

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
Cynthia McKinney For Congress

ADDRESS (number and street) Post Office Box 371125
 Check if different than previously reported. (ACC)
Decatur GA 30037

2. **FEC IDENTIFICATION NUMBER** C00256354
CITY **STATE** **ZIP CODE**
STATE DISTRICT
GA 04
3. IS THIS REPORT NEW (N) OR AMENDED (A)

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 08 08 2006 in the State of GA
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 06 29 2006 through 07 19 2006

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 Joan Christian

Signature of Treasurer Electronically Filed by Joan Christian Date 12 28 2007

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

Cynthia McKinney For Congress

Report Covering the Period:

From:

M	M
0	6

D	D
2	9

Y	Y	Y	Y
2	0	0	6

To:

M	M
0	7

D	D
1	9

Y	Y	Y	Y
2	0	0	6

	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)).....	32593.43	294633.96
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	30715.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	32593.43	263918.96
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	14312.44	196142.06
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1500.87
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	14312.44	194641.19
8. Cash on Hand at Close of Reporting Period (from Line 27).....	85713.42	
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).....	1674.89	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Cynthia McKinney For Congress

Report Covering the Period: From:

M	M
0	6

D	D
2	9

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	7

D	D
1	9

Y	Y	Y	Y
2	0	0	6

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

8292.00

132085.00

(ii) Unitemized.....

10801.43

90568.96

(iii) TOTAL of contributions

19093.43

222653.96

from individuals..... ▶

1000.00

8850.00

(b) Political Party Committees.....

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

12500.00

63130.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

32593.43

294633.96

(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

0.00

0.00

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

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

0.00

1500.87

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

0.00

27219.87

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

32593.43

323354.70

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	14312.44	196142.06
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	30715.00
(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	30715.00
21. OTHER DISBURSEMENTS.....	0.00	37000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	14312.44	263857.06

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	67432.43
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	32593.43
25. SUBTOTAL (add Line 23 and Line 24).....	100025.86
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14312.44
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	85713.42

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 29
	<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)
Cynthia McKinney For Congress

A. Full Name (Last, First, Middle Initial) Cash Cash Mailing Address City State Zip Code		Date of Receipt M M / D D / Y Y Y Y Y 07 / 17 / 2006 Transaction ID: SA11A1.15621 Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Individual Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 337.00	

B. Full Name (Last, First, Middle Initial) Cash Cash Mailing Address City State Zip Code		Date of Receipt M M / D D / Y Y Y Y Y 07 / 17 / 2006 Transaction ID: SA11A1.15636 Amount of Each Receipt this Period 7.00
FEC ID number of contributing federal political committee. C		Individual Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 344.00	

C. Full Name (Last, First, Middle Initial) Cash Cash Mailing Address City State Zip Code		Date of Receipt M M / D D / Y Y Y Y Y 07 / 17 / 2006 Transaction ID: SA11A1.15643 Amount of Each Receipt this Period 5.00
FEC ID number of contributing federal political committee. C		Individual Contribution/NY <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 349.00	

SUBTOTAL of Receipts This Page (optional) ▶	22.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

A. Full Name (Last, First, Middle Initial) Cash Cash Mailing Address City State Zip Code		Date of Receipt M M / D D / Y Y Y Y 07 / 17 / 2006 Transaction ID: SA11A1.15674 Amount of Each Receipt this Period 10.00 Individual Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 359.00

B. Full Name (Last, First, Middle Initial) Cash Cash Mailing Address City State Zip Code		Date of Receipt M M / D D / Y Y Y Y 07 / 17 / 2006 Transaction ID: SA11A1.15697 Amount of Each Receipt this Period 20.00 Individual Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 379.00

C. Full Name (Last, First, Middle Initial) Cash Cash Mailing Address City State Zip Code		Date of Receipt M M / D D / Y Y Y Y 07 / 17 / 2006 Transaction ID: SA11A1.15756 Amount of Each Receipt this Period 40.00 Individual Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 419.00

SUBTOTAL of Receipts This Page (optional) ▶	70.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

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

Mailing Address PO Box 290

City State Zip Code
Oakham MA 01068

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

Name of Employer Occupation
Hardigg Industries Computer Programmer

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 07 / 2006

Transaction ID: SA11A1.15463

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
Otis Cotton

Mailing Address 2059 St Raymond Ave

City State Zip Code
Bronx NY 10462

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

Name of Employer Occupation
Self Carpenter

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 17 / 2006

Transaction ID: SA11A1.15593

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Lowell Dickerson

Mailing Address 3220 Harbor View Ct

City State Zip Code
Decatur GA 30034

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

Name of Employer Occupation
Self Business Owner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 17 / 2006

Transaction ID: SA11A1.15792

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

A. Full Name (Last, First, Middle Initial)
Jimmy Gregory

Mailing Address PO Box

City State Zip Code
Atlanta GA 30324

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

Name of Employer self Occupation
Podiatric Surgeon

Receipt For: 2006
 Primary General
 Other (specify) ▼
Runoff

Election Cycle-to-Date ▼
1050.00

Date of Receipt
MM / DD / YYYY
07 / 19 / 2006

Transaction ID: SA11A1.15788

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 13321 Hwy N

City State Zip Code
Bourbon MO 65441

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

Name of Employer Self Occupation
Farmer/Writer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
07 / 07 / 2006

Transaction ID: SA11A1.15462

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
E.L. Hillsman

Mailing Address 2063 Ridgedale Rd

City State Zip Code
Atlanta GA 30317

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

Name of Employer Retired Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
07 / 07 / 2006

Transaction ID: SA11A1.15474

Amount of Each Receipt this Period
400.00

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

A. Full Name (Last, First, Middle Initial)
Albert Issaco

Mailing Address 116 Valley View Way
Apt 212

City Sutter Creek State CA Zip Code 95685

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

Name of Employer self Occupation Real Estate

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
07 / 07 / 2006

Transaction ID: SA11A1.15475

Amount of Each Receipt this Period
200.00

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

B. Full Name (Last, First, Middle Initial)
Charlton Lester

Mailing Address 1529 Bell Flower Court

City Stone Mountain State GA Zip Code 30088

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

Name of Employer OmniTech Occupation President, CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt
MM / DD / YYYY
07 / 17 / 2006

Transaction ID: SA11A1.15857

Amount of Each Receipt this Period
2100.00

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

C. Full Name (Last, First, Middle Initial)
Charlton Lester

Mailing Address 1529 Bell Flower Court

City Stone Mountain State GA Zip Code 30088

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

Name of Employer OmniTech Occupation President, CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼
Runoff

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
07 / 17 / 2006

Transaction ID: SA11A1.15859

Amount of Each Receipt this Period
900.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

Full Name (Last, First, Middle Initial) A. Vallorie Lovelace		Date of Receipt M M / D D / Y Y Y Y Y 07 / 17 / 2006	
Mailing Address 116-14 202ND St		Transaction ID: SA11A1.15570	
City State Zip Code St. Albans NY 11412	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Individual Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer NY Office of Mental Health	Occupation Manager		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Alonza Menefee		Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2006	
Mailing Address 2756 Heritage Hills Road		Transaction ID: SA11A1.15784	
City State Zip Code Tuskegee AL 36083	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Individual Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Seydou Njoya		Date of Receipt M M / D D / Y Y Y Y Y 07 / 13 / 2006	
Mailing Address 185 Hall St		Transaction ID: SA11A1.15839	
City State Zip Code Brooklyn NY 11205	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Individual Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Retired	Occupation retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1700.00		

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

A. Full Name (Last, First, Middle Initial)
Alani & Vickie Ogunlade

Mailing Address 5475 Cambleton Rd

City State Zip Code
Atlanta GA 30331

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

Name of Employer Self Occupation
Insurance Brokers

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
MM / DD / YYYY
07 / 17 / 2006

Transaction ID: SA11A1.15796

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
M. Hytham Rifai

Mailing Address 199 Amhurst Pl

City State Zip Code
Valparaiso IN 46383

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

Name of Employer Self Occupation
MD

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt
MM / DD / YYYY
07 / 11 / 2006

Transaction ID: SA11A1.15822

Amount of Each Receipt this Period
300.00

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

C. Full Name (Last, First, Middle Initial)
Herbert Rothschild, Jr.

Mailing Address 849 Harvard St. #C

City State Zip Code
Houston TX 77007

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

Name of Employer retired Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: SA11A1.15809

Amount of Each Receipt this Period
250.00

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

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

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

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

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

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

A. Full Name (Last, First, Middle Initial)
Anthony F. Saily

Mailing Address 435 S LaFayette Park Pl

City State Zip Code
Los Angeles CA 90057

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

Name of Employer Occupation
retired retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Runoff 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 19 / 2006

Transaction ID: SA11A1.15783

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 6704 Allegheny Ave.

City State Zip Code
Takoma Park MD 20912

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

Name of Employer Occupation
Self Political Activist

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

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 07 / 2006

Transaction ID: SA11A1.15798

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Lloyd Wright

Mailing Address 352 Lander Dr

City State Zip Code
Henderson NV 89074

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

Name of Employer Occupation
Retired Dept of Probation

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 05 / 2006

Transaction ID: SA11A1.15487

Amount of Each Receipt this Period
150.00

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

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

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

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

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

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

A. Full Name (Last, First, Middle Initial)
Camille Yarbrough

Mailing Address 80 St. Nicolas Ave.
Apt. 4G

City State Zip Code
New York NY 10026

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

Name of Employer Occupation
Writer Freelance

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

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	7	/	2	0	0	6

Transaction ID: SA11A1.15595

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	8292.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 29

(check only one)

11a 11b 11c 11d

12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

A. Full Name (Last, First, Middle Initial)
Kilpatrick for U.S. Congress

Mailing Address P. O. Box 32175

City State Zip Code
Detroit MI 48232

FEC ID number of contributing federal political committee. C C00317842

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2006

Transaction ID: SA11B.15453

Amount of Each Receipt this Period
1000.00

Political
 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)	1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

A. Full Name (Last, First, Middle Initial) Bellsouth FED PAC Mailing Address 1025 Lenox Park Blvd NE City Atlanta State GA Zip Code 30319 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11C.15450 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> PAC <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	6	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		2	9		2	0	0	6														
1000.00																							
Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>3000.00</td> </tr> </table>		3000.00																					
3000.00																							

B. Full Name (Last, First, Middle Initial) Realtors Political Action Committee Mailing Address 430 N. Michigan Ave City Chicago State IL Zip Code 60611 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11C.15458 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> PAC <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	7		2	0	0	6	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		0	7		2	0	0	6														
1000.00																							
Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00																					
1000.00																							

C. Full Name (Last, First, Middle Initial) SEIU C.O.P.E. FUND Mailing Address 1313 L Street NW City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. C C70001532		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11C.15457 Amount of Each Receipt this Period <table border="1"> <tr> <td>2500.00</td> </tr> </table> PAC <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	4		2	0	0	6	2500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		1	4		2	0	0	6														
2500.00																							
Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>2500.00</td> </tr> </table>		2500.00																					
2500.00																							

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 29
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

A. Full Name (Last, First, Middle Initial)
Sheet Metal Workers International Association Political Action League

Mailing Address 1750 New York Ave NW

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 14 / 2006

Transaction ID: SA11C.15454

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
The NEA Fund For Children & Public Education

Mailing Address 1201 16th Street NW Suite 420

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 17 / 2006

Transaction ID: SA11C.15863

Amount of Each Receipt this Period
3000.00

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

C. Full Name (Last, First, Middle Initial)
Transport Workers Union

Mailing Address 1700 Broadway, 2nd Floor

City State Zip Code
New York NY 10019

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 17 / 2006

Transaction ID: SA11C.15780

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 29
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

A. Full Name (Last, First, Middle Initial)
Unite Campaign Committee

Mailing Address 275 7th Avenue

City	State	Zip Code
New York	NY	10001

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

Name of Employer	Occupation
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2006

Transaction ID: SA11C.15456

Amount of Each Receipt this Period
2000.00

PAC
 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)	12500.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

A. Dewayne Allen Full Name (Last, First, Middle Initial) Mailing Address 3431 Almand Road City Conyers State GA Zip Code 30012 Purpose of Disbursement Campaign Stakes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB17.17287 Date of Disbursement 07 / 12 / 2006 Amount of Each Disbursement this Period 165.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
---	--	---

B. American Express Full Name (Last, First, Middle Initial) Mailing Address Suite 0001 City Chicago State IL Zip Code 60679 Purpose of Disbursement Payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB17.17272 Date of Disbursement 07 / 01 / 2006 Amount of Each Disbursement this Period 2314.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
--	--	--

C. BellSouth Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 105503 City Atlanta State GA Zip Code 30348 Purpose of Disbursement Phone Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB17.17282 Date of Disbursement 07 / 08 / 2006 Amount of Each Disbursement this Period 644.64 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SUBTOTAL of Disbursements This Page (optional)	3123.64
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 19 / 29

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

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

Full Name (Last, First, Middle Initial) A. BellSouth		Transaction ID: SB17.17285 Date of Disbursement 07 / 12 / 2006	
Mailing Address P. O. Box 105503		Amount of Each Disbursement this Period 251.30	
City Atlanta State GA Zip Code 30348	Purpose of Disbursement Phone Services Candidate Name Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Best Print & Design		Transaction ID: SB17.17280 Date of Disbursement 07 / 08 / 2006	
Mailing Address 4187-B Snapfinger Woods Drive		Amount of Each Disbursement this Period 1601.06	
City Decatur State GA Zip Code 30035	Purpose of Disbursement Invoice 7254, 7293 Candidate Name Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Charles Bone		Transaction ID: SB17.17275 Date of Disbursement 07 / 01 / 2006	
Mailing Address 4989 Willow Overlook		Amount of Each Disbursement this Period 312.50	
City Stone Mountain State GA Zip Code 30088	Purpose of Disbursement Catered Food Candidate Name Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional)	2164.86
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

Full Name (Last, First, Middle Initial) A. Charles Bone		Transaction ID: SB17.17365 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 0 6
Mailing Address 4989 Willow Overlook		Amount of Each Disbursement this Period 325.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Stone Mountain State GA Zip Code 30088		
Purpose of Disbursement Catering Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

Full Name (Last, First, Middle Initial) B. Candler I-20 Storage		Transaction ID: SB17.17281 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 0 6
Mailing Address 2595 Candler Road		Amount of Each Disbursement this Period 573.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Decatur State GA Zip Code 30032		
Purpose of Disbursement July August September Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Capitol City Bank		Transaction ID: SB17.17273 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6
Mailing Address 562 Lee Street, SW		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30310		
Purpose of Disbursement Records on File for Field Operations Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1898.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

Full Name (Last, First, Middle Initial) A. Cingular Wireless		Transaction ID: SB17.17286 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address 826 E. Park Drive		Amount of Each Disbursement this Period 30.10
City Grayson State KY Zip Code 41143	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Wireless Services Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Karon Fitzpatrick		Transaction ID: SB17.17289 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address 823 Mountain Oaks Parkway		Amount of Each Disbursement this Period 300.00
City Stone Mountain State GA Zip Code 30087	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Poll Watchers Coordinator Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ms Cassandra Hasan		Transaction ID: SB17.17279 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 7 / 2 0 0 6
Mailing Address 4204 Rutherford Glen Circle		Amount of Each Disbursement this Period 600.00
City Doraville State GA Zip Code 30340	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Coordinator Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	930.10
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

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

Full Name (Last, First, Middle Initial) A. Monarch Enterprises		Transaction ID: SB17.17290 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 6
Mailing Address 275 13th Street		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
City Atlanta State GA Zip Code 30309	Purpose of Disbursement Victory Celebration Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Radio One		Transaction ID: SB17.17288 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address 101 Marietta St		Amount of Each Disbursement this Period 2420.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30303	Purpose of Disbursement Radio Spots Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Mr. Tony Ricks		Transaction ID: SB17.17293 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 6
Mailing Address 4220 Reeshemah Street		Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City College Park State GA Zip Code 30349	Purpose of Disbursement Professional DJ Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	4720.00
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)
Cynthia McKinney For Congress

A. Leonard E. Tate Full Name (Last, First, Middle Initial) Mailing Address 1653 Stokes Ave. City Atlanta State GA Zip Code 30310 Purpose of Disbursement Field Operations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB17.17291 Date of Disbursement 07 / 15 / 2006 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
--	--	---

B. The Black Slate Full Name (Last, First, Middle Initial) Mailing Address 944 R.D. Abernathy Blvd, S.W. City Atlanta State GA Zip Code 30310 Purpose of Disbursement Field Operations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB17.17283 Date of Disbursement 07 / 08 / 2006 Amount of Each Disbursement this Period 400.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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C. Wal-Mart Full Name (Last, First, Middle Initial) Mailing Address 5401 Farrington Rd City Decatur State GA Zip Code 30038 Purpose of Disbursement Food Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB17.17294 Date of Disbursement 07 / 18 / 2006 Amount of Each Disbursement this Period 386.41 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SUBTOTAL of Disbursements This Page (optional) ▶	1006.41
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 24 / 29

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

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NAME OF COMMITTEE (In Full)
Cynthia McKinney For Congress

Full Name (Last, First, Middle Initial)

A. Wal-Mart

Mailing Address 5401 Farrington Rd

City Decatur State GA Zip Code 30038

Purpose of Disbursement
Sodas

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.17295

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

SUBTOTAL of Disbursements This Page (optional)

29.43

TOTAL This Period (last page this line number only)

13872.44

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)
 Cynthia McKinney For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capitol One	Nature of Debt (Purpose): Campaign Supplies
Mailing Address PO Box 530092	
City State ZIP Code Atlanta GA 30353	

Outstanding Balance Beginning This Period 94.48	Transaction ID: SD10.12215	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 94.48

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capitol One	Nature of Debt (Purpose): Food
Mailing Address PO Box 530092	
City State ZIP Code Atlanta GA 30353	

Outstanding Balance Beginning This Period 58.39	Transaction ID: SD10.12216	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 58.39

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capitol One	Nature of Debt (Purpose): Phone Center
Mailing Address PO Box 530092	
City State ZIP Code Atlanta GA 30353	

Outstanding Balance Beginning This Period 27.64	Transaction ID: SD10.12218	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 27.64

1) SUBTOTALS This Period This Page (optional).....	▶	180.51
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS 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)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Cynthia McKinney For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capitol One	Nature of Debt (Purpose): Print Material
Mailing Address PO Box 530092	
City State ZIP Code Atlanta GA 30353	

Outstanding Balance Beginning This Period 117.58	Transaction ID: SD10.12219	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 117.58

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capitol One	Nature of Debt (Purpose): Hotel
Mailing Address PO Box 530092	
City State ZIP Code Atlanta GA 30353	

Outstanding Balance Beginning This Period 251.93	Transaction ID: SD10.12222	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 251.93

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor America MBNA	Nature of Debt (Purpose): Computer Supplies
Mailing Address PO Box 15289	
City State ZIP Code Wilmington DE 19886	

Outstanding Balance Beginning This Period 1124.87	Transaction ID: SD10.12230	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1124.87

1) SUBTOTALS This Period This Page (optional).....	1494.38
2) TOTALS This Period (last page this line number only).....	1674.89
3) TOTALS 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)	

Image# 27991078913

Form/Schedule: **SD10** Staples Lithonia 04/24/04 \$66.28; Walmart Decatur 04/24/04 \$6.23; Apple Store 05/03/04 \$404.19; CDW Direct 07/07/04 \$913.43; Walmart Lithonia 07/14/04 \$127.46; CDW Dorect 07/27/04 \$126.21; CDW Direct 07/26/04 \$39.68
Transaction ID: **SD10.12215**

Form/Schedule: **SD10** Publix #503 04/25/04 \$265.31; Pizza Hut 05/01/04 \$166.68; Publix decatur 06/03/04 \$174.53; Las Colinas lithonia 06/08/04 \$355.68; Cajun Crab House Lithonia 06/30/04 \$209.41; C'est Bon Cajun Lithonia 07/11/04 \$343.29; Imperial Of China 07/31/04 \$85.16
Transaction ID: **SD10.12216**

Image# 27991078914

Form/Schedule: **SD10** BellSouth 02/09/04 \$860.;Bellsouth 02/09/04 \$630.;Bellsouth 07/02 \$880.;Bellsouth 07/02 \$240.;Cellular Comm 07-
Transaction ID: **SD10.12218** /31/04 \$213.99

Form/Schedule: **SD10** Kinko's 05/11/04 \$61.63;NewsLibrary.com 05/29/04 \$5.95;Metro Monitor TV News 07/19/04 \$50.00;
Transaction ID: **SD10.12219**

Image# 27991078915

Form/Schedule: **SD10** Travel Lodge/Decatur 06/03/04

Transaction ID: **SD10.12222**

Form/Schedule: **SD10** Mircro Center Atlanta Georgia -computer equipment purchased on Oct. 11,2004 \$1493.32

Transaction ID: **SD10.12230**
