

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
WALTER JONES COMMITTEE 2006

ADDRESS (number and street) PO BOX 99667
 Check if different than previously reported. (ACC)
RALEIGH NC 27624

2. **FEC IDENTIFICATION NUMBER** C00305052
IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
RALEIGH NC 27624 NC 03

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

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

5. Covering Period 04 17 2008 through 06 30 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Mrs. Joan E. Beall

Signature of Treasurer Electronically Filed by Mrs. Joan E. Beall Date 07 09 2008

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

WALTER JONES COMMITTEE 2006

Report Covering the Period: From:

M	M
0	4

D	D
1	7

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

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)).....	97865.00	533804.63
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	97865.00	533804.63
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	95670.56	777173.30
(b) Total Offsets to Operating Expenditures (from Line 14).....	1500.00	2933.54
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	94170.56	774239.76
8. Cash on Hand at Close of Reporting Period (from Line 27).....	45784.50	
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).....	32720.64	

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

Write or Type Committee Name
WALTER JONES COMMITTEE 2006

Report Covering the Period: From:

M	M
0	4

D	D
1	7

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

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	29350.00	188267.96
(i) Itemized (use Schedule A).....	3315.00	30245.00
(ii) Unitemized.....	32665.00	218512.96
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	65200.00	315291.67
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	97865.00	533804.63
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	1500.00	2933.54
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	1271.24
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	99365.00	538009.41

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	95670.56	777173.30
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	2000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	95670.56	779173.30

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	42090.06
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	99365.00
25. SUBTOTAL (add Line 23 and Line 24).....	141455.06
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	95670.56
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	45784.50

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 / 66
	<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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Mr. Thomas H. Andrews	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address	Transaction ID: SA11AI.23351
	City State Zip Code	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer House of Representatives	Occupation Staff	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Mr. William Joseph Austin, Jr.	Date of Receipt MM / DD / YYYY 06 / 25 / 2008
	Mailing Address 204 Hillcrest Road	Transaction ID: SA11AI.23525
	City State Zip Code New Bern NC 28562	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Ward & Smith	Occupation Attorney	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Mr. Ben F. Barber	Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address PO Box 1416	Transaction ID: SA11AI.23334
	City State Zip Code Jacksonville NC 28541	Amount of Each Receipt this Period 700.00
	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 Furniture Fair	Occupation Business Owner	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional)	▶	1450.00
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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one) <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 6 / 66
---	--	-------------

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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
Mrs. H. L. Barnhill

Mailing Address 302 East Woodlawn Drive

City State Zip Code
Williamston NC 27892

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **1000.00**

Date of Receipt **06 / 30 / 2008**

Transaction ID: SA11AI.23546

Amount of Each Receipt this Period **1000.00**

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

B. Full Name (Last, First, Middle Initial)
Ms. Kathryn Bell

Mailing Address 669 Rockledge Court

City State Zip Code
Frisco TX 75034

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **1000.00**

Date of Receipt **06 / 14 / 2008**

Transaction ID: SA11AI.23504

Amount of Each Receipt this Period **1000.00**

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

C. Full Name (Last, First, Middle Initial)
Mr. John J. Callahan

Mailing Address 637 Baylor Road

City State Zip Code
Glen Burnie MD 21061

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **300.00**

Date of Receipt **05 / 06 / 2008**

Transaction ID: SA11AI.23360

Amount of Each Receipt this Period **300.00**

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

SUBTOTAL of Receipts This Page (optional) **2300.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
Mr. Daniel Cohen

Mailing Address **PO Box 555**

City **Cape May** State **NJ** Zip Code **08204**

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

Name of Employer **Atlantic Capes Fisheries** Occupation **Sales**

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **500.00**

Date of Receipt **04 / 25 / 2008**
Transaction ID: SA11AI.23305
 Amount of Each Receipt this Period **500.00**

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

B. Full Name (Last, First, Middle Initial)
Mr. Louis R. Colombo

Mailing Address **408 Rockledge Road**

City **New Bern** State **NC** Zip Code **28562**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **300.00**

Date of Receipt **04 / 25 / 2008**
Transaction ID: SA11AI.23275
 Amount of Each Receipt this Period **200.00**

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

C. Full Name (Last, First, Middle Initial)
Mr. Donald Deichmann, Jr.

Mailing Address **PO BOx 1310**

City **New Bern** State **NC** Zip Code **28563**

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

Name of Employer **Trent Cadillac** Occupation **Car Dealership**

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **500.00**

Date of Receipt **06 / 28 / 2008**
Transaction ID: SA11AI.23541
 Amount of Each Receipt this Period **500.00**

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

SUBTOTAL of Receipts This Page (optional) ► **1200.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
Mr. G. L. Deichmann

Mailing Address PO Box 1310

City State Zip Code
New Bern NC 28560

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

Name of Employer Occupation
Trent Olds & Cadillac Auto Dealer

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

Date of Receipt
MM / DD / YYYY
06 / 25 / 2008

Transaction ID: SA11AI.23523

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Peter Denker

Mailing Address 4509 Valley Ridge Road

City State Zip Code
Dallas TX 75220

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

Name of Employer Occupation
Enceladus Inv. Management Portfolio Manager

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

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

Transaction ID: SA11AI.23406

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Mr. J. Brad Edwards

Mailing Address 2422 Taylor Avenue

City State Zip Code
Alexandria VA 22302

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

Name of Employer Occupation
Jenkins Hill Group, LLC Principal

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

Date of Receipt
MM / DD / YYYY
06 / 11 / 2008

Transaction ID: SA11AI.23491

Amount of Each Receipt this Period
500.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 66
(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)
WALTER JONES COMMITTEE 2006

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

Mailing Address **4104 Hardwick Court**

City **Greenville** State **NC** Zip Code **27834**

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

Name of Employer **Self Employed** Occupation **Business Owner**

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Date of Receipt **05 / 06 / 2008**
Transaction ID: SA11AI.23377
 Amount of Each Receipt this Period **250.00**

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

B. Full Name (Last, First, Middle Initial)
Mr. Alan Glass

Mailing Address **118 Allerton Road**

City **Nedwton** State **MA** Zip Code **02461**

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

Name of Employer **CIRCOR International, Inc.** Occupation **Executive**

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **500.00**

Date of Receipt **05 / 09 / 2008**
Transaction ID: SA11AI.23387
 Amount of Each Receipt this Period **500.00**

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

C. Full Name (Last, First, Middle Initial)
Ms. Katherine M. Hahn

Mailing Address **4548 Sawgrass Court**

City **Alexandri** State **VA** Zip Code **22312**

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Date of Receipt **04 / 30 / 2008**
Transaction ID: SA11AI.23338
 Amount of Each Receipt this Period **250.00**

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 66
	<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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Mr. David A. Hartman		Date of Receipt
	Mailing Address 10711 Burnet Road, Suite 330		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 25 / 2008
	City	State	Zip Code
	Austin	TX	78758
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.23516
Name of Employer Hartman & Associates, Inc.		Occupation Chairman	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
			<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) Mr. Mark A. Holmes		Date of Receipt
	Mailing Address 900 Chesapeake Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 25 / 2008
	City	State	Zip Code
	Greenville	NC	27858
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.23528
Name of Employer Select Bank & Trust Company		Occupation Bank President	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
			<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) Mr. John A. Jenkins		Date of Receipt
	Mailing Address 3885 River Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 04 / 2008
	City	State	Zip Code
	Vanceboro	NC	26586
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.23467
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1050.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 66
	<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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Mrs. Julia Jenkins		Date of Receipt MM / DD / YYYY 06 / 04 / 2008
	Mailing Address 3885 River Road		Transaction ID: SA11AI.23468
	City Vanceboro	State NC	Zip Code 28586
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer Homemaker	Occupation Homemaker	<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 ▼ 900.00		

B.	Full Name (Last, First, Middle Initial) Ms. Iris Lee Jones		Date of Receipt MM / DD / YYYY 06 / 11 / 2008
	Mailing Address 2018 Hydes Corner		Transaction ID: SA11AI.23473
	City New Bern	State NC	Zip Code 28562
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer Homemaker	Occupation Homemaker	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00		

C.	Full Name (Last, First, Middle Initial) Mr. Patrick P. Joyce		Date of Receipt MM / DD / YYYY 06 / 25 / 2008
	Mailing Address 715 Comet Drie		Transaction ID: SA11AI.23526
	City Beaufort	State NC	Zip Code 28516
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer L A Downy & Son	Occupation Business Owner	<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)	▶	1400.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
Mr. Arthur H. Keeney, III

Mailing Address Post Office Bos 157

City State Zip Code
Engelhard NC 27824

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

Name of Employer Occupation
The East Carolina Bank Banker

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.23295

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Mr. William Lane

Mailing Address 2307 Salem Church Road

City State Zip Code
Goldsboro NC 27530

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

Name of Employer Occupation
Self Real Estate Development

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.23422

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Mr. Rick E. Marks

Mailing Address 11988 Sentinel Point Court

City State Zip Code
Reston VA 20191

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

Name of Employer Occupation
Hoffman, Silver, Gilman & Blas Lobbist

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.23317

Amount of Each Receipt this Period
500.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
Mr. Karl R. Martin

Mailing Address 1000 Morris Marina Road

City State Zip Code
Atlantic NC 28511

FEC ID number of contributing federal political committee. C

Name of Employer: Morris Marina Kabin Kamps & Fe Occupation: CEO

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt: M M / D D / Y Y Y Y
04 / 30 / 2008

Transaction ID: SA11AI.23402

Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Sam A. McConkey, Jr.

Mailing Address Post Office Box 189

City State Zip Code
Morehead City NC 28557

FEC ID number of contributing federal political committee. C

Name of Employer: Self Employed Occupation: Attorney

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt: M M / D D / Y Y Y Y
06 / 30 / 2008

Transaction ID: SA11AI.23544

Amount of Each Receipt this Period: 500.00

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

C. Full Name (Last, First, Middle Initial)
Mr. J. Ronald McElhenny

Mailing Address 259 Western Boulevard

City State Zip Code
Jacksonville NC 28546

FEC ID number of contributing federal political committee. C

Name of Employer: Jones-Onslow EMC Occupation: Executive VP

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt: M M / D D / Y Y Y Y
05 / 28 / 2008

Transaction ID: SA11AI.23446

Amount of Each Receipt this Period: 1000.00

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

SUBTOTAL of Receipts This Page (optional) 2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 66
(check only one)

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

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

NAME OF COMMITTEE (In Full)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
Mr. Raymond J. McGrath

Mailing Address 1714 Esquire Lane

City State Zip Code
McLean VA 22101

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

Name of Employer Downey McGrath Group Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: SA11AI.23289

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Mrs. Judith H. Miller

Mailing Address PO Box 1706

City State Zip Code
Greenville NC 27835

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: SA11AI.23221

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Mr. William C. Monk

Mailing Address 4628 West Church Street

City State Zip Code
Rarrrville NC 27828

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.23521

Amount of Each Receipt this Period
1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Mr. William Crawford Moore, Jr.	Date of Receipt MM / DD / YYYY 05 / 21 / 2008
	Mailing Address 619 Kershaw Street	Transaction ID: SA11AI.23434
	City State Zip Code Cheraw SC 29520	Amount of Each Receipt this Period 750.00
	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 Chesterfield County Council Elected Official Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	750.00

B.	Full Name (Last, First, Middle Initial) Mr. Kenneth E. Morris, Jr.	Date of Receipt MM / DD / YYYY 04 / 26 / 2008
	Mailing Address Post Office Drawer 550	Transaction ID: SA11AI.23283
	City State Zip Code New Bern NC 28563	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Self Employed Insurance Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2300.00

C.	Full Name (Last, First, Middle Initial) Mr. Kenneth E. Morris, Jr.	Date of Receipt MM / DD / YYYY 04 / 26 / 2008
	Mailing Address Post Office Drawer 550	Transaction ID: SA11AI.23410
	City State Zip Code New Bern NC 28563	Amount of Each Receipt this Period 700.00
	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 Self Employed Insurance Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
Mr. John F. Nash, Jr.
Mailing Address 8404 Carlynn Drive
City Bethesda State MD Zip Code 20817-4306
FEC ID number of contributing federal political committee. **C**
Name of Employer Millikent Company Occupation Washington Counsel
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 04 / 22 / 2008
Transaction ID: SA11AI.23276
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Robert Paul
Mailing Address 1236 Squirrel Hill Avenue
City Pittsburgh State PA Zip Code 15217
FEC ID number of contributing federal political committee. **C**
Name of Employer Buffalo Pumps Occupation CEO
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 05 / 09 / 2008
Transaction ID: SA11AI.23381
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Donald D. Pollock
Mailing Address PO Box 3342
City Kinston State NC Zip Code 28502
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt 06 / 25 / 2008
Transaction ID: SA11AI.23530
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2100.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
Mr. Jeffrey B. Reichle

Mailing Address 4045 Bayshore Road

City State Zip Code
Cape May NJ 08204

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

Name of Employer Occupation
Lund's Fisheries Owner

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

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.23303

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Timothy R. Rupli

Mailing Address 1938 Great Falls Street

City State Zip Code
McLean VA 22101

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

Name of Employer Occupation
R. Duffy Wall & Assocl Sr. VP

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

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.23231

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 169 Lake Pine Road

City State Zip Code
Mooreville NC 28117

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.23506

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
Mr. James T. Schollaert

Mailing Address 2256 North Upton Street

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
Susan Carr & Associates Lobbyist

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

Date of Receipt
MM / DD / YYYY
04 / 25 / 2008

Transaction ID: SA11AI.23307

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Rhod M. Shaw

Mailing Address 230 West Windsor Avenue

City State Zip Code
Alexandria VA 22301

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

Name of Employer Occupation
Alpine Group Government Relations

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

Date of Receipt
MM / DD / YYYY
04 / 25 / 2008

Transaction ID: SA11AI.23273

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Mrs. Laura R. Towarnicky

Mailing Address 212 Barkside Lane

City State Zip Code
New Bern NC 28562

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

Name of Employer Occupation
Homemaker Homemaker

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

Date of Receipt
MM / DD / YYYY
04 / 30 / 2008

Transaction ID: SA11AI.23328

Amount of Each Receipt this Period
1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
Dr. Michael R. Towarnicky

Mailing Address 212 Barkside Lane

City State Zip Code
New Bern NC 28562

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

Name of Employer Self Occupation
Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.23329

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Caren Z. Turner

Mailing Address 16 Willow Lane

City State Zip Code
Tenafly NJ 07670-2808

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

Name of Employer Self Employed Occupation
Government & Public Affairs

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.23495

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Ms. Lori M. Wallach

Mailing Address 1739 Hobart Street

City State Zip Code
Washington DC 20009

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

Name of Employer Public Citizen Occupation
Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.23301

Amount of Each Receipt this Period
500.00

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

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

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

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

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

FOR LINE NUMBER: PAGE 20 / 66
(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)
WALTER JONES COMMITTEE 2006

A.

Full Name (Last, First, Middle Initial)
Mr. John P. Winburn

Mailing Address 428 New Jersey Avenue, SE

City State Zip Code
Washington DC 20003

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

Name of Employer Requested Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
04 / 28 / 2008

Transaction ID: SA11AI.23294

Amount of Each Receipt this Period
1000.00

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

B.

Full Name (Last, First, Middle Initial)
Ms. Lillian C. Woo

Mailing Address 1504 East 31st Street

City State Zip Code
Bryan TX 77802

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

Name of Employer Self Occupation
Writer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1300.00

Date of Receipt
MM / DD / YYYY
05 / 06 / 2008

Transaction ID: SA11AI.23357

Amount of Each Receipt this Period
1300.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2300.00
TOTAL This Period (last page this line number only)	▶	29350.00

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

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

FOR LINE NUMBER: PAGE 21 / 66

(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)
WALTER JONES COMMITTEE 2006

A.

Full Name (Last, First, Middle Initial)
ACP-RXPAC

Mailing Address 122 C ST NW SUITE 500

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00418855

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 25 / 2008

Transaction ID: SA11C.23518

Amount of Each Receipt this Period

500.00

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

B.

Full Name (Last, First, Middle Initial)
AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLACPAC

Mailing Address WORLDWIDE HEADQUARTERS

City State Zip Code
COLUMBUS GA 31999

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt

M M / D D / Y Y Y Y
04 / 26 / 2008

Transaction ID: SA11C.23281

Amount of Each Receipt this Period

1000.00

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

C.

Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-PAC)

Mailing Address 222 S PROSPECT AVENUE
C/O FINANCE DEPT

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 15 / 2008

Transaction ID: SA11C.23425

Amount of Each Receipt this Period

1000.00

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

SUBTOTAL of Receipts This Page (optional) ▶

2500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 66
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-BANKPAC)	Date of Receipt
	Mailing Address 222 S PROSPECT AVENUE C/O FINANCE DEPT	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City State Zip Code PARK RIDGE IL 60068	Transaction ID: SA11C.23549
	FEC ID number of contributing federal political committee. <input type="text" value="C00173153"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
	Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼ <input type="text" value="3000.00"/>		

B.	Full Name (Last, First, Middle Initial) AMERICAN BANKERS ASSOCIATION BANKPAC	Date of Receipt
	Mailing Address 1120 CONN. AVE., NW SUITE 851	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City State Zip Code WASHINGTON DC 20036	Transaction ID: SA11C.23286
	FEC ID number of contributing federal political committee. <input type="text" value="C00004275"/>	Amount of Each Receipt this Period <input type="text" value="4000.00"/>
	Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼ <input type="text" value="10000.00"/>		

C.	Full Name (Last, First, Middle Initial) AMERICAN DENTAL POLITICAL ACTION COMMITTEE	Date of Receipt
	Mailing Address 1111 14TH STREET, NW, 11TH FLOOR	<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City State Zip Code WASHINGTON DC 20005	Transaction ID: SA11C.23519
	FEC ID number of contributing federal political committee. <input type="text" value="C00000729"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
	Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼ <input type="text" value="4000.00"/>		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 23 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
AMERICAN MARITIME OFFICERS, AFL-CIO VOLUNTARY POLITICAL ACTION FUND
Mailing Address 650 4TH AVE.
City State Zip Code
BROOKLYN NY 11232
FEC ID number of contributing federal political committee. **C** C00027532
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
0 5 / 2 8 / 2 0 0 8
Transaction ID: SA11C.23444
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
AMERICAN PODIATRIC MEDICAL ASSOCIATION INC PODIATRY POLITICAL ACTION COMMITTEE
Mailing Address 9312 OLD GEORGETOWN ROAD
City State Zip Code
BETHESDA MD 20814
FEC ID number of contributing federal political committee. **C** C00008839
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 0 8
Transaction ID: SA11C.23228
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)
Mailing Address 175 E. Houston Street
Room 7-A-50
City State Zip Code
San Antonio TX 78205
FEC ID number of contributing federal political committee. **C** C00109017
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 8
Transaction ID: SA11C.23270
Amount of Each Receipt this Period
2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
BACHUS FOR CONGRESS

Mailing Address P O BOX 59444

City State Zip Code
BIRMINGHAM AL 35259

FEC ID number of contributing federal political committee. **C** C00260547

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 1 7 / 2 0 0 8

Transaction ID: SA11C.23229

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
BANK OF AMERICA CORPORATION POLITICAL ACTION COMMITTEE OF FLORIDA

Mailing Address 730 15th Street, NW, Fifth Floor

City State Zip Code
Washington CA 20005

FEC ID number of contributing federal political committee. **C** C00094656

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11C.23477

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
BIPARTISAN POLITICAL ACTION COMMITTEE/MELLON FINANCIAL CORPORATION (BIPAC/MFC)

Mailing Address ONE MELLON BANK CENTER

City State Zip Code
PITTSBURGH PA 15258

FEC ID number of contributing federal political committee. **C** C00017558

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 3 / 2 0 0 8

Transaction ID: SA11C.23359

Amount of Each Receipt this Period
2000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 66

(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

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)
WALTER JONES COMMITTEE 2006

A.

Full Name (Last, First, Middle Initial)
BOEING COMPANY POLITICAL ACTION COMMITTEE (BPAC)

Mailing Address 1200 WILSON BLVD

City State Zip Code
ARLINGTON VA 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

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

Transaction ID: SA11C.23426

Amount of Each Receipt this Period

1000.00

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

B.

Full Name (Last, First, Middle Initial)
BRANCH BANKING & TRUST COMPANY PAC

Mailing Address C/O ACCT AND FINANCIAL REPORTING
PO BOX 1290

City State Zip Code
WINSTON-SALEM NC 27102

FEC ID number of contributing federal political committee. **C** C00075291

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11C.23489

Amount of Each Receipt this Period

1000.00

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

C.

Full Name (Last, First, Middle Initial)
BROWN AND COMPANY INC PAC

Mailing Address 600 PENNSYLVANIA AVE SE SUITE 304

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00326405

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11C.23494

Amount of Each Receipt this Period

500.00

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

SUBTOTAL of Receipts This Page (optional) ▶

2500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
BRUNSWICK CORPORATION GOOD GOVERNMENT FUND
Mailing Address 1 N FIELD CT

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing federal political committee. **C** C00110262

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

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

Transaction ID: SA11C.23220

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
BURLINGTON INDUSTRIES GOOD GOVERNMENT COMMITTEE
Mailing Address 3330 WEST FRIENDLY AVENUE

City State Zip Code
GREENSBORO NC 27410

FEC ID number of contributing federal political committee. **C** C00040238

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: SA11C.23216

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
CONOCOPHILLIPS SPIRIT PAC
Mailing Address 1400B Plaza Office Building
1400 B PLAZA OFFICE BUILDING

City State Zip Code
Bartlesville OK 74004

FEC ID number of contributing federal political committee. **C** C00112896

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11C.23497

Amount of Each Receipt this Period
1000.00

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

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

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

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

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

FOR LINE NUMBER: PAGE 27 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
CREDIT UNION LEGISLATIVE ACTION COUNCIL OF CUNA

Mailing Address P O BOX 576

City State Zip Code
WASHINGTON DC 20044

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: SA11C.23443

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
DRIVE - DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUCATION - PAC FOR INT'L BROTH

Mailing Address 25 Louisiana Ave. NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 6 / 2 0 0 8

Transaction ID: SA11C.23353

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)
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION POLITICAL ACTION COMMITTEE (ENGPAC)

Mailing Address 520 S GRAND AVE STE 700

City State Zip Code
LOS ANGELES CA 90071

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

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

Transaction ID: SA11C.23427

Amount of Each Receipt this Period
1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
ERNST & YOUNG POLITICAL ACTION COMMITTEE

Mailing Address 1225 CONNECTICUT AVE NW SUITE 800

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

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

Transaction ID: SA11C.23436

Amount of Each Receipt this Period
1500.00

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

B. Full Name (Last, First, Middle Initial)
EXPERIAN NORTH AMERICA INC. POLITICAL ACTION COMMITTEE (EXPERIAN PAC)

Mailing Address 475 Anton Blvd

City State Zip Code
Costa Mesa CA 92626

FEC ID number of contributing federal political committee. **C** C00379768

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

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

Transaction ID: SA11C.23435

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
FLORIDA CRYSTALS INC PAC

Mailing Address 1420 New York Avenue. NW
Suite 800

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00296624

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11C.23296

Amount of Each Receipt this Period
500.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN

Mailing Address 3190 FAIRVIEW PARK DRIVE

City State Zip Code
FALLS CHURCH VA 22042

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

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

Transaction ID: SA11C.23292

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN

Mailing Address 3190 FAIRVIEW PARK DRIVE

City State Zip Code
FALLS CHURCH VA 22042

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11C.23476

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
GROWTH AND PROSPERITY POLITICAL ACTION COMMITTEE

Mailing Address 1200 Trinity Drive
Suite 300

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00388793

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
0 4 / 1 8 / 2 0 0 8

Transaction ID: SA11C.23224

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) ► 7000.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS OF AMERICA INC POLITICAL ACTION COMMITTEE (INSURANCE)

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

Mailing Address 412 FIRST STREET SE SUITE 300

Transaction ID: SA11C.23272

City WASHINGTON State DC Zip Code 20003

Amount of Each Receipt this Period
1000.00

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 8 / 2 0 0 8

Mailing Address 1750 New York Ave NW

Transaction ID: SA11C.23513

City Washington State DC Zip Code 20006

Amount of Each Receipt this Period
1000.00

FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

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

C. Full Name (Last, First, Middle Initial)
KPMG PARTNERS/PRINCIPALS & EMPLOYEES POLITICAL ACTION COMMITTEE

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

Mailing Address PO BOX 18254

Transaction ID: SA11C.23428

City WASHINGTON State DC Zip Code 20036

Amount of Each Receipt this Period
1000.00

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

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

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 1725 JEFFERSON DAVIS HIGHWAY
CRYSTAL SQUARE TWO SUITE 300

City ARLINGTON State VA Zip Code 22202

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 06 / 18 / 2008
Transaction ID: SA11C.23512
 Amount of Each Receipt this Period 1000.00

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

B. Full Name (Last, First, Middle Initial)
LOWE'S COMPANIES INC. POLITICAL ACTION COMMITTEE

Mailing Address 1000 Lowe's Boulevard

City Mooresville State NC Zip Code 28117

FEC ID number of contributing federal political committee. **C** C00251751

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 05 / 01 / 2008
Transaction ID: SA11C.23371
 Amount of Each Receipt this Period 1000.00

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

C. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 Massachusetts Ave. NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 05 / 06 / 2008
Transaction ID: SA11C.23365
 Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION COMMITTEE

Mailing Address 1605 KING STREET

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00126763

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 8 / 2 0 0 8

Transaction ID: SA11C.23511

Amount of Each Receipt this Period
 1000.00

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

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF FEDERAL CREDIT UNIONS POLITICAL ACTION COMMITTEE (NAFCU)

Mailing Address 3138 N 10TH ST

City State Zip Code
ARLINGTON VA 22201

FEC ID number of contributing federal political committee. **C** C00040659

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: SA11C.23314

Amount of Each Receipt this Period
 1000.00

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

C. Full Name (Last, First, Middle Initial)
NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1850 M Street NW Suite 540

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: SA11C.23225

Amount of Each Receipt this Period
 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
NATIONAL RIFLE ASSOCIATION (INSTITUTE FOR LEGISLATIVE ACTION)
Mailing Address 11250 WAPLES MILL ROAD

City State Zip Code
FAIRFAX VA 22030

FEC ID number of contributing federal political committee. **C** C70000716

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4950.00

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

Transaction ID: SA11C.23321

Amount of Each Receipt this Period
950.00

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

B. Full Name (Last, First, Middle Initial)
NELSON, MULLINS, RILEY & SCARBOROUGH FEDERAL POLITICAL COMMITTEE
Mailing Address 1320 MAIN STREET, 17TH FLOOR
PO BOX 11070

City State Zip Code
COLUMBIA SC 29201

FEC ID number of contributing federal political committee. **C** C00278895

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: SA11C.23331

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
NUCOR CORPORATION POLITICAL ACTION COMMITTEE
Mailing Address 1915 Rexford Road

City State Zip Code
Charlotte NC 28211

FEC ID number of contributing federal political committee. **C** C00379628

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: SA11C.23366

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional) ► **3450.00**

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 34 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
PROGRESS ENERGY EMPLOYEES' FEDERAL PAC

Mailing Address 411 FAYETTEVILLE ST PEB 15B5

City State Zip Code
RALEIGH NC 27602

FEC ID number of contributing federal political committee. **C** C00091884

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

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

Transaction ID: SA11C.23322

Amount of Each Receipt this Period
3000.00

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

B. Full Name (Last, First, Middle Initial)
RENT-A-CENTER, INC. GOOD GOVERNMENT POLITICAL ACTION COMMITTEE

Mailing Address 5501 Headquarters Dr.
Floor 3

City State Zip Code
Plano TX 75024

FEC ID number of contributing federal political committee. **C** C00410324

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: SA11C.23312

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
SCIENCE APPLICATIONS INTERNATIONAL CORPORATION VOLUNTARY POLITICAL ACTION COMMITTEE

Mailing Address 10010 CAMPUS POINT DRIVE F2

City State Zip Code
SAN DIEGO CA 92121

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 6 / 2 0 0 8

Transaction ID: SA11C.23285

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **5000.00**

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 35 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
SERVICE EMPLOYEES INTERNATIONAL UNION

Mailing Address 1313 L STREET NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C70003124

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
 0 5 / 0 6 / 2 0 0 8

Transaction ID: SA11C.23355

Amount of Each Receipt this Period
5000.00

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

B. Full Name (Last, First, Middle Initial)
TREA SENIOR CITIZENS LEAGUE INC POLITICAL ACTION COMMITTEE (TSCL-PAC)

Mailing Address 909 N WASHINGTON STREET SUITE 300

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00327064

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
 0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11C.23493

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
U S IMMIGRATION REFORM PAC

Mailing Address 2700 35th Place

City State Zip Code
Washington DC 20007

FEC ID number of contributing federal political committee. **C** C00253906

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: SA11C.23323

Amount of Each Receipt this Period
1000.00

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

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

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

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

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

FOR LINE NUMBER: PAGE 36 / 66
(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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial)
WACHOVIA BANK N A NORTH CAROLINA EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 100 NORTH MAIN STREET

City State Zip Code
WINSTON-SALEM NC 27150

FEC ID number of contributing federal political committee. **C** C00282103

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: SA11C.23227

Amount of Each Receipt this Period
 1000.00

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

B. Full Name (Last, First, Middle Initial)
WACHOVIA CORPORATION EMPLOYEES GOOD GOVERNMENT FEDERAL FUND I

Mailing Address 301 S College St
Attention: Brenda Bradley

City State Zip Code
Charlotte NC 28288

FEC ID number of contributing federal political committee. **C** C00012518

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: SA11C.23369

Amount of Each Receipt this Period
 1000.00

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

C. Full Name (Last, First, Middle Initial)
WOMBLE CARLYLE SANDRIDGE AND RICE PLLC POLITICAL ACTION COMMITTEE (WOMBLE CARLYLE SANDRIDGE AND RICE)

Mailing Address ONE WEST FOURTH STREET

City State Zip Code
WINSTON-SALEM NC 27101

FEC ID number of contributing federal political committee. **C** C00417386

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 8

Transaction ID: SA11C.23423

Amount of Each Receipt this Period
 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 3000.00

TOTAL This Period (last page this line number only) ► 65200.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 37 / 66
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input checked="" type="checkbox"/> 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) WALTER JONES COMMITTEE 2006
--

A.	Full Name (Last, First, Middle Initial) National Research, Inc.	Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 8 / 2 0 0 8
	Mailing Address 146 State Highway 34 Suite 250	Transaction ID: SA14.23457
	City State Zip Code Holmdel NJ 07733	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. C	Refund of Overpayment <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation	
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00

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

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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Adfero Group Mailing Address 1140 Connecticut Avenue, NW, Suite610 City Washington State DC Zip Code 20003 Purpose of Disbursement Fundraising commission Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23268 Date of Disbursement 04 / 25 / 2008 Amount of Each Disbursement this Period 11.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Adfero Group Mailing Address 1140 Connecticut Avenue, NW, Suite610 City Washington State DC Zip Code 20003 Purpose of Disbursement Fundraising Commission Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23400 Date of Disbursement 05 / 02 / 2008 Amount of Each Disbursement this Period 105.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Adfero Group Mailing Address 1140 Connecticut Avenue, NW, Suite610 City Washington State DC Zip Code 20003 Purpose of Disbursement Fundraising Commission Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23398 Date of Disbursement 05 / 09 / 2008 Amount of Each Disbursement this Period 123.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	240.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Adfero Group	Transaction ID: SB17.23466 Date of Disbursement 06 / 03 / 2008
	Mailing Address 1140 Connecticut Avenue, NW, Suite610	Amount of Each Disbursement this Period 4.00
	City Washington State DC Zip Code 20003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Commission 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) ▼
		003 Category/Type

B.	Full Name (Last, First, Middle Initial) Adfero Group	Transaction ID: SB17.23484 Date of Disbursement 06 / 11 / 2008
	Mailing Address 1140 Connecticut Avenue, NW, Suite610	Amount of Each Disbursement this Period 2.50
	City Washington State DC Zip Code 20003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Commission 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) ▼
		003 Category/Type

C.	Full Name (Last, First, Middle Initial) Adfero Group	Transaction ID: SB17.23503 Date of Disbursement 06 / 14 / 2008
	Mailing Address 1140 Connecticut Avenue, NW, Suite610	Amount of Each Disbursement this Period 61.00
	City Washington State DC Zip Code 20003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Commission 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) ▼
		003 Category/Type

SUBTOTAL of Disbursements This Page (optional)	▶	67.50
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Adfero Group Mailing Address 1140 Connecticut Avenue, NW, Suite610 City Washington State DC Zip Code 20003 Purpose of Disbursement Fundraising Commission 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: SB17.23540 Date of Disbursement 06 / 28 / 2008	Amount of Each Disbursement this Period 31.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Advantage, Inc. Mailing Address 2300 ClaredonBlvd., Suite 1004 City Arlington State VA Zip Code 22201 Purpose of Disbursement Advertising - Calls Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23234 Date of Disbursement 04 / 17 / 2008	Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Advantage, Inc. Mailing Address 2300 ClaredonBlvd., Suite 1004 City Arlington State VA Zip Code 22201 Purpose of Disbursement Poll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23346 Date of Disbursement 05 / 05 / 2008	Amount of Each Disbursement this Period 4000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

7031.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 41 / 66

<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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) American Legion-Nash Post #8 Mailing Address 224 D Street, SE City Washington State DC Zip Code 20003 Purpose of Disbursement Event Location/Beverages Candidate Name 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: SB17.23416 Date of Disbursement 05 / 14 / 2008 Amount of Each Disbursement this Period 505.69 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) American Legion-Nash Post #8 Mailing Address 224 D Street, SE City Washington State DC Zip Code 20003 Purpose of Disbursement Event Deposit Candidate Name 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: SB17.23438 Date of Disbursement 05 / 21 / 2008 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) ASAP Direct Mail, Inc. Mailing Address 2424 Atlantic Avenue City Raleigh State NC Zip Code 27604 Purpose of Disbursement Clean Data Files Candidate Name 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: SB17.23454 Date of Disbursement 05 / 28 / 2008 Amount of Each Disbursement this Period 100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1105.69

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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB17.23260 Date of Disbursement 04 / 30 / 2008
	Mailing Address Post Office Box 9001309	Amount of Each Disbursement this Period 57.01
	City Louisville State KY Zip Code 40290-1309	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Candidate Name Category/Type 001	
	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:	

B.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB17.23461 Date of Disbursement 06 / 04 / 2008
	Mailing Address Post Office Box 9001309	Amount of Each Disbursement this Period 95.72
	City Louisville State KY Zip Code 40290-1309	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Candidate Name Category/Type 001	
	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:	

C.	Full Name (Last, First, Middle Initial) BACHUS FOR CONGRESS	Transaction ID: SB17.23230 Date of Disbursement 04 / 17 / 2008
	Mailing Address P O BOX 59444	Amount of Each Disbursement this Period 250.00
	City BIRMINGHAM State AL Zip Code 35259	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement In-kind - Nominal Fundraising Services Telephone Candidate Name Category/Type	
	Office Sought: <input checked="" 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: AL District: 06	

SUBTOTAL of Disbursements This Page (optional)	402.73
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

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)
WALTER JONES COMMITTEE 2006

A.

Full Name (Last, First, Middle Initial)
Bill Ellis's Barbecue

Transaction ID: SB17.23255
Date of Disbursement

Mailing Address Downing Street Ext.
PO Box 3509

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

City Wilson State NC Zip Code 27895

Amount of Each Disbursement this Period

2241.75

Purpose of Disbursement
Catering

007

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:

B.

Full Name (Last, First, Middle Initial)
Bill Ellis's Barbecue

Transaction ID: SB17.23469
Date of Disbursement

Mailing Address Downing Street Ext.
PO Box 3509

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

City Wilson State NC Zip Code 27895

Amount of Each Disbursement this Period

2768.75

Purpose of Disbursement
Catering

007

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:

C.

Full Name (Last, First, Middle Initial)
Capitol Hill Club

Transaction ID: SB17.23514
Date of Disbursement

Mailing Address 300 1st Street, SE

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	0	8

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

249.55

Purpose of Disbursement
Food/Beverages

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) ►

5260.05

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)

PAGE 44 / 66

<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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Citi/Lease	Transaction ID: SB17.23414 Date of Disbursement
	Mailing Address Falls of Neuse Road	<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City Raleigh State NC Zip Code 27615	Amount of Each Disbursement this Period
	Purpose of Disbursement Equipment Lease	<input type="text" value="32.50"/>
	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	Category/Type <input type="text" value="001"/>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	
B.	Full Name (Last, First, Middle Initial) Citi/Lease	Transaction ID: SB17.23486 Date of Disbursement
	Mailing Address Falls of Neuse Road	<input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City Raleigh State NC Zip Code 27615	Amount of Each Disbursement this Period
	Purpose of Disbursement Equipment Lease	<input type="text" value="32.50"/>
	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	Category/Type <input type="text" value="001"/>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	
C.	Full Name (Last, First, Middle Initial) Citi/Lease	Transaction ID: SB17.23557 Date of Disbursement
	Mailing Address Falls of Neuse Road	<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City Raleigh State NC Zip Code 27615	Amount of Each Disbursement this Period
	Purpose of Disbursement Equipment Lease	<input type="text" value="32.50"/>
	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	Category/Type <input type="text" value="001"/>
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="97.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 45 / 66

17 18 19a 19b
 20a 20b 20c 21

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Cold Harbor Films	Transaction ID: SB17.23236 Date of Disbursement
	Mailing Address 815 Slaters Lane	<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Advertising - Production Candidate Name	<input type="text" value="5628.80"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <input type="text" value="004"/>

B.	Full Name (Last, First, Middle Initial) Cold Harbor Films	Transaction ID: SB17.23238 Date of Disbursement
	Mailing Address 815 Slaters Lane	<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Advertising - Production Candidate Name	<input type="text" value="640.80"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <input type="text" value="004"/>

C.	Full Name (Last, First, Middle Initial) Cox NC Publications	Transaction ID: SB17.23123 Date of Disbursement
	Mailing Address PO BOx 1967	<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City Greenville State NC Zip Code 27835	Amount of Each Disbursement this Period
	Purpose of Disbursement Advertising - Magazine Candidate Name	<input type="text" value="170.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <input type="text" value="004"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6439.60"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Distinctive Photo Images Mailing Address 110 Doe Lane City New Bern State NC Zip Code 28562 Purpose of Disbursement Photography Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23251 Date of Disbursement 04 / 23 / 2008 Amount of Each Disbursement this Period 467.59 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Doug Henry Chevrolet Mailing Address 210 West Marlboro City Farmville State NC Zip Code 27828 Purpose of Disbursement Campaign Car Maintenance 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: SB17.23470 Date of Disbursement 06 / 11 / 2008 Amount of Each Disbursement this Period 42.71 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Mr. Dick Ellis Mailing Address PO Box 17252 City Raleigh State NC Zip Code 27619 Purpose of Disbursement Advertising - Production Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23344 Date of Disbursement 05 / 02 / 2008 Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

710.30

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)

<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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Federal Express Mailing Address Post Office Box 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement Delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23246 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 8 Amount of Each Disbursement this Period 285.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Flat Creek Technology/Strategy/Marketing Mailing Address 1708 21st Avenue S #140 City Nashville State TN Zip Code 37212 Purpose of Disbursement Website Setup/Maintenance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23439 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8 Amount of Each Disbursement this Period 1120.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) GMAC SmartLease Mailing Address PO Box 70309 City Charlotte State NC Zip Code 28272-0309 Purpose of Disbursement Campaign Car Lease Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23126 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 8 Amount of Each Disbursement this Period 897.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	2302.25
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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) GMAC SmartLease <hr/> Mailing Address PO Box 70309 <hr/> City Charlotte State NC Zip Code 28272-0309 <hr/> Purpose of Disbursement Campaign Car Lease 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: SB17.23442 Date of Disbursement 05 / 21 / 2008 <hr/> Amount of Each Disbursement this Period 897.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) GMAC SmartLease <hr/> Mailing Address PO Box 70309 <hr/> City Charlotte State NC Zip Code 28272-0309 <hr/> Purpose of Disbursement Campaign Car Lease 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: SB17.23499 Date of Disbursement 06 / 18 / 2008 <hr/> Amount of Each Disbursement this Period 897.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Hummel Printing <hr/> Mailing Address PO Box 3199 850 Springfield Road <hr/> City Union State NJ Zip Code 07083 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23258 Date of Disbursement 04 / 24 / 2008 <hr/> Amount of Each Disbursement this Period 3558.31 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

5352.43

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 49 / 66

<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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Jamestown Associates <hr/> Mailing Address 5 Mapleton Road, Ste 300 <hr/> City Princeton State NJ Zip Code 08540 <hr/> Purpose of Disbursement Advertising- Print Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23341 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 5700.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) National Media, Inc. <hr/> Mailing Address 815 Slaters Lane <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Advertising - Media Buys Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23261 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2600.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) National Research, Inc. <hr/> Mailing Address 146 State Highway 34 Suite 250 <hr/> City Holmdel State NJ Zip Code 07733 <hr/> Purpose of Disbursement Survey Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23127 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 3850.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	12150.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) National Research, Inc. Mailing Address 146 State Highway 34 Suite 250 City Holmdel State NJ Zip Code 07733 Purpose of Disbursement Survey Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23248 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 8 Amount of Each Disbursement this Period 3500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) National Research, Inc. Mailing Address 146 State Highway 34 Suite 250 City Holmdel State NJ Zip Code 07733 Purpose of Disbursement Poll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23419 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 8 Amount of Each Disbursement this Period 3500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) NORTH CAROLINA REPUBLICAN EXECUTIVE COMMITTEE Mailing Address P.O. BOX 12905 P O BOX 12905 City RALEIGH State NC Zip Code 27605 Purpose of Disbursement Advertising - Convention Flyer 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: SB17.23485 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 8 Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	7250.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Office Depot Mailing Address Falls of the Neuse Road City Raleigh State NC Zip Code 27609 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23415 Date of Disbursement 05 / 14 / 2008 Amount of Each Disbursement this Period 247.59 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Pat Crosswhite Mailing Address 400 Fincastle Drive City Raleigh State NC Zip Code 27607 Purpose of Disbursement Advertising - Production Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23249 Date of Disbursement 04 / 23 / 2008 Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Paychex Mailing Address 15501 Weston Parkway Suite 100 City Cary State NC Zip Code 27513 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23266 Date of Disbursement 04 / 30 / 2008 Amount of Each Disbursement this Period 356.94 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

854.53

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB17.23267 Date of Disbursement 05 / 12 / 2008
	Mailing Address 15501 Weston Parkway Suite 100	Amount of Each Disbursement this Period 115.64
	City Cary State NC Zip Code 27513	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Services Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB17.23421 Date of Disbursement 05 / 15 / 2008
	Mailing Address 15501 Weston Parkway Suite 100	Amount of Each Disbursement this Period 355.54
	City Cary State NC Zip Code 27513	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Taxes Candidate Name	001 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) Paychex	Transaction ID: SB17.23460 Date of Disbursement 05 / 30 / 2008
	Mailing Address 15501 Weston Parkway Suite 100	Amount of Each Disbursement this Period 355.54
	City Cary State NC Zip Code 27513	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Taxes Candidate Name	001 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)	826.72
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

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)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial) Paychex Mailing Address 15501 Weston Parkway Suite 100 City Cary State NC Zip Code 27513 Purpose of Disbursement Payroll Services 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: SB17.23538 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 8
	Amount of Each Disbursement this Period 112.88 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B. Full Name (Last, First, Middle Initial) Paychex Mailing Address 15501 Weston Parkway Suite 100 City Cary State NC Zip Code 27513 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23502 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 8
	Amount of Each Disbursement this Period 355.54 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C. Full Name (Last, First, Middle Initial) Paychex Mailing Address 15501 Weston Parkway Suite 100 City Cary State NC Zip Code 27513 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23537 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 355.54 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

823.96

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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Public Storage Mailing Address 6220 Creedmoor Road City Raleigh State NC Zip Code 27612 Purpose of Disbursement Storage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23125 Date of Disbursement 04 / 17 / 2008 Amount of Each Disbursement this Period 148.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Public Storage Mailing Address 6220 Creedmoor Road City Raleigh State NC Zip Code 27612 Purpose of Disbursement Storage 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: SB17.23418 Date of Disbursement 05 / 14 / 2008 Amount of Each Disbursement this Period 148.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Rotterman & Associates Mailing Address Post Office Box 99667 City Raleigh State NC Zip Code 27624 Purpose of Disbursement Advertising - Placement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23235 Date of Disbursement 04 / 21 / 2008 Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2296.00

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

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)
WALTER JONES COMMITTEE 2006

A.

Full Name (Last, First, Middle Initial)
Rotterman & Associates

Transaction ID: SB17.23243
Date of Disbursement

Mailing Address Post Office Box 99667

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

City Raleigh State NC Zip Code 27624

Amount of Each Disbursement this Period

2300.00

Purpose of Disbursement
Advertising - Placement
Candidate Name

004

Category/
Type

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

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

B.

Full Name (Last, First, Middle Initial)
Rotterman & Associates

Transaction ID: SB17.23437
Date of Disbursement

Mailing Address Post Office Box 99667

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

City Raleigh State NC Zip Code 27624

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement
Advertising - Media Placements
Candidate Name

004

Category/
Type

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

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

C.

Full Name (Last, First, Middle Initial)
Rotterman & Associates

Transaction ID: SB17.23471
Date of Disbursement

Mailing Address Post Office Box 99667

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

City Raleigh State NC Zip Code 27624

Amount of Each Disbursement this Period

127.27

Purpose of Disbursement
Office Supplies
Candidate Name

001

Category/
Type

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

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

SUBTOTAL of Disbursements This Page (optional) ▶

2727.27

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

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)
WALTER JONES COMMITTEE 2006

<p>A. Full Name (Last, First, Middle Initial) Rotterman & Associates</p> <p>Mailing Address Post Office Box 99667</p> <p>City Raleigh State NC Zip Code 27624</p> <p>Purpose of Disbursement Reimbursement:Faxes/Fedex/Travel 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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.23515</p> <p>Date of Disbursement 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 4521.53</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) Ms. Karen Rotterman</p> <p>Mailing Address Post Office Box 99667</p> <p>City Raleigh State NC Zip Code 27624</p> <p>Purpose of Disbursement Political Strategy and Media Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.23122</p> <p>Date of Disbursement 04 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 8000.00</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) Ms. Karen Rotterman</p> <p>Mailing Address Post Office Box 99667</p> <p>City Raleigh State NC Zip Code 27624</p> <p>Purpose of Disbursement Political Strategy and Media Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.23263</p> <p>Date of Disbursement 04 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 8000.00</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) ▶

20521.53

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

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

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

FOR LINE NUMBER:
(check only one)

17 18 19a 19b
 20a 20b 20c 21

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)
WALTER JONES COMMITTEE 2006

<p>A. Full Name (Last, First, Middle Initial) Ms. Karen Rotterman</p> <p>Mailing Address Post Office Box 99667</p> <p>City State Zip Code Raleigh NC 27624</p> <p>Purpose of Disbursement Political Strategy and Media Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House Disbursement For: 2008 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.23455 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 8 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 8000.00</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) Mr. Timothy R. Rupli</p> <p>Mailing Address 1938 Great Falls Street</p> <p>City State Zip Code McLean VA 22101</p> <p>Purpose of Disbursement In-kind - Home Hosted Event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House Disbursement For: 2008 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.23232 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 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) Cathy A. Singleton</p> <p>Mailing Address 905 Hemingway Drive</p> <p>City State Zip Code Raleigh NC 27609</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House Disbursement For: 2008 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.23265 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 732.66</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)	9232.66
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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Cathy A. Singleton Mailing Address 905 Hemingway Drive City Raleigh State NC Zip Code 27609 Purpose of Disbursement Payroll 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: SB17.23420 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 8	Amount of Each Disbursement this Period 732.66 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Cathy A. Singleton Mailing Address 905 Hemingway Drive City Raleigh State NC Zip Code 27609 Purpose of Disbursement Payroll 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: SB17.23459 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 8	Amount of Each Disbursement this Period 732.66 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Cathy A. Singleton Mailing Address 905 Hemingway Drive City Raleigh State NC Zip Code 27609 Purpose of Disbursement Payroll 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: SB17.23501 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 8	Amount of Each Disbursement this Period 732.66 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	2197.98
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)

<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

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)
WALTER JONES COMMITTEE 2006

A.

Full Name (Last, First, Middle Initial)
Cathy A. Singleton

Transaction ID: SB17.23536
Date of Disbursement

Mailing Address 905 Hemingway Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

City Raleigh State NC Zip Code 27609

Amount of Each Disbursement this Period

732.66

Purpose of Disbursement
Payroll

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:

B.

Full Name (Last, First, Middle Initial)
Soundtrax

Transaction ID: SB17.23250
Date of Disbursement

Mailing Address 302 Jefferson Street, Suite 160

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	8

City Raleigh State NC Zip Code 27605

Amount of Each Disbursement this Period

605.81

Purpose of Disbursement
Advertising - Production

004

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:

C.

Full Name (Last, First, Middle Initial)
Sprint

Transaction ID: SB17.23245
Date of Disbursement

Mailing Address 3261 Atlantic Avenue

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	8

City Raleigh State NC Zip Code 27604

Amount of Each Disbursement this Period

132.37

Purpose of Disbursement
Telephone

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)

1470.84

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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Sprint	Transaction ID: SB17.23452 Date of Disbursement 05 / 28 / 2008
	Mailing Address 3261 Atlantic Avenue	Amount of Each Disbursement this Period 20.63
	City Raleigh State NC Zip Code 27604	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Candidate Name 001 Category/Type	
	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:	

B.	Full Name (Last, First, Middle Initial) Sprint	Transaction ID: SB17.23500 Date of Disbursement 06 / 18 / 2008
	Mailing Address 3261 Atlantic Avenue	Amount of Each Disbursement this Period 20.63
	City Raleigh State NC Zip Code 27604	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Candidate Name 001 Category/Type	
	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:	

C.	Full Name (Last, First, Middle Initial) Thomas, Judy and Tucker, PA	Transaction ID: SB17.23124 Date of Disbursement 04 / 17 / 2008
	Mailing Address 16 East Rowan Street, Suite 100	Amount of Each Disbursement this Period 375.00
	City Raleigh State NC Zip Code 27609	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Tax Preparation Telephone Candidate Name 001 Category/Type	
	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:	

SUBTOTAL of Disbursements This Page (optional) ▶

416.26

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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) US Postal Service <hr/> Mailing Address Falls of the Neuse Road <hr/> City Raleigh State NC Zip Code 27624 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23264 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 164.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) US Postal Service <hr/> Mailing Address Falls of the Neuse Road <hr/> City Raleigh State NC Zip Code 27624 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> 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: SB17.23464 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Wachovia Bank <hr/> Mailing Address 6002 Falls of Neuse Road <hr/> City Raleigh State NC Zip Code 27609 <hr/> Purpose of Disbursement Merchant Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23412 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 92.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

456.10

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

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)
WALTER JONES COMMITTEE 2006

A.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address 6002 Falls of Neuse Road

City Raleigh State NC Zip Code 27609

Purpose of Disbursement

Bank Service Charge

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.23413

Date of Disbursement

04 / 17 / 2008

Amount of Each Disbursement this Period

8.00

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

B.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address 6002 Falls of Neuse Road

City Raleigh State NC Zip Code 27609

Purpose of Disbursement

Harland Check Printing

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.23233

Date of Disbursement

04 / 23 / 2008

Amount of Each Disbursement this Period

103.04

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

C.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address 6002 Falls of Neuse Road

City Raleigh State NC Zip Code 27609

Purpose of Disbursement

Merchant Services

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.23488

Date of Disbursement

05 / 01 / 2008

Amount of Each Disbursement this Period

55.66

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

SUBTOTAL of Disbursements This Page (optional) ▶

166.70

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
WALTER JONES COMMITTEE 2006

A.	Full Name (Last, First, Middle Initial) Wachovia Bank <hr/> Mailing Address 6002 Falls of Neuse Road <hr/> City Raleigh State NC Zip Code 27609 <hr/> Purpose of Disbursement Bank Service Charges Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23487 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 95.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Wachovia Bank <hr/> Mailing Address 6002 Falls of Neuse Road <hr/> City Raleigh State NC Zip Code 27609 <hr/> Purpose of Disbursement Merchant Services Candidate Name <hr/> 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: SB17.23558 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 50.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) WHIG-TV <hr/> Mailing Address 1701 Sunset Avenue <hr/> City Rocky Mount State NC Zip Code 27804 <hr/> Purpose of Disbursement Advertising - Placement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.23244 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 220.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

365.95

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

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)
WALTER JONES COMMITTEE 2006

<p>A. Full Name (Last, First, Middle Initial) WM Fundraising & Event Planning, Inc.</p> <p>Mailing Address 1302 13th Street, NW #2</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Fundraising Consulting 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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.23280 Date of Disbursement 04 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 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) Mr. James Woltjen</p> <p>Mailing Address 110 Doe Lane</p> <p>City New Bern State NC Zip Code 28562</p> <p>Purpose of Disbursement Salary 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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.23257 Date of Disbursement 04 / 24 / 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>
<p>C. Full Name (Last, First, Middle Initial) Mr. James Woltjen</p> <p>Mailing Address 110 Doe Lane</p> <p>City New Bern State NC Zip Code 28562</p> <p>Purpose of Disbursement Salary 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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.23347 Date of Disbursement 05 / 07 / 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>

SUBTOTAL of Disbursements This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	95265.55

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rotterman & Associates	Nature of Debt (Purpose): Advertising - Production
Mailing Address Post Office Box 99667	
City Raleigh State NC ZIP Code 27624	

Outstanding Balance Beginning This Period 7720.64	Transaction ID: SD10.23116	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7720.64

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rotterman & Associates	Nature of Debt (Purpose): Advertising - Media Production
Mailing Address Post Office Box 99667	
City Raleigh State NC ZIP Code 27624	

Outstanding Balance Beginning This Period 15000.00	Transaction ID: SD10.23117	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ms. Karen Rotterman	Nature of Debt (Purpose): Political Strategy and Media Consulting
Mailing Address Post Office Box 99667	
City Raleigh State NC ZIP Code 27624	

Outstanding Balance Beginning This Period 8000.00	Transaction ID: SD10.23115	
Amount Incurred This Period 0.00	Payment This Period 8000.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	22720.64
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 66 / 66
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WALTER JONES COMMITTEE 2006

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ms. Karen Rotterman			Nature of Debt (Purpose): Fundraising Fee
Mailing Address Post Office Box 99667			
City Raleigh	State NC	ZIP Code 27624	

Outstanding Balance Beginning This Period		Transaction ID: SD10.23118	
10000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	10000.00	

1) SUBTOTALS This Period This Page (optional).....	10000.00
2) TOTALS This Period (last page this line number only).....	32720.64
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	32720.64