

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

RECEIVED  
FEC MAIL ROOM

1. NAME OF COMMITTEE (in full)

2000 JUL 14 P 5:19

Boyd For Congress

ADDRESS (number and street)  Check if different than previously reported.  
P.O. Box 16703

CITY, STATE and ZIP CODE STATE/DISTRICT  
Tallahassee, FL 32317 FL 02

2. FEC IDENTIFICATION NUMBER

000310807

3. IS THIS REPORT AN AMENDMENT?

YES  NO

### 4. TYPE OF REPORT

- April 15 Quarterly Report  Twelfth day report preceding \_\_\_\_\_ (Type of Election) \_\_\_\_\_  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- July 15 Quarterly Report  Thirtieth day report following the General Election on \_\_\_\_\_  
\_\_\_\_\_ in the State of \_\_\_\_\_
- October 15 Quarterly Report  Termination Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)

This report contains activity for  Primary Election  General Election  Special Election  Runoff Election

### SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-date
5. Covering Period <u>04/01/2000</u> through <u>06/30/2000</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(d))	66,309.05	134,959.05
(b) Total Contribution Refunds (From Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	66,309.05	134,959.05
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	34,327.58	57,895.33
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	34,327.58	57,895.33
8. Cash on Hand at Close of Reporting Period (from Line 27)	321,075.94	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	2,000.00	

For further information:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-719-3420

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: Jennifer Cannon  
Signature of Treasurer: Jennifer Cannon Date: 7-14-00

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

**FEC FORM 3**  
(Revised 4/87)

**Detailed Summary Page**  
of Receipts and Disbursements  
(Page 2, FEC FORM 3)

Name of Committee (in full) Boyd For Congress	Report Covering the Period: From: 04/01/2000 To: 08/30/2000	
I. RECEIPTS	Column A Total This Period	Column B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees:		
(i) Itemized (Use Schedule A) .....	8,628.00	
(ii) Unitemized .....	10,181.05	
(iii) Total of contributions from individual .....	18,809.05	39,459.05
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....	47,500.00	66,600.00
(d) The Candidate .....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	66,309.05	134,959.05
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....		
13. LOANS:		
(a) Made or Guaranteed by the Candidate .....		
(b) All Other Loans .....		
(c) TOTAL LOANS (add 13(a) and (b)) .....		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....		
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....		
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	66,309.05	134,959.05
<b>II. DISBURSEMENTS</b>		
17. OPERATING EXPENDITURES .....	34,327.58	57,895.33
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate .....		
(b) Of All Other Loans .....		
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) .....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) .....		
21. OTHER DISBURSEMENTS .....		
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	34,327.58	57,895.33
<b>III. CASH SUMMARY</b>		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....		289,094.47
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) .....		66,309.05
25. SUBTOTAL (add Line 23 and Line 24) .....		355,403.52
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 16) .....		34,327.58
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) .....		321,075.94

SCHEDULE A

ITEMIZED RECEIPTS

Any information reported from such reports and statements may not be sold or used by any person for the purpose of soliciting contributions to any political party, caucus, or other such using the name and address of any political committee to solicit contributions for such committee.

NAME OF COMMITTEE (in full)  
Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mike Abbott 15679 Hwy. 122 E. Barney, GA 31625-	Cotton Farmer	06/05/2000	200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	200.00	
Larry Cunningham Rt. 3, Box 2195 Quitman, GA 31643-	Cunningham Peanut Warehouse Owner	06/05/2000	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	250.00	
Randy Dewitt PO Box 129 Moultrie, GA 31636-	Produce Farmer	06/05/2000	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	250.00	
George Duron PO Box 218 Fort Saint Joe, FL 32456-	Duron Trading Co. Owner	05/05/2000	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year to Date ->	250.00	
Timothy Edmond 613 Lake Ridge Rd. Tallahassee, FL 32312-	St. Joe Corp. Senior Management	04/17/2000	200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	200.00	
J.M. GROWER, JR. Box 603 Boston, GA 31626-	Cotton Farmer	06/05/2000	200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	200.00	
D.L. Heirs Rt. 1, Box 50 Wixie, GA 31629-	United Irrigation Management	06/05/2000	200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	200.00	

SUBTOTAL of Receipts This Page (optional)	1,550.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Memoranda may not be used as read by any person for the purpose of soliciting contributions for or on behalf of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Boyd For Congress

A. Full Name, Mailing Address and Zip Code Frank Herring, Jr. 1585 Lashury Ave. Winter Park, FL 32789- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer St. Joe Corporation	Date (month, day, year) 05/09/2000	Amount of Each Receipt this Period 500.00
	Occupation Vice President	Aggregate Year-to-Date -> 500.00	
B. Full Name, Mailing Address and Zip Code Christopher Hine 3705 Delwood Dr. Panama City, FL 32408- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer St. Joe Corp.	Date (month, day, year) 05/09/2000	Amount of Each Receipt this Period 500.00
	Occupation Management	Aggregate Year-to-Date -> 500.00	
C. Full Name, Mailing Address and Zip Code Kjalma Johnson 14435 Hale Rd. Dade City, FL 33523-7524 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer East Coast Bank Corp.	Date (month, day, year) 06/30/2000	Amount of Each Receipt this Period 200.00
	Occupation	Aggregate Year-to-Date -> 200.00	
D. Full Name, Mailing Address and Zip Code Johnny Johnson Rt. 4 Box 95 J Quitman, GA 31643- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 06/14/2000	Amount of Each Receipt this Period 200.00
	Occupation Cotton Farmer	Aggregate Year-to-Date -> 200.00	
E. Full Name, Mailing Address and Zip Code Wayne Lane Rt. 4, Box 96 Quitman, GA 31643- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 06/05/2000	Amount of Each Receipt this Period 500.00
	Occupation Cotton Farmer	Aggregate Year-to-Date -> 500.00	
F. Full Name, Mailing Address and Zip Code Willard Lasseter P.O. Box 728 Moultrie, GA 31776- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Windy Pond Farms	Date (month, day, year) 06/05/2000	Amount of Each Receipt this Period 250.00
	Occupation Cotton Farmer	Aggregate Year-to-Date -> 250.00	
G. Full Name, Mailing Address and Zip Code William Langhin 2110 Elliott Drive Tallahassee, FL 32312- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Telquin Industries Corp	Date (month, day, year) 06/03/2000	Amount of Each Receipt this Period 500.00
	Occupation General Manager	Aggregate Year-to-Date -> 500.00	

SUBTOTAL of Receipts This Page (optional)	2,650.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the attached primary page	PAGE	OF
	3	5
FOR LINE NUMBER 11(a)(i)		

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

NAME OF COMMITTEE (In Full)  
Boyd for Congress

<p>A. Full Name, Mailing Address and Zip Code Robert McLendon P.O. Box 337 Leary, CA 31763-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation Cotton Farmer</p> <p>Aggregate Year-to-Date -&gt; 500.00</p>	<p>Date (month, day, year) 06/15/2000</p>	<p>Amount of each Receipt this Period 500.00</p>
<p>B. Full Name, Mailing Address and Zip Code James Motta 2300 N.E. 28th St. Lighthouse Point, FL 33064-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation Unknown</p> <p>Aggregate Year-to-Date -&gt; 200.00</p>	<p>Date (month, day, year) 04/17/2000</p>	<p>Amount of each Receipt this Period 200.00</p>
<p>C. Full Name, Mailing Address and Zip Code Van Murphy Rt. 1 Box 1300 Quitman, GA 31643-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer BCT  Occupation General Manager</p> <p>Aggregate Year-to-Date -&gt; 100.00</p>	<p>Date (month, day, year) 06/05/2000</p>	<p>Amount of each Receipt this Period 100.00</p>
<p>D. Full Name, Mailing Address and Zip Code Van Murphy Rt. 1 Box 1300 Quitman, GA 31643-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer BCT  Occupation General Manager</p> <p>Aggregate Year-to-Date -&gt; 200.00</p>	<p>Date (month, day, year) 06/05/2000</p>	<p>Amount of each Receipt this Period 100.00</p>
<p>E. Full Name, Mailing Address and Zip Code Robert Redding 405 Rucker Pl. Alexandria, VA 22301-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) '00 General</p>	<p>Name of Employer The Redding Firm  Occupation Attorney</p> <p>Aggregate Year-to-Date -&gt; 1,626.00 IN-KIND</p>	<p>Date (month, day, year) 06/04/2000 3/26/00</p>	<p>Amount of each Receipt this Period 626.00</p>
<p>F. Full Name, Mailing Address and Zip Code James Rector 415 Beckrich Rd. Suite 350 Panama City Beach, FL 32407-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer St. Joe Corp.  Occupation Senior Management</p> <p>Aggregate Year-to-Date -&gt; 200.00</p>	<p>Date (month, day, year) 04/17/2000</p>	<p>Amount of each Receipt this Period 200.00</p>
<p>G. Full Name, Mailing Address and Zip Code Robert Rhodes 1650 Prudential Dr. No. 400 Jacksonville, FL 32207-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Steele, Hector &amp; Davis  Occupation Attorney</p> <p>Aggregate Year-to-Date -&gt; 200.00</p>	<p>Date (month, day, year) 04/17/2000</p>	<p>Amount of each Receipt this Period 200.00</p>

SUBTOTAL of Receipts This Page (optional)	1,926.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)  
Boya For Congress

A. Full Name, Mailing Address and Zip Code Martha Rish Rt. 1 Box 870 Wewahitchka, FL 32465- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)		Name of Employer Date (month, day, year) Occupation Home Maker Aggregate Year-to-Date ->		Amount of Each Receipt this Period 04/17/2000 500.00 500.00	
B. Full Name, Mailing Address and Zip Code Martha Rish Rt. 1 Box 870 Wewahitchka, FL 32465- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)		Name of Employer Date (month, day, year) Occupation Home Maker Aggregate Year-to-Date ->		Amount of Each Receipt this Period 05/17/2000 300.00 800.00 IN-KIND	
C. Full Name, Mailing Address and Zip Code Ralph Rish Rt. 1 Box 870 450 Blake Drive Wewahitchka, FL 32465- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)		Name of Employer Date (month, day, year) Occupation Peoble Rish Engineer Aggregate Year-to-Date ->		Amount of Each Receipt this Period 05/17/2000 300.00 300.00 IN-KIND	
D. Full Name, Mailing Address and Zip Code William Rish P.O. Box 39 Mont. MAINE JOE, FL 32456- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)		Name of Employer Date (month, day, year) Occupation Rish, Gibson & Jones, PA Attorney Aggregate Year-to-Date ->		Amount of Each Receipt this Period 04/17/2000 250.00 250.00	
E. Full Name, Mailing Address and Zip Code Peter Rummell 2538 River Rd. Jacksonville, FL 32207- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)		Name of Employer Date (month, day, year) Occupation St. Joe Corp. C.E.O. Aggregate Year-to-Date ->		Amount of Each Receipt this Period 04/17/2000 200.00 200.00	
F. Full Name, Mailing Address and Zip Code John R. Stalvey 806 N. Laurel St. Viduan, GA 31643- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)		Name of Employer Date (month, day, year) Occupation Citizens National Bank Banker Aggregate Year-to-Date ->		Amount of Each Receipt this Period 06/05/2000 250.00 250.00	
G. Full Name, Mailing Address and Zip Code Jerome Tucker 5039 Jumping Gulley Rd. Valdosta, GA 31601 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)		Name of Employer Date (month, day, year) Occupation Griffin Chemical Corp. Representative Aggregate Year-to-Date ->		Amount of Each Receipt this Period 06/05/2000 200.00 200.00	

SUBTOTAL of Receipts This Page (optional)	2,000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (In Full)**  
Boyd For Congress

<b>A. Full Name, Mailing Address and Zip Code</b> David Warriner Post Office Box 280  Fort Saint Joe, FL 32456- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> Tapper & Company	<b>Date (month, day, year)</b> 04/17/2000	<b>Amount of Each Receipt this Period</b> 500.00
	<b>Occupation</b> Owner	<b>Aggregate Year-to-Date -&gt;</b> 500.00	
<b>B. Full Name, Mailing Address and Zip Code</b>  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b>	<b>Date (month, day, year)</b> / /	<b>Amount of Each Receipt this Period</b>
	<b>Occupation</b>	<b>Aggregate Year-to-Date -&gt;</b>	
<b>C. Full Name, Mailing Address and Zip Code</b>  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b>	<b>Date (month, day, year)</b> / /	<b>Amount of Each Receipt this Period</b>
	<b>Occupation</b>	<b>Aggregate Year-to-Date -&gt;</b>	
<b>D. Full Name, Mailing Address and Zip Code</b>  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b>	<b>Date (month, day, year)</b> / /	<b>Amount of Each Receipt this Period</b>
	<b>Occupation</b>	<b>Aggregate Year-to-Date -&gt;</b>	
<b>E. Full Name, Mailing Address and Zip Code</b>  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b>	<b>Date (month, day, year)</b> / /	<b>Amount of Each Receipt this Period</b>
	<b>Occupation</b>	<b>Aggregate Year-to-Date -&gt;</b>	
<b>F. Full Name, Mailing Address and Zip Code</b>  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b>	<b>Date (month, day, year)</b> / /	<b>Amount of Each Receipt this Period</b>
	<b>Occupation</b>	<b>Aggregate Year-to-Date -&gt;</b>	
<b>G. Full Name, Mailing Address and Zip Code</b>  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b>	<b>Date (month, day, year)</b> / /	<b>Amount of Each Receipt this Period</b>
	<b>Occupation</b>	<b>Aggregate Year-to-Date -&gt;</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional)	500.00
<b>TOTAL</b> This Period (last page this line number only)	\$,620.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)  
Boyd For Congress

A. Full Name, Mailing Address and Zip Code Brown & Williamson Tobacco EMPAC Mr. Ricky Powell, Mgr Gov't Affairs 1701 Pennsylvania Avenue, NW Washington, DC 20006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 1,500.00
	Occupation	04/04/2000	
Aggregate Year-to-Date ->		2,500.00	
B. Full Name, Mailing Address and Zip Code Nat'l Cattlemen's Deaf Association PAC Attn: Tandy Harrison Vice President, Public Policy Washington, DC 20004- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	05/19/2000	
Aggregate Year-to-Date ->		1,000.00	
C. Full Name, Mailing Address and Zip Code Harris FEPAC Attn: Ray White Harris Corporation Melbourne, FL 32919- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 1,000.00
	Occupation	05/19/2000	
Aggregate Year-to-Date ->		1,000.00	
D. Full Name, Mailing Address and Zip Code American Trucking Association PAC Attn: Royal K. Roth 430 First St., S.E. Washington, DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 1,000.00
	Occupation	06/03/2000	
Aggregate Year-to-Date ->		1,500.00	
E. Full Name, Mailing Address and Zip Code A. Duda & Sons, Inc., PAC Attn: Doug Mann Post Office Box 257 Oviedo, FL 32765- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	06/20/2000	
Aggregate Year-to-Date ->		1,500.00	
F. Full Name, Mailing Address and Zip Code Action Gate for Rural Electric PAC Attn: Wally Rustad 4301 Wilson Blvd. Arlington, VA 22203-1860 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 1,000.00
	Occupation	05/19/2000	
Aggregate Year-to-Date ->		2,000.00	
G. Full Name, Mailing Address and Zip Code American Association of Anesthesiologists Inc. 520 N. Northwest HWY Oak Ridge, IL 60048- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 1,000.00
	Occupation	05/19/2000	
Aggregate Year-to-Date ->		3,000.00	

SUBTOTAL of Receipts This Page (optional)	6,500.00
TOTAL This Period (last page this line number only)	



**SCHEDULE A**

**ITEMIZED RECEIPTS**

See separate schedule(s) for each category of the related primary page.	PAGE	OF
	2	8
FOR LINE NUMBER		
11(c)		

All 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)**  
Boyd For Congress

A. Full Name, Mailing Address and Zip Code	NAME OF EMPLOYER	Date (month, day, year)	Amount of Each Receipt this Period
Alabama Farmers Federation PAC Attn: Keith Gray P.O. Box 11023 Montgomery, AL 36191- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		04/04/2000	1,000.00
Aggregate Year-to-Date ->		1,000.00	
B. Full Name, Mailing Address and Zip Code American Podiatric Medical PAC Attn: John Carson 9312 Old Georgetown Road Bethesda, MD 20814-1621 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		05/19/2000	500.00
Aggregate Year-to-Date ->		500.00	
C. Full Name, Mailing Address and Zip Code AMERICAN HOTEL & MOTEL ASSN. Attn: John Connors 1201 New York Avenue, N.W. Washington, DC 20003-931 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		06/03/2000	500.00
Aggregate Year-to-Date ->		1,000.00	
D. Full Name, Mailing Address and Zip Code Blue Cross & Blue Shield Assn. PAC Attn: Barry Trimble 1310 G Street, N.W., 12th. Floor Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		06/03/2000	500.00
Aggregate Year-to-Date ->		1,500.00	
E. Full Name, Mailing Address and Zip Code Blue Dog PAC P.O. Box 7668 Washington, DC 20044-7668 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		06/10/2000	2,000.00
Aggregate Year-to-Date ->		2,000.00	
F. Full Name, Mailing Address and Zip Code Committee for Advancement of SE Cotton PAC Attn: John Maguire Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		04/04/2000	1,000.00
Aggregate Year-to-Date ->		2,000.00	
G. Full Name, Mailing Address and Zip Code Committee for Advancement of SE Cotton PAC Attn: John Maguire Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		06/05/2000	500.00
Aggregate Year-to-Date ->		2,500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional)	5,000.00
<b>TOTAL</b> This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of tax detailed on this page	PAGE	OF
	3	9
FOR LINE NUMBER 11(c)		

Any information copied from such reports and statements may not be 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)  
Boyd For Congress

A. Full Name, Mailing Address and Zip Code CSA Trans., INC. PAC 1331 Pennsylvania Avenue, N.W. Suite 560 Washington, DC 20004-	Name of Employer CSX Transportation Inc.	Date (month, day, year) 06/03/2000	Amount of Each Receipt this Period 500.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year-to-Date -> 500.00	
B. Full Name, Mailing Address and Zip Code Credit Union Legislative Action Council Attn: Aletta Shutes; FLCredit Union Leag. 205 Fifteenth Street, N.W. Suite 300 Washington, DC 20005 2207	Name of Employer	Date (month, day, year) 06/26/2000	Amount of Each Receipt this Period 1,000.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year-to-Date -> 1,000.00	
C. Full Name, Mailing Address and Zip Code Cargill, INC. PAC  P.O. Box 9300 Minneapolis, MN 55440-	Name of Employer	Date (month, day, year) 06/15/2000	Amount of Each Receipt this Period 1,000.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year-to-Date -> 1,000.00	
D. Full Name, Mailing Address and Zip Code Champions for Good Gov. of Champ. Int'l Attn: Jeanne Connelly 1875 Eye St. Ste. 540 Washington, DC 20006-	Name of Employer	Date (month, day, year) 05/17/2000	Amount of Each Receipt this Period 500.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year-to-Date -> 1,000.00	
E. Full Name, Mailing Address and Zip Code Chemical Manufacturers Association, PAC 1300 Wilson Blvd. Arlington, VA 22209	Name of Employer	Date (month, day, year) 05/05/2000	Amount of Each Receipt this Period 500.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year-to-Date -> 500.00	
F. Full Name, Mailing Address and Zip Code Committee for Advancement of Cotton P.O. Box 820292 Memphis, TN 38102-	Name of Employer	Date (month, day, year) 06/05/2000	Amount of Each Receipt this Period 1,000.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year-to-Date -> 1,000.00	
G. Full Name, Mailing Address and Zip Code Dairy Farmers of America, Inc. DEFAC Attn: Sam Stone 10220 N Executive Hills Blvd Kansas City, MO 65153-	Name of Employer	Date (month, day, year) 05/19/2000	Amount of Each Receipt this Period 1,000.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year-to-Date -> 2,500.00	

SUBTOTAL of Receipts This Page (optional)	3,500.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Any information copied from such reports and statements may not be used by any person for the purpose of collecting contributions or for commercial purposes, other than using the name and address of any political committee to collect contributions from such committee.

**NAME OF COMMITTEE (In Full)**  
Doyd For Congress

<b>A. Full Name, Mailing Address and Zip Code</b> Dow Chemical PAC 2030 Dow Center Midland, MI 48674-	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 05/18/2000	<b>Amount of Each Receipt this Period</b> 500.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Aggregate Year-to-Date -&gt;</b> 500.00		
<b>B. Full Name, Mailing Address and Zip Code</b> Florida Citrus Mutual PAC Attn: Andy LaVigne P.O. Box 89 Lakeland, FL 33802	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 04/04/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Aggregate Year-to-Date -&gt;</b> 1,000.00		
<b>C. Full Name, Mailing Address and Zip Code</b> Florida Sugar Cane League PAC 115 South Lopez St. Clewiston, FL 33440-	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 04/06/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Aggregate Year-to-Date -&gt;</b> 1,000.00		
<b>D. Full Name, Mailing Address and Zip Code</b> Florida Peanut Producers Association Attn: Jeff Crawford 2741 Penn Ave. Marianna, FL 32448-	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 04/04/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Aggregate Year-to-Date -&gt;</b> 1,000.00		
<b>E. Full Name, Mailing Address and Zip Code</b> Georgia Pacific Employees Fund 1875 Eye St., N.W., Suite 115 Washington, DC 20006-	<b>Name of Employer</b> Georgia-Pacific Corporation <b>Occupation</b>	<b>Date (month, day, year)</b> 05/19/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Aggregate Year-to-Date -&gt;</b> 1,000.00		
<b>F. Full Name, Mailing Address and Zip Code</b> NPK Org. Political Action Club Attn: Jennifer Menarczik 1850 M. Street, N.W. Washington, DC 20036-	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 06/30/2000	<b>Amount of Each Receipt this Period</b> 2,000.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Aggregate Year-to-Date -&gt;</b> 2,000.00		
<b>G. Full Name, Mailing Address and Zip Code</b> General Dynamics Voluntary PAC Attn: Cork Colburn 3190 Fairview Park Drive Falls Church, VA 22042-4523	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 05/19/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Aggregate Year-to-Date -&gt;</b> 1,500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional)	7,500.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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 copyrigger.

**NAME OF COMMITTEE (In Full)**  
Boyd For Congress

<b>A. Full Name, Mailing Address and Zip Code</b> Georgia Peanut Producers PAC Attn: Wayne Christian, President 1408 W. Third Ave. Albany, GA 31707- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> _____ <b>Occupation</b> _____	<b>Date (month, day, year)</b> 04/10/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
	<b>Aggregate Year-to-Date -&gt;</b> 1,000.00		
<b>B. Full Name, Mailing Address and Zip Code</b> Gray, Harris, & Robinson PAC 201 E. Pine Street, Suite 1200 Orlando, FL 32801- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> _____ <b>Occupation</b> _____	<b>Date (month, day, year)</b> 06/03/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
	<b>Aggregate Year-to-Date -&gt;</b> 1,000.00		
<b>C. Full Name, Mailing Address and Zip Code</b> Internat'l Union of Operating Engineers Attn: Frank Hanley and Mike Murphy 1125 Seventeenth St., N.W. Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> _____ <b>Occupation</b> _____	<b>Date (month, day, year)</b> 05/19/2000	<b>Amount of Each Receipt this Period</b> 500.00
	<b>Aggregate Year-to-Date -&gt;</b> 500.00		
<b>D. Full Name, Mailing Address and Zip Code</b> Koch Industries Inc. PAC 1450 G Street, NW Suite 445 Attn: Kimberly Kehoe Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> _____ <b>Occupation</b> _____	<b>Date (month, day, year)</b> 05/19/2000	<b>Amount of Each Receipt this Period</b> 500.00
	<b>Aggregate Year-to-Date -&gt;</b> 1,500.00		
<b>E. Full Name, Mailing Address and Zip Code</b> Louisiana Pacific Corp. Fed. PAC Attn: Gwen Goldspink 111 S.W. Fifth Avenue Portland, OR 97204- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> _____ <b>Occupation</b> _____	<b>Date (month, day, year)</b> 06/03/2000	<b>Amount of Each Receipt this Period</b> 500.00
	<b>Aggregate Year-to-Date -&gt;</b> 500.00		
<b>F. Full Name, Mailing Address and Zip Code</b> May Department Stores PAC 611 Olive Street Saint Louis, MO 63101- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> _____ <b>Occupation</b> _____	<b>Date (month, day, year)</b> 06/30/2000	<b>Amount of Each Receipt this Period</b> 500.00
	<b>Aggregate Year-to-Date -&gt;</b> 500.00		
<b>G. Full Name, Mailing Address and Zip Code</b> McDermott Will & Emery PAC 1200 - 10th St. NW, 6th Floor Washington, DC 20036-2506 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> _____ <b>Occupation</b> _____	<b>Date (month, day, year)</b> 06/03/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
	<b>Aggregate Year-to-Date -&gt;</b> 1,000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional)	5,000.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Any information required 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 individual to solicit contributions from such individual.

**NAME OF COMMITTEE (In Full)**  
**Boyd for Congress**

<b>A. Full Name, Mailing Address and Zip Code</b> Nat. Council of Farmer Coop. PAC 50 F. Street, N.W. Suite 900 Washington, DC 20001-	<b>Name of Employer</b> _____ _____	<b>Date (month, day, year)</b> 04/10/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
	<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	<b>Aggregate Year-to-Date -&gt;</b> 1,000.00	
<b>B. Full Name, Mailing Address and Zip Code</b> National Beer Wholesalers Association 1100 South Washington Street, 1st Floor Attn: Ronald Sarasin Alexandria, VA 22314-	<b>Name of Employer</b> _____ _____	<b>Date (month, day, year)</b> 04/10/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
	<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	<b>Aggregate Year-to-Date -&gt;</b> 1,000.00	
<b>C. Full Name, Mailing Address and Zip Code</b> National Chicken Council PAC Attn: Mary M. Colville 1015 Fifteenth Street, NW, Suite 930 Washington, DC 20005	<b>Name of Employer</b> _____ _____	<b>Date (month, day, year)</b> 05/19/2000	<b>Amount of Each Receipt this Period</b> 500.00
	<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	<b>Aggregate Year-to-Date -&gt;</b> 1,500.00	
<b>D. Full Name, Mailing Address and Zip Code</b> Newport News Shipbuilding SHIPPAC Attn: Patrick Tucker 801 Pennsylvania Ave., NW, Ste. 350 Washington, DC 20004-	<b>Name of Employer</b> _____ _____	<b>Date (month, day, year)</b> 06/03/2000	<b>Amount of Each Receipt this Period</b> 500.00
	<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	<b>Aggregate Year-to-Date -&gt;</b> 1,000.00	
<b>E. Full Name, Mailing Address and Zip Code</b> Phillip Morris Companies Inc. PAC 120 Park Avenue New York, NY 10017-	<b>Name of Employer</b> _____ _____	<b>Date (month, day, year)</b> 06/03/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
	<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	<b>Aggregate Year-to-Date -&gt;</b> 2,000.00	
<b>F. Full Name, Mailing Address and Zip Code</b> R W Reynolds Political Action Committee 401 N. Main Street Winston-Salem, NC 27102-	<b>Name of Employer</b> _____ _____	<b>Date (month, day, year)</b> 05/22/2000	<b>Amount of Each Receipt this Period</b> 500.00
	<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	<b>Aggregate Year-to-Date -&gt;</b> 1,500.00	
<b>G. Full Name, Mailing Address and Zip Code</b> Realtors PAC 430 N. Michigan Ave. Chicago, IL 60611-	<b>Name of Employer</b> _____ _____	<b>Date (month, day, year)</b> 05/17/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
	<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	<b>Aggregate Year-to-Date -&gt;</b> 1,000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional)	5,500.00
<b>TOTAL</b> This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

See separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
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FOR LINE NUMBER		
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Any information supplied here such Reports and Statements may not be valid or used by any person for the purpose of soliciting contributions or for campaign purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code Realtors PAC 430 N. Michigan Ave. Chicago, IL 60611-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 06/03/2000</p> <p>1,500.00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>B. Full Name, Mailing Address and Zip Code Responsible Government Committee Of Gulf Employees One Energy Place Pensacola, FL 32520-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 04/04/2000</p> <p>9,000.00</p>	<p>Amount of Each Receipt this Period 4,000.00</p>
<p>C. Full Name, Mailing Address and Zip Code Sallie Mae, Inc. PAC 11600 Sallie Mae Dr. Reston, VA 20190-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 05/19/2000</p> <p>500.00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Southern Wine &amp; Spirits PAC 1600 N.W. 163rd St. Miami, FL 33169-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 06/30/2000</p> <p>1,000.00</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>E. Full Name, Mailing Address and Zip Code Southern Company Employees PAC 241 Ralph McGill Blvd. Atlanta, GA 30308-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) '00 General</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 04/10/2000</p> <p>4,000.00</p>	<p>Amount of Each Receipt this Period 4,000.00</p>
<p>F. Full Name, Mailing Address and Zip Code National Turkey Federation PAC Attn: Joel Brandenburger 1225 New York Avenue NW Ste 400 Washington, DC 20005-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 04/04/2000</p> <p>500.00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>G. Full Name, Mailing Address and Zip Code National Turkey Federation PAC Attn: Joel Brandenburger 1225 New York Avenue NW Ste 400 Washington, DC 20005-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 06/03/2000</p> <p>1,000.00</p>	<p>Amount of Each Receipt this Period 500.00</p>

SUBTOTAL of Receipts This Page (optional)	11,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

See separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	8	8
FOR LINE NUMBER		
11(c)		

Any information copied from such Reports and Statements may not be used in whole or any portion for the purpose of soliciting contributions or for commercial purposes, unless first notifying the name and address of any political committee to solicit contributions from such sources.

NAME OF COMMITTEE (In Full)  
Boyd For Congress

A. Full Name, Mailing Address and Zip Code Television & Radio PAC Attn: Amanda Kornegay 1771 N Street, N.W. Washington, DC 20036	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	06/12/2009	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		500.00
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	47,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE	OF
1	4
FOR LINE NUMBER	
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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)  
Boyd For Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Alltel/360 Communications P.O. Box 96019 Charlotte, NC 28296-0019	Cell Bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/05/2000	325.00
Alltel/360 Communications P.O. Box 96010 Charlotte, NC 28296-0019	Cell Bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/23/2000	122.33
Aristotle Publishing 105 Pennsylvania Ave Washington, DC 20003-	1 yr. maintenance/support Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/31/2000	1,550.00
Boston Market 7346 Wilson Blvd. Falls Church, VA 22046-	Political Dinner Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/21/2000	253.53
Democratic Congressional Campaign Comm 430 S. Capitol St. Washington, DC 20003-	Q2 dues Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/31/2000	7,500.00
Andy Ellis 1301 Ocala Rd. Apt. 125 A Tallahassee, FL 32304-	Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	05/08/2000	157.84
Intelligent Internet Strategies, LLC Attn: Bob Homme P.O. 15974 Tallahassee, FL 32317-	Web Page Development Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/07/2000	1,575.00

EUBTOTAL of Disbursements This Page (optional) 11,584.29

TOTAL This Period (last page this line number only)



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule (a) for each category of the so-called "auxiliary" page

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 promotional purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**  
Boyd For Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The National Democratic Club 30 Ivy St., S.E. Washington, DC 20003-4071	Catering  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/03/2000	957.53
The National Democratic Club 30 Ivy St., S.E. Washington, DC 20003-4071	Catering  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/31/2000	255.41
The National Democratic Club 30 Ivy St., S.E. Washington, DC 20003-4071	May 17th lunch F/R  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/23/2000	507.82
Petty Cash 501 E. Tennessee St. Tallahassee, FL 32308	Replenish Petty Cash Fund  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/08/2000	100.00
Robert Redding 405 Nucker Pl. Alexandria, VA 22301-	Lunch fundraiser 3/28/00  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/04/2000	628.00  IN KIND
Martha Rish Rt. 1 Box 870 Wewahatchka, FL 32465-	Catering  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/17/2000	300.00  IN KIND
Ralph Rish Rt. 1 Box 870 450 Blake Drive Wewahatchka, FL 32465-	Catering  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/17/2000	300.00  IN KIND

<b>SUBTOTAL</b> of Disbursements This Page (optional)	3,063.76
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the detailed summary page

PAGE 3 OF 4  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)**  
Boyd For Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
State of Florida The Capital Tallahassee, FL 32399-	Billing Fee  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/10/2000	8,202.00
Sutter's Mill  Attn: Bob Doyle 442 New Jersey Ave, SE, Ste 250 Washington, DC 20003-	April Consulting Fee  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/02/2000	1,750.00
Sutter's Mill  Attn: Bob Doyle 442 New Jersey Ave, SE, Ste 250 Washington, DC 20003-	May & June Expenses  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/03/2000	3,812.00
The Windsor Group  501 East Tennessee St., Suite A Tallahassee, FL 32308-	payroll and expenses  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/02/2000	2,639.00
The Windsor Group  501 East Tennessee St., Suite A Tallahassee, FL 32308-	June Payroll and May Expenses  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/01/2000	2,353.14
Westbrook Mini Storage  PO Box 415 Attn: Diane Westbrook Monticello, FL 32345-	April & May Rent  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/03/2000	74.90
Westbrook Mini Storage  PO Box 415 Attn: Diane Westbrook Monticello, FL 32345-	June rent  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/31/2000	37.45

<b>SUBTOTAL</b> of Disbursements This Page (optional)	8,885.52
<b>TOTAL</b> This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

All information reported from such reports and statements may not be sold or used by any person for the purpose of soliciting contributions or for campaign purposes, other than using the name and address of any political candidate to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Boyd For Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Zanny Foods, Inc. PO Box 458 Perry, FL 32147-	April Fundraiser Catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/01/2000	302.79
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SUBTOTAL of Disbursements This Page (optional)	382.79
TOTAL This Period (last page this line number only)	33,806.36

**SCHEDULE D**  
 (Revised 3/80)

**DEBTS AND OBLIGATIONS**  
**Excluding Loans**
**LINE NUMBER 10**

 (Use separate schedules  
 for each numbered line)

NAME OF COMMITTEE (In Full) Boyd For Congress	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	(Outstanding Balance at Close of This Period)
Full Name, Mailing Address and Zip Code Plante & Associates, Inc. 1500 Viewmont Dr.  Charleston, WV 25302	2,000.00			2,000.00
Nature of Debt (Purpose) Research				

<b>1) SUBTOTAL</b> This total this page (optional)	
<b>2) TOTAL</b> This total last page this line number only	2,000.00
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (1000 page only)	
<b>4) ADD</b> 2) and 3) and carry forward to appropriate line of summary page last page only	2,000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

Hand Delivered

Date of Receipt

7/14/00

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED (R/C)

No Postmark

Postmark Illegible

Received from the House office of Records and Registration

Date of Receipt

Received from the Senate Office of Public Records

Date of Receipt

Other (Specify):

Postmarked

and/or Date of Receipt

Electronic Filing

*J.A.D.*  
PREPARER

7/14/00  
DATE PREPARED