Date of Disbursement 02 / 20 / 2008 Amount of Each Disbursement this Period 41.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 POSTAGE

SUBTOTAL of Disbursements This Page (optional) ▶

533.20

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)
Forbes for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) U.S. Postal Service</p> <p>Mailing Address 1000 Starling Drive</p> <p>City Richmond State VA Zip Code 23229-</p> <p>Purpose of Disbursement PO Box rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80313.E2071</p> <p>Date of Disbursement 03 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 168.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>PO BOX RENTAL</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) U.S. Postal Service</p> <p>Mailing Address 1000 Starling Drive</p> <p>City Richmond State VA Zip Code 23229-</p> <p>Purpose of Disbursement postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80408.E2144</p> <p>Date of Disbursement 03 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 88.76</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>POSTAGE</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) U.S. Treasury</p> <p>Mailing Address PO Box 660351</p> <p>City Dallas State TX Zip Code 75266-</p> <p>Purpose of Disbursement 941 taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80118.E1916</p> <p>Date of Disbursement 01 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 2000.16</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>941 TAXES</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>2256.92</p>
<p>TOTAL This Period (last page this line number only)</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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) U.S. Treasury Mailing Address PO Box 660351 City Dallas State TX Zip Code 75266- Purpose of Disbursement 940 taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80118.E1917 Date of Disbursement 01 / 07 / 2008 Amount of Each Disbursement this Period 12.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 940 TAXES
B.	Full Name (Last, First, Middle Initial) U.S. Treasury Mailing Address PO Box 660351 City Dallas State TX Zip Code 75266- Purpose of Disbursement taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80408.E2105 Date of Disbursement 03 / 06 / 2008 Amount of Each Disbursement this Period 1305.63 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TAXES
C.	Full Name (Last, First, Middle Initial) VA Department of Taxation Mailing Address P.O.Box 1777 City Richmond State VA Zip Code 23218- Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80118.E1919 Date of Disbursement 01 / 07 / 2008 Amount of Each Disbursement this Period 301.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional) ▶

1619.43

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 103 / 108

<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)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
VA Department of Taxation

Mailing Address P.O.Box 1777

City Richmond State VA Zip Code 23218-

Purpose of Disbursement
income taxes

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 80408.E2099

Date of Disbursement

03 / 07 / 2008

Amount of Each Disbursement this Period

553.00

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

INCOME TAXES

B.

Full Name (Last, First, Middle Initial)
Verizon

Mailing Address PO Box 17398

City Baltimore State MD Zip Code 21297-0429

Purpose of Disbursement
phone service

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 80118.E1915

Date of Disbursement

01 / 03 / 2008

Amount of Each Disbursement this Period

308.72

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

PHONE SERVICE

C.

Full Name (Last, First, Middle Initial)
Verizon

Mailing Address PO Box 17398

City Baltimore State MD Zip Code 21297-0429

Purpose of Disbursement
phone service

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 80122.E1969

Date of Disbursement

01 / 22 / 2008

Amount of Each Disbursement this Period

312.31

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

PHONE SERVICE

SUBTOTAL of Disbursements This Page (optional)

1174.03

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)
Forbes for Congress

A.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: 80313.E2085 Date of Disbursement 02 / 19 / 2008
	Mailing Address PO Box 17398	Amount of Each Disbursement this Period 307.94
	City Baltimore State MD Zip Code 21297-0429	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement phone service	Category/Type
	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) ▼
		PHONE SERVICE

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 80122.E1970 Date of Disbursement 01 / 22 / 2008
	Mailing Address PO Box 17464	Amount of Each Disbursement this Period 132.66
	City Baltimore State MD Zip Code 21297-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement cell phone service	Category/Type
	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) ▼
		CELL PHONE SERVICE

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 80313.E2037 Date of Disbursement 02 / 27 / 2008
	Mailing Address PO Box 17464	Amount of Each Disbursement this Period 132.66
	City Baltimore State MD Zip Code 21297-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement cell phone service	Category/Type
	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) ▼
		CELL PHONE SERVICE

SUBTOTAL of Disbursements This Page (optional)	573.26
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 105 / 108

<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)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Transaction ID: 80408.E2128

Date of Disbursement

Mailing Address PO Box 17464

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	0	8

City Baltimore State MD Zip Code 21297-

Amount of Each Disbursement this Period

137.46

Purpose of Disbursement
cell phone service

--

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: Primary General
 Other (specify) ▼

CELL PHONE SERVICE

State: District:

SUBTOTAL of Disbursements This Page (optional)

137.46

TOTAL This Period (last page this line number only)

67587.53

**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 106 / 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)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
NRCC

Transaction ID: 80313.E2057

Date of Disbursement

Mailing Address 320 First Street SE

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	0	8

City Washington State DC Zip Code 20003-1838

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
POLITICAL CONTRIBUTION 2008

--

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: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

**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 107 / 108

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

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NAME OF COMMITTEE (In Full)
Forbes for Congress

A.

Full Name (Last, First, Middle Initial)
Roland Smith

Mailing Address 1944 Lancing Crest Ln

City Chesapeake State VA Zip Code 23323-

Purpose of Disbursement
Refund of Contribution refund excess con

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80313.E2030
Date of Disbursement

02 / 27 / 2008

Amount of Each Disbursement this Period

2300.00

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

SUBTOTAL of Disbursements This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

2300.00

Image# 28991215849

Form/Schedule: **F3A**

This amendment required due to amendment of prior quarter.

Transaction ID:
