

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Committee to Re-Elect Ron Paul

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

To:

M	M
0	9

D	D
3	0

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)).....	28553.85	1472341.14
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	1152.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	28553.85	1471189.14
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	88537.54	1362888.50
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	7233.97
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	88537.54	1355654.53
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2841481.65	
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
Committee to Re-Elect Ron Paul

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

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).....

8533.02

647364.57

(ii) Unitemized.....

5520.83

792976.57

(iii) TOTAL of contributions

14053.85

1440341.14

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

14500.00

32000.00

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

28553.85

1472341.14

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

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

0.00

3500000.00

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.).....

0.00

7233.97

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

13258.38

18620.37

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

41812.23

4998195.48

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	88537.54	1362888.50
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	1152.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1152.00
21. OTHER DISBURSEMENTS.....	1063700.00	1101805.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	1152237.54	2465845.50

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3951906.96
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	41812.23
25. SUBTOTAL (add Line 23 and Line 24).....	3993719.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1152237.54
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2841481.65

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 / 92
	<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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Mr. Kethapa Siri	Date of Receipt MM / DD / YYYY 07 / 03 / 2008
	Mailing Address 16523 Purche Avenue	Transaction ID: 0629115
	City State Zip Code Torrance CA 90504	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Los Angeles Unified School District Teacher Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00

B.	Full Name (Last, First, Middle Initial) Mr. Harvey M. Browne, Jr.	Date of Receipt MM / DD / YYYY 07 / 05 / 2008
	Mailing Address 15426 Village Woods Dr	Transaction ID: 0629111
	City State Zip Code Eden Prairie MN 55347-1437	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Retired Retired Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 215.00

C.	Full Name (Last, First, Middle Initial) Mr. James O. Peterson	Date of Receipt MM / DD / YYYY 07 / 11 / 2008
	Mailing Address 8886 Amber St	Transaction ID: 0627942
	City State Zip Code Riverside CA 92503-5772	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Dept of Defense & Lockhead Instructor-Radar, Radio, Compute Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00

SUBTOTAL of Receipts This Page (optional)	215.00
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 6 / 92
	<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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Michael S. Fleischer		Date of Receipt MM / DD / YYYY 07 / 17 / 2008		
	Mailing Address 26 Oak St		Transaction ID: 0627943		
	City Tenafly	State NJ	Zip Code 07670-2717	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>		
	Name of Employer Westwood Oph Assoc	Occupation Physician	Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.	Full Name (Last, First, Middle Initial) James A. Norris		Date of Receipt MM / DD / YYYY 07 / 17 / 2008		
	Mailing Address 1808 N Monroe St		Transaction ID: 0627951		
	City Arlington	State VA	Zip Code 22207	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>		
	Name of Employer Retired	Occupation Retired	Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.	Full Name (Last, First, Middle Initial) Mrs. De Maris B. Matteo		Date of Receipt MM / DD / YYYY 08 / 08 / 2008		
	Mailing Address 8 North Dr		Transaction ID: 0629027		
	City Dobbs Ferry	State NY	Zip Code 10522-3512	Amount of Each Receipt this Period 65.00	
	FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>		
	Name of Employer Retired	Occupation Professor	Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	2615.00
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 7 / 92
	<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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Mr. William E. Sturdevant		Date of Receipt MM / DD / YYYY 08 / 08 / 2008
	Mailing Address 3918 County Road 507		Transaction ID: 0629030
	City Brazoria	State TX	Zip Code 77422
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 103.02
	Name of Employer self Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation engineer Election Cycle-to-Date ▼ 603.02	<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) Carl A. Davis		Date of Receipt MM / DD / YYYY 08 / 25 / 2008
	Mailing Address PO Box 262326		Transaction ID: 0629035
	City Houston	State TX	Zip Code 77207-2326
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer Retired Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Election Cycle-to-Date ▼ 4600.00	<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) Lois E. Davis		Date of Receipt MM / DD / YYYY 08 / 25 / 2008
	Mailing Address PO Box 262326		Transaction ID: 0629036
	City Houston	State TX	Zip Code 77207-2326
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer Retired Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Election Cycle-to-Date ▼ 4600.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	4703.02
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 / 92	
	(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)
Committee to Re-Elect Ron Paul

A.

Full Name (Last, First, Middle Initial) Don Vanden Bos		Date of Receipt	
Mailing Address 6555 Waybridge SE		M M / D D / Y Y Y Y 09 / 24 / 2008	
City	State	Zip Code	Transaction ID: 0629215
Grand Rapids	MI	49512	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		1000.00	
Name of Employer Requested	Occupation Requested	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	8533.02

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

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

FOR LINE NUMBER: PAGE 9 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

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

Mailing Address 601 Pennsylvania Ave NW #600

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt M M / D D / Y Y Y Y
07 / 03 / 2008

Transaction ID: 0627949

Amount of Each Receipt this Period 2500.00

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

B. Full Name (Last, First, Middle Initial)
R.P.A.C.

Mailing Address 430 N Michigan Ave

City Chicago State IL Zip Code 60611

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt M M / D D / Y Y Y Y
07 / 07 / 2008

Transaction ID: 0627950

Amount of Each Receipt this Period 5000.00

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

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

Mailing Address PO Box 18576

City Oklahoma City State OK Zip Code 73112

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt M M / D D / Y Y Y Y
09 / 17 / 2008

Transaction ID: 0629064

Amount of Each Receipt this Period 5000.00

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

SUBTOTAL of Receipts This Page (optional) 12500.00

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 / 92	
	(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) Committee to Re-Elect Ron Paul

A.

Full Name (Last, First, Middle Initial) NRLCA Political Action Committee		Date of Receipt
Mailing Address 1630 Duke St, 4th Fl		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
City	State	Zip Code
Alexandria	VA	22314-3464
FEC ID number of contributing federal political committee.		Transaction ID: 0629069
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="2000.00"/>
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008	Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="2000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="14500.00"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 92
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A.

Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson

Mailing Address 122 W Way

City State Zip Code
Lake Jackson TX 77566

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6489.66

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 03 / 2008

Transaction ID: 0629376

Amount of Each Receipt this Period
1127.67

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

B.

Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson

Mailing Address 122 W Way

City State Zip Code
Lake Jackson TX 77566

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7617.33

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 10 / 2008

Transaction ID: 0629377

Amount of Each Receipt this Period
1127.67

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

C.

Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson

Mailing Address 122 W Way

City State Zip Code
Lake Jackson TX 77566

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 8745.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 17 / 2008

Transaction ID: 0629378

Amount of Each Receipt this Period
1127.67

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

SUBTOTAL of Receipts This Page (optional) ► **3383.01**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 92
	<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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) First National Bank of Lake Jackson	Date of Receipt MM / DD / YYYY 07 / 24 / 2008
	Mailing Address 122 W Way	Transaction ID: 0629379
	City State Zip Code Lake Jackson TX 77566	Amount of Each Receipt this Period 1127.67
	FEC ID number of contributing federal political committee. C	Dividend and Interest income <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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 9872.67

B.	Full Name (Last, First, Middle Initial) First National Bank of Lake Jackson	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 122 W Way	Transaction ID: 0629380
	City State Zip Code Lake Jackson TX 77566	Amount of Each Receipt this Period 1127.67
	FEC ID number of contributing federal political committee. C	Dividend and Interest income <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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 11000.34

C.	Full Name (Last, First, Middle Initial) First National Bank of Lake Jackson	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 122 W Way	Transaction ID: 0629381
	City State Zip Code Lake Jackson TX 77566	Amount of Each Receipt this Period 234.93
	FEC ID number of contributing federal political committee. C	Dividend and Interest income <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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 11235.27

SUBTOTAL of Receipts This Page (optional)	2490.27
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 / 92
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A.

Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson

Mailing Address 122 W Way

City State Zip Code
Lake Jackson TX 77566

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
11276.33

Date of Receipt
MM / DD / YYYY
07 / 31 / 2008

Transaction ID: 0629382

Amount of Each Receipt this Period
41.06

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

B.

Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson

Mailing Address 122 W Way

City State Zip Code
Lake Jackson TX 77566

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
12242.90

Date of Receipt
MM / DD / YYYY
08 / 07 / 2008

Transaction ID: 0629364

Amount of Each Receipt this Period
966.57

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

C.

Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson

Mailing Address 122 W Way

City State Zip Code
Lake Jackson TX 77566

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
13209.47

Date of Receipt
MM / DD / YYYY
08 / 14 / 2008

Transaction ID: 0629365

Amount of Each Receipt this Period
966.57

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

SUBTOTAL of Receipts This Page (optional) ► **1974.20**

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 / 92
(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)
Committee to Re-Elect Ron Paul

A. Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson
Mailing Address 122 W Way

City State Zip Code
Lake Jackson TX 77566

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
14176.04

Date of Receipt

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

Transaction ID: 0629366
 Amount of Each Receipt this Period
966.57

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

B. Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson
Mailing Address 122 W Way

City State Zip Code
Lake Jackson TX 77566

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
14981.52

Date of Receipt

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

Transaction ID: 0629367
 Amount of Each Receipt this Period
805.48

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

C. Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson
Mailing Address 122 W Way

City State Zip Code
Lake Jackson TX 77566

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
15270.80

Date of Receipt

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

Transaction ID: 0629368
 Amount of Each Receipt this Period
289.28

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

SUBTOTAL of Receipts This Page (optional) ► **2061.33**

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 / 92
(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)
Committee to Re-Elect Ron Paul

A.

Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson

Mailing Address 122 W Way

City State Zip Code
Lake Jackson TX 77566

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
15306.74

Date of Receipt
MM / DD / YYYY
08 / 31 / 2008

Transaction ID: 0629369

Amount of Each Receipt this Period
35.94

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

B.

Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson

Mailing Address 122 W Way

City State Zip Code
Lake Jackson TX 77566

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
16112.22

Date of Receipt
MM / DD / YYYY
09 / 04 / 2008

Transaction ID: 0629356

Amount of Each Receipt this Period
805.48

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

C.

Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson

Mailing Address 122 W Way

City State Zip Code
Lake Jackson TX 77566

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
16927.29

Date of Receipt
MM / DD / YYYY
09 / 16 / 2008

Transaction ID: 0629357

Amount of Each Receipt this Period
815.07

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

SUBTOTAL of Receipts This Page (optional) ► **1656.49**

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 / 92
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A.

Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson

Mailing Address 122 W Way

City State Zip Code
Lake Jackson TX 77566

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
17622.50

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 18 / 2008

Transaction ID: 0629358

Amount of Each Receipt this Period
695.21

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

B.

Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson

Mailing Address 122 W Way

City State Zip Code
Lake Jackson TX 77566

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
18317.71

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 25 / 2008

Transaction ID: 0629359

Amount of Each Receipt this Period
695.21

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

C.

Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson

Mailing Address 122 W Way

City State Zip Code
Lake Jackson TX 77566

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
18585.55

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2008

Transaction ID: 0629360

Amount of Each Receipt this Period
267.84

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

SUBTOTAL of Receipts This Page (optional) ► **1658.26**

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 / 92	
	(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)
Committee to Re-Elect Ron Paul

A.

Full Name (Last, First, Middle Initial) First National Bank of Lake Jackson		Date of Receipt
Mailing Address 122 W Way		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
City	State	Zip Code
Lake Jackson	TX	77566
FEC ID number of contributing federal political committee.		Transaction ID: 0629363
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="34.82"/>
Occupation		Dividend and Interest income
Election Cycle-to-Date ▼		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	<input type="text" value="18620.37"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="34.82"/>
TOTAL This Period (last page this line number only)	<input type="text" value="13258.38"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Chase Visa</p> <p>Mailing Address PO Box 52064</p> <p>City Phoenix State AZ Zip Code 85072-2064</p> <p>Purpose of Disbursement Credit Card Payment</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629165 Date of Disbursement 07 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>ITEMIZATION BELOW</p>
<p>B. Full Name (Last, First, Middle Initial) Business Wire</p> <p>Mailing Address 44 Montgomery Street, 39th Floor</p> <p>City San Francisco State CA Zip Code 94104</p> <p>Purpose of Disbursement Public Relations Services</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629165-001 Date of Disbursement 07 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO</p>
<p>C. Full Name (Last, First, Middle Initial) Capitol Hill Club</p> <p>Mailing Address 300 First St SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Food Expense</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629167 Date of Disbursement 07 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 499.30</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1499.30

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A. Full Name (Last, First, Middle Initial)
North Galveston Chamber of Commerce

Mailing Address 2718 FM 517 E

City Dickinson State TX Zip Code 77539

Purpose of Disbursement
Membership Dues

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629172

Date of Disbursement

07 / 01 / 2008

Amount of Each Disbursement this Period

60.00

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

B. Full Name (Last, First, Middle Initial)
A Better Answer

Mailing Address 450 Sam Houston Pkwy E #168

City Houston State TX Zip Code 77060

Purpose of Disbursement
Telephone Expense

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629173

Date of Disbursement

07 / 01 / 2008

Amount of Each Disbursement this Period

464.92

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

C. Full Name (Last, First, Middle Initial)
Valori Pyeatt

Mailing Address 504 Brazoria Rd

City Lake Jackson State TX Zip Code 77566

Purpose of Disbursement
Salaries

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629148

Date of Disbursement

07 / 01 / 2008

Amount of Each Disbursement this Period

4871.00

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

SUBTOTAL of Disbursements This Page (optional) ►

5395.92

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629314 Date of Disbursement 07 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 18.27</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) El Toro's</p> <p>Mailing Address 120 Commerce St</p> <p>City Clute State TX Zip Code 77531</p> <p>Purpose of Disbursement Food Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629161 Date of Disbursement 07 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 50.35</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629313 Date of Disbursement 07 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 8.62</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

77.24

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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) U.S. Postmaster	Transaction ID: 0629159 Date of Disbursement 07 / 03 / 2008
	Mailing Address 530 E Main St	Amount of Each Disbursement this Period 211.00
	City Clute State TX Zip Code 77531	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement General Postage Expense Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629312 Date of Disbursement 07 / 03 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 6.65
	City Omaha State NE Zip Code 68145	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Charge Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629311 Date of Disbursement 07 / 04 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 1.76
	City Omaha State NE Zip Code 68145	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Charge Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

SUBTOTAL of Disbursements This Page (optional)	219.41
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)
Committee to Re-Elect Ron Paul

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629310 Date of Disbursement 07 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 1.33</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629309 Date of Disbursement 07 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 1.18</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Laine Melton</p> <p>Mailing Address 142 Oyster Creek Dr #7</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Salaries Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629157 Date of Disbursement 07 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 429.28</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

431.79

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629308 Date of Disbursement 07 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 0.88</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629374 Date of Disbursement 07 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 4.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Transfirst</p> <p>Mailing Address 1100 S McCaslin Blvd #100</p> <p>City Superior State CO Zip Code 80027</p> <p>Purpose of Disbursement Credit Card Contributions Processing Fee Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629372 Date of Disbursement 07 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 43.24</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

48.62

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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 630016</p> <p>City Dallas State TX Zip Code 75263</p> <p>Purpose of Disbursement Freight/Shipping Expenses</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629154 Date of Disbursement 07 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 125.63</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) A Better Answer</p> <p>Mailing Address 450 Sam Houston Pkwy E #168</p> <p>City Houston State TX Zip Code 77060</p> <p>Purpose of Disbursement Telephone Expense</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629149 Date of Disbursement 07 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 538.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 650487</p> <p>City Dallas State TX Zip Code 75265-0487</p> <p>Purpose of Disbursement Telephone Expense</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629150 Date of Disbursement 07 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 94.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

759.39

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)
Committee to Re-Elect Ron Paul

A.

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

Mailing Address PO Box 650487

City Dallas State TX Zip Code 75265-0487

Purpose of Disbursement
Telephone Expense

Candidate Name

001
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0629151
Date of Disbursement

07 / 10 / 2008

Amount of Each Disbursement this Period

131.89

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

B.

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

Mailing Address PO Box 105378

City Atlanta State GA Zip Code 30348

Purpose of Disbursement
Telephone Expense

Candidate Name

001
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0629152
Date of Disbursement

07 / 10 / 2008

Amount of Each Disbursement this Period

72.80

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

C.

Full Name (Last, First, Middle Initial)
MPrinting Graphics & Advertising

Mailing Address 3902 E Wisteria Circle

City Sugar Land State TX Zip Code 77479

Purpose of Disbursement
Political Consultant

Candidate Name

001
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0629155
Date of Disbursement

07 / 10 / 2008

Amount of Each Disbursement this Period

5000.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

5204.69

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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Lori Pyeatt</p> <p>Mailing Address 504 Brazoria Rd</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Salaries Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629156 Date of Disbursement 07 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 619.58</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629307 Date of Disbursement 07 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 0.88</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629306 Date of Disbursement 07 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 0.59</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

621.05

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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629305 Date of Disbursement 07 / 13 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 1.69
	City Omaha State NE Zip Code 68145	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Charge Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 0629375 Date of Disbursement 07 / 14 / 2008
	Mailing Address PO Box 53852	Amount of Each Disbursement this Period 1.77
	City Phoenix State AZ Zip Code 85072-3852	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Credit Card Contributions Processing Fee Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		011 Category/Type

C.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629304 Date of Disbursement 07 / 14 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 5.90
	City Omaha State NE Zip Code 68145	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Charge Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

SUBTOTAL of Disbursements This Page (optional)	9.36
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
Committee to Re-Elect Ron Paul

A.

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

Mailing Address 303 Blackstock Ln

City State Zip Code
Lake Jackson TX 77566-3804

Purpose of Disbursement
Mileage Expense
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0629145
Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

107.25

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

B.

Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson

Mailing Address 122 W Way

City State Zip Code
Lake Jackson TX 77566

Purpose of Disbursement
Payroll Tax Expense
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0629143
Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

2899.71

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

ITEMIZATION BELOW

C.

Full Name (Last, First, Middle Initial)
U.S. Treasury

Mailing Address 1500 Pennsylvania Ave NW

City State Zip Code
Washington DC 20220

Purpose of Disbursement
Payroll Tax Expense
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0629143-001
Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

2899.71

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

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional) ▶

3006.96

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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) First National Bank of Lake Jackson</p> <p>Mailing Address 122 W Way</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Payroll Tax Expense</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629144 Date of Disbursement 07 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1914.51</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>ITEMIZATION BELOW</p>
<p>B. Full Name (Last, First, Middle Initial) U.S. Treasury</p> <p>Mailing Address 1500 Pennsylvania Ave NW</p> <p>City Washington State DC Zip Code 20220</p> <p>Purpose of Disbursement Payroll Tax Expense</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629144-001 Date of Disbursement 07 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1914.51</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO</p>
<p>C. Full Name (Last, First, Middle Initial) David Morris</p> <p>Mailing Address Rt 1 Box 1711</p> <p>City Brazoria State TX Zip Code 77422</p> <p>Purpose of Disbursement Salaries</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629146 Date of Disbursement 07 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 400.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2314.51

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)
Committee to Re-Elect Ron Paul

A.

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

Mailing Address 303 Blackstock Ln

City State Zip Code
Lake Jackson TX 77566-3804

Purpose of Disbursement
Salaries

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629147
Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

411.19

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

B.

Full Name (Last, First, Middle Initial)
Paypal

Mailing Address PO Box 45950

City State Zip Code
Omaha NE 68145

Purpose of Disbursement
Service Charge

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629303
Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

0.33

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

C.

Full Name (Last, First, Middle Initial)
Extra Space Storage of Clute

Mailing Address 807 Brazos Park Dr

City State Zip Code
Clute TX 77531

Purpose of Disbursement
Rent Expense

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629141
Date of Disbursement

07 / 16 / 2008

Amount of Each Disbursement this Period

470.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

881.52

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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629302 Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 6.07</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) North Galveston Chamber of Commerce</p> <p>Mailing Address 2718 FM 517 E</p> <p>City Dickinson State TX Zip Code 77539</p> <p>Purpose of Disbursement Event Table Reservation Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629142 Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 350.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Tom Lizardo</p> <p>Mailing Address 2933 Waterford Ct</p> <p>City Vienna State VA Zip Code 22181</p> <p>Purpose of Disbursement Political Consultant Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629132 Date of Disbursement 07 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5356.07

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 32 / 92

<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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) U.S. Postmaster</p> <p>Mailing Address 530 E Main St</p> <p>City Clute State TX Zip Code 77531</p> <p>Purpose of Disbursement General Postage Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629138</p> <p>Date of Disbursement 07 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 745.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629301</p> <p>Date of Disbursement 07 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 2.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Lori Pyeatt</p> <p>Mailing Address 504 Brazoria Rd</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Travel Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629137</p> <p>Date of Disbursement 07 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 241.09</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

988.90

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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Protus IP Solutions</p> <p>Mailing Address 2379 Holly Ln Ste 210, Ottawa, ON</p> <p>City CANADA State ZZ Zip Code K1V 7-P2</p> <p>Purpose of Disbursement Email Services</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629135 Date of Disbursement 07 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 3060.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 105378</p> <p>City Atlanta State GA Zip Code 30348</p> <p>Purpose of Disbursement Telephone Expense</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629136 Date of Disbursement 07 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 168.85</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629300 Date of Disbursement 07 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 4.67</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3233.52

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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629299 Date of Disbursement 07 / 19 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 3.69
	City Omaha State NE Zip Code 68145	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Charge Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/ Type

B.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629298 Date of Disbursement 07 / 20 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 0.45
	City Omaha State NE Zip Code 68145	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Charge Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/ Type

C.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629297 Date of Disbursement 07 / 21 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 0.88
	City Omaha State NE Zip Code 68145	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Charge Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	5.02
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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 0629187 Date of Disbursement 07 / 22 / 2008
	Mailing Address PO Box 53852	Amount of Each Disbursement this Period 6680.56
	City Phoenix State AZ Zip Code 85072-3852	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ITEMIZATION BELOW
	Purpose of Disbursement Credit Card Payment Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) Continental Airlines	Transaction ID: 0629187-001 Date of Disbursement 06 / 18 / 2008
	Mailing Address 9999 Richmond Ave	Amount of Each Disbursement this Period 1254.50
	City Houston State TX Zip Code 77042	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
	Purpose of Disbursement Airline Travel Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		002 Category/Type

C.	Full Name (Last, First, Middle Initial) Continental Airlines	Transaction ID: 0629187-002 Date of Disbursement 06 / 27 / 2008
	Mailing Address 9999 Richmond Ave	Amount of Each Disbursement this Period 873.00
	City Houston State TX Zip Code 77042	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
	Purpose of Disbursement Airline Travel Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		002 Category/Type

SUBTOTAL of Disbursements This Page (optional)	▶	6680.56
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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Continental Airlines	Transaction ID: 0629187-003 Date of Disbursement 06 / 27 / 2008
	Mailing Address 9999 Richmond Ave	Amount of Each Disbursement this Period 1077.99
	City Houston State TX Zip Code 77042	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Airline Travel	[MEMO ITEM] MEMO
	Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Continental Airlines	Transaction ID: 0629187-004 Date of Disbursement 06 / 27 / 2008
	Mailing Address 9999 Richmond Ave	Amount of Each Disbursement this Period 1254.50
	City Houston State TX Zip Code 77042	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Airline Travel	[MEMO ITEM] MEMO
	Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Continental Airlines	Transaction ID: 0629187-005 Date of Disbursement 06 / 27 / 2008
	Mailing Address 9999 Richmond Ave	Amount of Each Disbursement this Period 1003.50
	City Houston State TX Zip Code 77042	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Airline Travel	[MEMO ITEM] MEMO
	Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Earthlink.Net</p> <p>Mailing Address PO Box 6452</p> <p>City Carol Stream State IL Zip Code 60197-6452</p> <p>Purpose of Disbursement Computer Access Service</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629187-006</p> <p>Date of Disbursement 06 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 39.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO</p>
<p>B. Full Name (Last, First, Middle Initial) El Toro's</p> <p>Mailing Address 120 Commerce St</p> <p>City Clute State TX Zip Code 77531</p> <p>Purpose of Disbursement Food Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629187-009</p> <p>Date of Disbursement 07 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 52.21</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO</p>
<p>C. Full Name (Last, First, Middle Initial) Midwest Airlines</p> <p>Mailing Address 401 E Layton Ave</p> <p>City Milwaukee State WI Zip Code 53207</p> <p>Purpose of Disbursement Airline Travel</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629187-010</p> <p>Date of Disbursement 07 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 412.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A.

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

Mailing Address 101 Dixie Dr

City Clute State TX Zip Code 77531

Purpose of Disbursement

Gasoline

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629187-012

Date of Disbursement

07 / 06 / 2008

Amount of Each Disbursement this Period

58.96

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

[MEMO ITEM]
MEMO

B.

Full Name (Last, First, Middle Initial)
El Toro's

Mailing Address 120 Commerce St

City Clute State TX Zip Code 77531

Purpose of Disbursement

Food Expense

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629187-013

Date of Disbursement

07 / 07 / 2008

Amount of Each Disbursement this Period

61.13

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

[MEMO ITEM]
MEMO

C.

Full Name (Last, First, Middle Initial)
ExxonMobil

Mailing Address 627 Oyster Creek Dr

City Lake Jackson State TX Zip Code 77566

Purpose of Disbursement

Gasoline

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629187-016

Date of Disbursement

06 / 16 / 2008

Amount of Each Disbursement this Period

44.95

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

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) ExxonMobil	Transaction ID: 0629187-017
	Mailing Address 627 Oyster Creek Dr	Date of Disbursement 06 / 28 / 2008
	City Lake Jackson State TX Zip Code 77566	Amount of Each Disbursement this Period 61.59
	Purpose of Disbursement Gasoline Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> 001 Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

B.	Full Name (Last, First, Middle Initial) Lori Pyeatt	Transaction ID: 0629130
	Mailing Address 504 Brazoria Rd	Date of Disbursement 07 / 22 / 2008
	City Lake Jackson State TX Zip Code 77566	Amount of Each Disbursement this Period 619.58
	Purpose of Disbursement Salaries Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> 001 Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629296
	Mailing Address PO Box 45950	Date of Disbursement 07 / 22 / 2008
	City Omaha State NE Zip Code 68145	Amount of Each Disbursement this Period 0.39
	Purpose of Disbursement Service Charge Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> 001 Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	619.97
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629295 Date of Disbursement 07 / 23 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 2.85
	City Omaha State NE Zip Code 68145	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Charge Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629294 Date of Disbursement 07 / 24 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 0.74
	City Omaha State NE Zip Code 68145	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Charge Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629293 Date of Disbursement 07 / 26 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 0.59
	City Omaha State NE Zip Code 68145	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Charge Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

SUBTOTAL of Disbursements This Page (optional)	▶	4.18
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

<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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Paypal Mailing Address PO Box 45950 City Omaha State NE Zip Code 68145 Purpose of Disbursement Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629292 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 8	Amount of Each Disbursement this Period 0.39 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Paypal Mailing Address PO Box 45950 City Omaha State NE Zip Code 68145 Purpose of Disbursement Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629291 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 8	Amount of Each Disbursement this Period 0.45 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Paypal Mailing Address PO Box 45950 City Omaha State NE Zip Code 68145 Purpose of Disbursement Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629290 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 0 8	Amount of Each Disbursement this Period 0.36 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1.20

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)
Committee to Re-Elect Ron Paul

A. Full Name (Last, First, Middle Initial) CIC Solutions, Ltd. <hr/> Mailing Address 3313 Wyndham Cir #3220 <hr/> City Alexandria State VA Zip Code 22302 <hr/> Purpose of Disbursement Political Consultant Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629181 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 675.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial) Verizon Wireless <hr/> Mailing Address PO Box 105378 <hr/> City Atlanta State GA Zip Code 30348 <hr/> Purpose of Disbursement Telephone Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629101 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 8
	Amount of Each Disbursement this Period 216.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial) Verizon Wireless <hr/> Mailing Address PO Box 105378 <hr/> City Atlanta State GA Zip Code 30348 <hr/> Purpose of Disbursement Telephone Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629102 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 8
	Amount of Each Disbursement this Period 151.04 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1042.04
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

<input 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)
Committee to Re-Elect Ron Paul

A. Full Name (Last, First, Middle Initial)
First National Bank of Lake Jackson

Mailing Address 122 W Way

City Lake Jackson State TX Zip Code 77566

Purpose of Disbursement

Payroll Tax Expense

Candidate Name

001
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0629099

Date of Disbursement

07 / 31 / 2008

Amount of Each Disbursement this Period

345.52

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

ITEMIZATION BELOW

B. Full Name (Last, First, Middle Initial)
U.S. Treasury

Mailing Address 1500 Pennsylvania Ave NW

City Washington State DC Zip Code 20220

Purpose of Disbursement

Payroll Tax Expense

Candidate Name

001
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0629099-001

Date of Disbursement

07 / 31 / 2008

Amount of Each Disbursement this Period

345.52

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

[MEMO ITEM]
MEMO

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

Mailing Address Rt 1 Box 1711

City Brazoria State TX Zip Code 77422

Purpose of Disbursement

Salaries

Candidate Name

001
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0629103

Date of Disbursement

07 / 31 / 2008

Amount of Each Disbursement this Period

400.00

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

SUBTOTAL of Disbursements This Page (optional) ►

745.52

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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Laura Paul</p> <p>Mailing Address 303 Blackstock Ln</p> <p>City Lake Jackson State TX Zip Code 77566-3804</p> <p>Purpose of Disbursement Salaries Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629104 Date of Disbursement 07 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 312.19</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Laine Melton</p> <p>Mailing Address 142 Oyster Creek Dr #7</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Salaries Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629105 Date of Disbursement 07 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 429.28</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629289 Date of Disbursement 07 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 0.59</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

742.06

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Protus IP Solutions</p> <p>Mailing Address 2379 Holly Ln Ste 210, Ottawa, ON</p> <p>City CANADA State ZZ Zip Code K1V 7-P2</p> <p>Purpose of Disbursement Email Services</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629239 Date of Disbursement 08 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 3060.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 630016</p> <p>City Dallas State TX Zip Code 75263</p> <p>Purpose of Disbursement Freight/Shipping Expenses</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629245 Date of Disbursement 08 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 86.13</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Victoria Chamber of Commerce</p> <p>Mailing Address 700 Main Center #101</p> <p>City Victoria State TX Zip Code 77901</p> <p>Purpose of Disbursement Membership Dues</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629241 Date of Disbursement 08 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 115.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3261.13

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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) A Better Answer</p> <p>Mailing Address 450 Sam Houston Pkwy E #168</p> <p>City Houston State TX Zip Code 77060</p> <p>Purpose of Disbursement Telephone Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629244 Date of Disbursement 08 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 715.31</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) MPrinting Graphics & Advertising</p> <p>Mailing Address 3902 E Wisteria Circle</p> <p>City Sugar Land State TX Zip Code 77479</p> <p>Purpose of Disbursement Political Consultant Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629247 Date of Disbursement 08 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Tracee Tollett</p> <p>Mailing Address PO Box 459</p> <p>City Lake Jackson State TX Zip Code 77566-0459</p> <p>Purpose of Disbursement Salaries Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629238 Date of Disbursement 08 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 401.75</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6117.06

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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) MPrinting Graphics & Advertising</p> <p>Mailing Address 3902 E Wisteria Circle</p> <p>City Sugar Land State TX Zip Code 77479</p> <p>Purpose of Disbursement WEB DESIGN/HOSTING/MAINT</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629248</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629288</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1.03"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) El Toro's</p> <p>Mailing Address 120 Commerce St</p> <p>City Clute State TX Zip Code 77531</p> <p>Purpose of Disbursement Food Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629236</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="41.81"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

117.84

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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Laura Paul</p> <p>Mailing Address 303 Blackstock Ln</p> <p>City Lake Jackson State TX Zip Code 77566-3804</p> <p>Purpose of Disbursement Salaries Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629235 Date of Disbursement 08 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 273.05</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629287 Date of Disbursement 08 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 1.12</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Lori Pyeatt</p> <p>Mailing Address 504 Brazoria Rd</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Salaries Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629234 Date of Disbursement 08 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 619.58</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

893.75

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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629286</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <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="1.57"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Transfirst</p> <p>Mailing Address 1100 S McCaslin Blvd #100</p> <p>City Superior State CO Zip Code 80027</p> <p>Purpose of Disbursement Credit Card Contributions Processing Fee</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629371</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <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="41.62"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629285</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <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="3.79"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

46.98

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: 0629224 Date of Disbursement 08 / 14 / 2008
	Mailing Address PO Box 650487	Amount of Each Disbursement this Period 81.31
	City Dallas State TX Zip Code 75265-0487	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Expense Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: 0629232 Date of Disbursement 08 / 14 / 2008
	Mailing Address PO Box 650487	Amount of Each Disbursement this Period 122.78
	City Dallas State TX Zip Code 75265-0487	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Expense Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) Jesse Benton	Transaction ID: 0629216 Date of Disbursement 08 / 15 / 2008
	Mailing Address 504 Brazoria Rd	Amount of Each Disbursement this Period 625.00
	City Lake Jackson State TX Zip Code 77566	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Political Consultant Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

829.09

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) First National Bank of Lake Jackson	Transaction ID: 0629219 Date of Disbursement 08 / 15 / 2008
	Mailing Address 122 W Way	Amount of Each Disbursement this Period 2472.98
	City Lake Jackson State TX Zip Code 77566	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Tax Expense Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	ITEMIZATION BELOW

B.	Full Name (Last, First, Middle Initial) U.S. Treasury	Transaction ID: 0629219-001 Date of Disbursement 08 / 15 / 2008
	Mailing Address 1500 Pennsylvania Ave NW	Amount of Each Disbursement this Period 2472.98
	City Washington State DC Zip Code 20220	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Tax Expense Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO

C.	Full Name (Last, First, Middle Initial) Valori Pyeatt	Transaction ID: 0629214 Date of Disbursement 08 / 15 / 2008
	Mailing Address 504 Brazoria Rd	Amount of Each Disbursement this Period 1182.04
	City Lake Jackson State TX Zip Code 77566	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salaries Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	3655.02
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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) David Morris Mailing Address Rt 1 Box 1711 City Brazoria State TX Zip Code 77422 Purpose of Disbursement Salaries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629218 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 8 Amount of Each Disbursement this Period 400.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Laine Melton Mailing Address 142 Oyster Creek Dr #7 City Lake Jackson State TX Zip Code 77566 Purpose of Disbursement Salaries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629231 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 8 Amount of Each Disbursement this Period 327.22 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Paypal Mailing Address PO Box 45950 City Omaha State NE Zip Code 68145 Purpose of Disbursement Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629284 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 8 Amount of Each Disbursement this Period 0.94 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	728.16
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 53 / 92

<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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Paypal Mailing Address PO Box 45950 City Omaha State NE Zip Code 68145 Purpose of Disbursement Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629283 Date of Disbursement 08 / 17 / 2008 Amount of Each Disbursement this Period 0.74 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Lori Pyeatt Mailing Address 504 Brazoria Rd City Lake Jackson State TX Zip Code 77566 Purpose of Disbursement Salaries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629205 Date of Disbursement 08 / 18 / 2008 Amount of Each Disbursement this Period 619.58 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Exxon/Mobil Mailing Address Processing Center City Des Moines State IA Zip Code 50361-0001 Purpose of Disbursement Gasoline Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629202 Date of Disbursement 08 / 19 / 2008 Amount of Each Disbursement this Period 442.37 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1062.69

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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 0629204 Date of Disbursement 08 / 19 / 2008
	Mailing Address PO Box 105378	Amount of Each Disbursement this Period 74.50
	City Atlanta State GA Zip Code 30348	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Expense Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629282 Date of Disbursement 08 / 19 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 0.65
	City Omaha State NE Zip Code 68145	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Charge Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 0629199 Date of Disbursement 08 / 20 / 2008
	Mailing Address PO Box 53852	Amount of Each Disbursement this Period 2323.42
	City Phoenix State AZ Zip Code 85072-3852	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Credit Card Payment Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

ITEMIZATION BELOW

SUBTOTAL of Disbursements This Page (optional) ▶

2398.57

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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) ExxonMobil	Transaction ID: 0629199-001 Date of Disbursement 07 / 13 / 2008
	Mailing Address 627 Oyster Creek Dr	Amount of Each Disbursement this Period 50.15
	City Lake Jackson State TX Zip Code 77566	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
	Purpose of Disbursement Gasoline Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Windswept Seafood Restaurant	Transaction ID: 0629199-002 Date of Disbursement 07 / 19 / 2008
	Mailing Address 105 Burch Cir	Amount of Each Disbursement this Period 154.97
	City Oyster Creek State TX Zip Code 77541	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
	Purpose of Disbursement Food Expense Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) John's Handy Plus	Transaction ID: 0629199-003 Date of Disbursement 07 / 20 / 2008
	Mailing Address Hwy 288B	Amount of Each Disbursement this Period 42.98
	City Clute State TX Zip Code 77531	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
	Purpose of Disbursement Gasoline Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A.

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

Mailing Address 101 Dixie Dr

City Clute State TX Zip Code 77531

Purpose of Disbursement
Gasoline

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: 0629199-004
Date of Disbursement

07 / 21 / 2008

Amount of Each Disbursement this Period

43.70

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

[MEMO ITEM]
MEMO

B.

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

Mailing Address 9999 Richmond Ave

City Houston State TX Zip Code 77042

Purpose of Disbursement
Airline Travel

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: 0629199-005
Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

1254.50

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

[MEMO ITEM]
MEMO

C.

Full Name (Last, First, Middle Initial)
House Gift Shop

Mailing Address US Capitol

City Washington State DC Zip Code 20515

Purpose of Disbursement
Auction Items/Gifts

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: 0629199-006
Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

451.04

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

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A.

Full Name (Last, First, Middle Initial)
Earthlink.Net

Mailing Address PO Box 6452

City State Zip Code
Carol Stream IL 60197-6452

Purpose of Disbursement
Computer Access Service

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629199-010
Date of Disbursement

07 / 27 / 2008

Amount of Each Disbursement this Period

39.95

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

[MEMO ITEM]
MEMO

B.

Full Name (Last, First, Middle Initial)
Buc'ees

Mailing Address 899 Oyster Creek

City State Zip Code
Lake Jackson TX 77566

Purpose of Disbursement
Gasoline

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629199-011
Date of Disbursement

08 / 08 / 2008

Amount of Each Disbursement this Period

52.41

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

[MEMO ITEM]
MEMO

C.

Full Name (Last, First, Middle Initial)
Buc'ees

Mailing Address 899 Oyster Creek

City State Zip Code
Lake Jackson TX 77566

Purpose of Disbursement
Gasoline

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629199-012
Date of Disbursement

08 / 11 / 2008

Amount of Each Disbursement this Period

46.17

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

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629281</p> <p>Date of Disbursement 08 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 3.20</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629280</p> <p>Date of Disbursement 08 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 0.33</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 105378</p> <p>City Atlanta State GA Zip Code 30348</p> <p>Purpose of Disbursement Telephone Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629193</p> <p>Date of Disbursement 08 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 157.85</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

161.38

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629279</p> <p>Date of Disbursement 08 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 2.30</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 105378</p> <p>City Atlanta State GA Zip Code 30348</p> <p>Purpose of Disbursement Telephone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629194</p> <p>Date of Disbursement 08 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 233.82</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Valori Pyeatt</p> <p>Mailing Address 504 Brazoria Rd</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Salaries</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629190</p> <p>Date of Disbursement 08 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 1182.04</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1418.16

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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629278 Date of Disbursement 08 / 28 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 0.88
	City Omaha State NE Zip Code 68145	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Charge Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) David Morris	Transaction ID: 0629191 Date of Disbursement 08 / 29 / 2008
	Mailing Address Rt 1 Box 1711	Amount of Each Disbursement this Period 400.00
	City Brazoria State TX Zip Code 77422	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salaries Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629277 Date of Disbursement 08 / 30 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 1.32
	City Omaha State NE Zip Code 68145	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Charge Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

SUBTOTAL of Disbursements This Page (optional)	402.20
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)
Committee to Re-Elect Ron Paul

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Laine Melton</p> <p>Mailing Address 142 Oyster Creek Dr #7</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Salaries</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629353</p> <p>Date of Disbursement 09 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 337.84</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629276</p> <p>Date of Disbursement 09 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 8.74</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629275</p> <p>Date of Disbursement 09 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 0.36</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

346.94

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)
Committee to Re-Elect Ron Paul

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629274 Date of Disbursement 09 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 0.91</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629273 Date of Disbursement 09 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 2.41</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629272 Date of Disbursement 09 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 2.09</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	5.41
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)

PAGE 63 / 92

<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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629271</p> <p>Date of Disbursement 09 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 1.28</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Jesse Benton</p> <p>Mailing Address 504 Brazoria Rd</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Political Consultant</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629352</p> <p>Date of Disbursement 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 1400.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Valori Pyeatt</p> <p>Mailing Address 504 Brazoria Rd</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Salaries</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629350</p> <p>Date of Disbursement 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 1182.04</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2583.32

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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Lori Pyeatt</p> <p>Mailing Address 504 Brazoria Rd</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Salaries Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629351 Date of Disbursement 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 619.58</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629270 Date of Disbursement 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 1.04</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Transfirst</p> <p>Mailing Address 1100 S McCaslin Blvd #100</p> <p>City Superior State CO Zip Code 80027</p> <p>Purpose of Disbursement Credit Card Contributions Processing Fee Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629362 Date of Disbursement 09 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 42.35</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

662.97

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629269 Date of Disbursement 09 / 10 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 0.59
	City Omaha State NE Zip Code 68145	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Charge Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629268 Date of Disbursement 09 / 11 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 0.59
	City Omaha State NE Zip Code 68145	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Charge Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: 0629267 Date of Disbursement 09 / 15 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 4.08
	City Omaha State NE Zip Code 68145	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Service Charge Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

5.26

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)

<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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629266</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <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="0"/> <input type="text" value="5"/> <input type="text" value="9"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) David Morris</p> <p>Mailing Address Rt 1 Box 1711</p> <p>City Brazoria State TX Zip Code 77422</p> <p>Purpose of Disbursement Salaries</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629349</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <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="4"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 105378</p> <p>City Atlanta State GA Zip Code 30348</p> <p>Purpose of Disbursement Telephone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629346</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <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="7"/> <input type="text" value="1"/> <input type="text" value="9"/> <input type="text" value="2"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>472.51</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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Laine Melton</p> <p>Mailing Address 142 Oyster Creek Dr #7</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Salaries Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629347 Date of Disbursement 09 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 206.06</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Tracee Tollett</p> <p>Mailing Address PO Box 459</p> <p>City Lake Jackson State TX Zip Code 77566-0459</p> <p>Purpose of Disbursement Salaries Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629348 Date of Disbursement 09 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 401.75</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629265 Date of Disbursement 09 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 3.53</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

611.34

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A.

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

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement
Credit Card Payment

Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: 0629354
Date of Disbursement

09 / 23 / 2008

Amount of Each Disbursement this Period

407.20

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

ITEMIZATION BELOW

B.

Full Name (Last, First, Middle Initial)
ExxonMobil

Mailing Address 627 Oyster Creek Dr

City Lake Jackson State TX Zip Code 77566

Purpose of Disbursement
Gasoline

Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: 0629354-001
Date of Disbursement

08 / 14 / 2008

Amount of Each Disbursement this Period

49.27

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

[MEMO ITEM]
MEMO

C.

Full Name (Last, First, Middle Initial)
Buc'ees

Mailing Address 899 Oyster Creek

City Lake Jackson State TX Zip Code 77566

Purpose of Disbursement
Gasoline

Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: 0629354-002
Date of Disbursement

08 / 16 / 2008

Amount of Each Disbursement this Period

47.02

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

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional) ▶

407.20

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)
Committee to Re-Elect Ron Paul

A.

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

Mailing Address 101 Dixie Dr

City Clute State TX Zip Code 77531

Purpose of Disbursement
Gasoline

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: 0629354-003
Date of Disbursement

08 / 24 / 2008

Amount of Each Disbursement this Period

54.38

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

[MEMO ITEM]
MEMO

B.

Full Name (Last, First, Middle Initial)
Buc'ees

Mailing Address 899 Oyster Creek

City Lake Jackson State TX Zip Code 77566

Purpose of Disbursement
Gasoline

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: 0629354-004
Date of Disbursement

08 / 26 / 2008

Amount of Each Disbursement this Period

58.22

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

[MEMO ITEM]
MEMO

C.

Full Name (Last, First, Middle Initial)
Earthlink.Net

Mailing Address PO Box 6452

City Carol Stream State IL Zip Code 60197-6452

Purpose of Disbursement
Computer Access Service

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: 0629354-005
Date of Disbursement

08 / 27 / 2008

Amount of Each Disbursement this Period

39.95

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

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Protus IP Solutions</p> <p>Mailing Address 2379 Holly Ln Ste 210, Ottawa, ON</p> <p>City CANADA State ZZ Zip Code K1V 7-P2</p> <p>Purpose of Disbursement Email Services</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629336 Date of Disbursement 09 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 3060.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 630016</p> <p>City Dallas State TX Zip Code 75263</p> <p>Purpose of Disbursement Freight/Shipping Expenses</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629334 Date of Disbursement 09 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 79.46</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Independent Cattlemens Assoc.</p> <p>Mailing Address Box 1168</p> <p>City Lockhart State TX Zip Code 78644</p> <p>Purpose of Disbursement Membership Dues</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629335 Date of Disbursement 09 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 200.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3339.46

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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 650487</p> <p>City Dallas State TX Zip Code 75265-0487</p> <p>Purpose of Disbursement Telephone Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629327 Date of Disbursement 09 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 88.13</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 105378</p> <p>City Atlanta State GA Zip Code 30348</p> <p>Purpose of Disbursement Telephone Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629337 Date of Disbursement 09 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 105.24</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 105378</p> <p>City Atlanta State GA Zip Code 30348</p> <p>Purpose of Disbursement Telephone Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629338 Date of Disbursement 09 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 341.45</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

534.82

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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 0629339 Date of Disbursement 09 / 24 / 2008
	Mailing Address PO Box 105378	Amount of Each Disbursement this Period 154.47
	City Atlanta State GA Zip Code 30348	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Expense Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 0629340 Date of Disbursement 09 / 24 / 2008
	Mailing Address PO Box 105378	Amount of Each Disbursement this Period 241.98
	City Atlanta State GA Zip Code 30348	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Expense Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) A Better Answer	Transaction ID: 0629342 Date of Disbursement 09 / 24 / 2008
	Mailing Address 450 Sam Houston Pkwy E #168	Amount of Each Disbursement this Period 683.37
	City Houston State TX Zip Code 77060	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Expense Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

SUBTOTAL of Disbursements This Page (optional)	1079.82
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)
Committee to Re-Elect Ron Paul

A.

Full Name (Last, First, Middle Initial)
MPrinting Graphics & Advertising

Mailing Address 3902 E Wisteria Circle

City State Zip Code
Sugar Land TX 77479

Purpose of Disbursement
Political Consultant

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629341
Date of Disbursement

09 / 24 / 2008

Amount of Each Disbursement this Period

5000.00

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

B.

Full Name (Last, First, Middle Initial)
Lori Pyeatt

Mailing Address 504 Brazoria Rd

City State Zip Code
Lake Jackson TX 77566

Purpose of Disbursement
Salaries

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629343
Date of Disbursement

09 / 24 / 2008

Amount of Each Disbursement this Period

619.58

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

C.

Full Name (Last, First, Middle Initial)
Paypal

Mailing Address PO Box 45950

City State Zip Code
Omaha NE 68145

Purpose of Disbursement
Service Charge

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629264
Date of Disbursement

09 / 24 / 2008

Amount of Each Disbursement this Period

29.30

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

SUBTOTAL of Disbursements This Page (optional) ▶

5648.88

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A.

Full Name (Last, First, Middle Initial)
Brazoria Cty Fair Assoc.

Mailing Address PO Box 818

City Angleton State TX Zip Code 77516

Purpose of Disbursement
Advertisement
Candidate Name

004
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: 0629330
Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

500.00

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

B.

Full Name (Last, First, Middle Initial)
The Brazosport Facts

Mailing Address 720 S Main

City Clute State TX Zip Code 77531

Purpose of Disbursement
Dues and Subscriptions
Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: 0629332
Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

129.00

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

C.

Full Name (Last, First, Middle Initial)
Protus IP Solutions

Mailing Address 2379 Holly Ln Ste 210, Ottawa, ON

City CANADA State ZZ Zip Code K1V 7-P2

Purpose of Disbursement
Email Services
Candidate Name

006
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: 0629324
Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

3060.00

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

SUBTOTAL of Disbursements This Page (optional)

3689.00

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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 650487</p> <p>City Dallas State TX Zip Code 75265-0487</p> <p>Purpose of Disbursement Telephone Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629325 Date of Disbursement 09 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 144.58</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 650487</p> <p>City Dallas State TX Zip Code 75265-0487</p> <p>Purpose of Disbursement Telephone Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629326 Date of Disbursement 09 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 179.86</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629263 Date of Disbursement 09 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 0.82</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

325.26

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)

<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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Lori Pyeatt</p> <p>Mailing Address 504 Brazoria Rd</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Travel Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629322</p> <p>Date of Disbursement 09 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 249.74</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>002 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629262</p> <p>Date of Disbursement 09 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 7.40</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>001 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Service Charge</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629261</p> <p>Date of Disbursement 09 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 1.73</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

258.87

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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Paypal Mailing Address PO Box 45950 City Omaha State NE Zip Code 68145 Purpose of Disbursement Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629260 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 8	Amount of Each Disbursement this Period 2.96 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Exxon Mailing Address PO Box 9721 City Macon State GA Zip Code 31297-9721 Purpose of Disbursement Gasoline Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629320 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 8	Amount of Each Disbursement this Period 247.39 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Deana Watts Mailing Address 107 Juniper St City Lake Jackson State TX Zip Code 77566 Purpose of Disbursement Salaries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629321 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 8	Amount of Each Disbursement this Period 633.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

883.85

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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Paypal Mailing Address PO Box 45950 City Omaha State NE Zip Code 68145 Purpose of Disbursement Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629259 Date of Disbursement 09 / 29 / 2008 Amount of Each Disbursement this Period 2.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Chase Visa Mailing Address PO Box 52064 City Phoenix State AZ Zip Code 85072-2064 Purpose of Disbursement Credit Card Payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629355 Date of Disbursement 09 / 30 / 2008 Amount of Each Disbursement this Period 1090.47 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ITEMIZATION BELOW
C.	Full Name (Last, First, Middle Initial) ExxonMobil Mailing Address 627 Oyster Creek Dr City Lake Jackson State TX Zip Code 77566 Purpose of Disbursement Gasoline Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629355-001 Date of Disbursement 08 / 26 / 2008 Amount of Each Disbursement this Period 46.17 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

SUBTOTAL of Disbursements This Page (optional) ▶

1092.60

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) Buc'ees Mailing Address 899 Oyster Creek City Lake Jackson State TX Zip Code 77566 Purpose of Disbursement Gasoline Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629355-002 Date of Disbursement 08 / 26 / 2008 Amount of Each Disbursement this Period 44.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
B.	Full Name (Last, First, Middle Initial) The Kroger Company Mailing Address 101 Dixie Dr City Clute State TX Zip Code 77531 Purpose of Disbursement Gasoline Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629355-005 Date of Disbursement 08 / 30 / 2008 Amount of Each Disbursement this Period 62.12 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
C.	Full Name (Last, First, Middle Initial) ExxonMobil Mailing Address 627 Oyster Creek Dr City Lake Jackson State TX Zip Code 77566 Purpose of Disbursement Gasoline Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0629355-006 Date of Disbursement 08 / 30 / 2008 Amount of Each Disbursement this Period 21.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) ExxonMobil	Transaction ID: 0629355-007 Date of Disbursement 08 / 30 / 2008
	Mailing Address 627 Oyster Creek Dr	Amount of Each Disbursement this Period 40.21
	City Lake Jackson State TX Zip Code 77566	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
	Purpose of Disbursement Gasoline Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Tractor Supply Co.	Transaction ID: 0629355-008 Date of Disbursement 09 / 01 / 2008
	Mailing Address 203 Hwy 332 W	Amount of Each Disbursement this Period 64.91
	City Lake Jackson State TX Zip Code 77566	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
	Purpose of Disbursement Supplies Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) El Toro's	Transaction ID: 0629355-009 Date of Disbursement 08 / 31 / 2008
	Mailing Address 120 Commerce St	Amount of Each Disbursement this Period 95.85
	City Clute State TX Zip Code 77531	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO
	Purpose of Disbursement Food Expense Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

A.

Full Name (Last, First, Middle Initial)
El Toro's

Mailing Address 120 Commerce St

City Clute State TX Zip Code 77531

Purpose of Disbursement

Food Expense

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629355-012

Date of Disbursement

09 / 05 / 2008

Amount of Each Disbursement this Period

288.78

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

[MEMO ITEM]
MEMO

B.

Full Name (Last, First, Middle Initial)
Buc'ees

Mailing Address 899 Oyster Creek

City Lake Jackson State TX Zip Code 77566

Purpose of Disbursement

Gasoline

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629355-013

Date of Disbursement

09 / 10 / 2008

Amount of Each Disbursement this Period

75.04

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

[MEMO ITEM]
MEMO

C.

Full Name (Last, First, Middle Initial)
El Toro's

Mailing Address 120 Commerce St

City Clute State TX Zip Code 77531

Purpose of Disbursement

Food Expense

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629253

Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

79.90

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

SUBTOTAL of Disbursements This Page (optional)

79.90

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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) CIC Solutions, Ltd.</p> <p>Mailing Address 3313 Wyndham Cir #3220</p> <p>City Alexandria State VA Zip Code 22302</p> <p>Purpose of Disbursement Political Consultant Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629323 Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 1350.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Internal Revenue Service</p> <p>Mailing Address Service Center</p> <p>City Austin State TX Zip Code 73301</p> <p>Purpose of Disbursement Payroll Tax Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629316 Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 362.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) F.R.E.E.</p> <p>Mailing Address 837 W Plantation Dr</p> <p>City Clute State TX Zip Code 77531</p> <p>Purpose of Disbursement Rent Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629252 Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3212.81

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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Valori Pyeatt</p> <p>Mailing Address 504 Brazoria Rd</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Salaries</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629317</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 1182.04</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) David Morris</p> <p>Mailing Address Rt 1 Box 1711</p> <p>City Brazoria State TX Zip Code 77422</p> <p>Purpose of Disbursement Salaries</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629318</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 400.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Laine Melton</p> <p>Mailing Address 142 Oyster Creek Dr #7</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Salaries</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629319</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 211.21</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1793.25

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 84 / 92

<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)
Committee to Re-Elect Ron Paul

A.

Full Name (Last, First, Middle Initial)
Paypal

Transaction ID: 0629258

Date of Disbursement

Mailing Address PO Box 45950

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	8

City Omaha State NE Zip Code 68145

Amount of Each Disbursement this Period

4.07

Purpose of Disbursement
Service Charge

001

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)

4.07

TOTAL This Period (last page this line number only)

88018.37

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Victoria Shrine Club</p> <p>Mailing Address PO Box 3016</p> <p>City Victoria State TX Zip Code 77903</p> <p>Purpose of Disbursement Sponsorship Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629170 Date of Disbursement 07 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 240.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Brazoswood Baseball, Inc.</p> <p>Mailing Address PO Box 5</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Sponsorship Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629139 Date of Disbursement 07 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Campaign for Liberty, Inc.</p> <p>Mailing Address PO Box 104</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629385 Date of Disbursement 07 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 100000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ►

100490.00

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 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)
Committee to Re-Elect Ron Paul

A.	Full Name (Last, First, Middle Initial) The Brazosport United <hr/> Mailing Address PO Box 3244 <hr/> City Freeport State TX Zip Code 77541 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 0629129 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 100.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Michigan Liberty Club <hr/> Mailing Address 46116 Lookout Dr <hr/> City Macomb State MI Zip Code 48044 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 0629106 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 495.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Friends of Galen Johnson <hr/> Mailing Address 27203 Eagle Ct <hr/> City Chesterfield Twp State MI Zip Code 48051 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 0629107 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 495.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	1090.00
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 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)
Committee to Re-Elect Ron Paul

A.

Full Name (Last, First, Middle Initial)
Matt Chancey for PSC

Mailing Address PO Box 397

City Chelsea State AL Zip Code 35043

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629108
Date of Disbursement

07 / 29 / 2008

Amount of Each Disbursement this Period

2000.00

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

B.

Full Name (Last, First, Middle Initial)
Joe Dumas for School Board

Mailing Address 1111 James Blvd

City Signal Mountain State TN Zip Code 37377

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629112
Date of Disbursement

07 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

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

C.

Full Name (Last, First, Middle Initial)
Rob Alexander in Utah

Mailing Address 443 Brandt Ct #10

City Salt Lake City State UT Zip Code 84107

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629116
Date of Disbursement

07 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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 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)
Committee to Re-Elect Ron Paul

A.

Full Name (Last, First, Middle Initial)
Gregg Juster for School Board

Mailing Address 55 E Main St #304

City State Zip Code
Chattanooga TN 37408

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629119
Date of Disbursement

07 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

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

B.

Full Name (Last, First, Middle Initial)
Committee to Elect Delavar for Congress

Mailing Address PO Box 1185

City State Zip Code
Washougal WA 98671

Purpose of Disbursement
Federal Contribution

Candidate Name
Michael Delavar

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: WA District: 03

Transaction ID: 0629126
Date of Disbursement

07 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

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

C.

Full Name (Last, First, Middle Initial)
Lawson for Congress

Mailing Address 113 Lulworth Ct

City State Zip Code
Cary NC 27519

Purpose of Disbursement
Federal Contribution

Candidate Name
William Lawson

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NC District: 04

Transaction ID: 0629127
Date of Disbursement

07 / 29 / 2008

Amount of Each Disbursement this Period

2000.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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 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)
Committee to Re-Elect Ron Paul

<p>A. Full Name (Last, First, Middle Initial) Goldthorpe for Congress</p> <p>Mailing Address PO Box 491</p> <p>City Curtis State MI Zip Code 49820</p> <p>Purpose of Disbursement Federal Contribution</p> <p>Candidate Name Linda Goldthorpe</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District: 01</p> <p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629128</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <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="2000.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Palacios Library</p> <p>Mailing Address 326 Main St</p> <p>City Palacios State TX Zip Code 77465</p> <p>Purpose of Disbursement Sponsorship</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: 2008</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629243</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <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="500.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Campaign for Liberty, Inc.</p> <p>Mailing Address PO Box 104</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Contribution</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: 2008</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629386</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <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="250000.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="252500.00"/></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)

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

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NAME OF COMMITTEE (In Full)
Committee to Re-Elect Ron Paul

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Campaign for Liberty, Inc.</p> <p>Mailing Address PO Box 104</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629387 Date of Disbursement 08 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 250000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Campaign for Liberty, Inc.</p> <p>Mailing Address PO Box 104</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629388 Date of Disbursement 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 200000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Campaign for Liberty, Inc.</p> <p>Mailing Address PO Box 104</p> <p>City Lake Jackson State TX Zip Code 77566</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0629389 Date of Disbursement 09 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 250000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

700000.00

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 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)
Committee to Re-Elect Ron Paul

A.

Full Name (Last, First, Middle Initial)
Interfaith Caring Ministries

Mailing Address 631 FM 270

City League City State TX Zip Code 77573

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629333

Date of Disbursement

09 / 24 / 2008

Amount of Each Disbursement this Period

250.00

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

B.

Full Name (Last, First, Middle Initial)
Lordstown High School

Mailing Address 1824 Salt Springs Rd

City Warren State OH Zip Code 44481

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629344

Date of Disbursement

09 / 24 / 2008

Amount of Each Disbursement this Period

200.00

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

C.

Full Name (Last, First, Middle Initial)
Freeport Explorer Post

Mailing Address 430 N Brazosport Blvd

City Freeport State TX Zip Code 77541

Purpose of Disbursement
Sponsorship

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0629345

Date of Disbursement

09 / 24 / 2008

Amount of Each Disbursement this Period

250.00

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

SUBTOTAL of Disbursements This Page (optional)

700.00

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 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)
Committee to Re-Elect Ron Paul

A. Full Name (Last, First, Middle Initial)
Brazoria County Republican Party

Mailing Address 608 N Front St

City Angleton State TX Zip Code 77515

Purpose of Disbursement Sponsorship
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0629328
Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

500.00

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

B. Full Name (Last, First, Middle Initial)
Clear Lake Area Chamber of Commerce

Mailing Address 1201 E NASA Pkwy

City Houston State TX Zip Code 77058-3391

Purpose of Disbursement Sponsorship
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0629256
Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

300.00

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

C. Full Name (Last, First, Middle Initial)
Wharton Rotary Club

Mailing Address PO Box 303

City Wharton State TX Zip Code 77488

Purpose of Disbursement Sponsorship
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 0629315
Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

120.00

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

SUBTOTAL of Disbursements This Page (optional) ►

920.00

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

1063700.00