

**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

WHITFIELD FOR CONGRESS COMMITTEE

ADDRESS (number and street)

P.O. BOX 391

Check if different than previously reported. (ACC)

HOPKINSVILLE

KY

42241

2. **FEC IDENTIFICATION NUMBER**

C00286983

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

KY 01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

In the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period 07 01 2005 through 09 30 2005

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 Mr. E. O. Whitfield

Signature of Treasurer Electronically Filed by Mr. E. O. Whitfield Date 10 10 2005

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

Office Use Only

FEC FORM 3
(Revised 02/2005)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

WHITFIELD FOR CONGRESS COMMITTEE

Report Covering the Period: From: M M D D Y Y Y Y To: M M D D Y Y Y Y
0 7 0 1 2 0 0 5 0 9 3 0 2 0 0 5

	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(a)).....	111537.02	397233.02
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	111537.02	397233.02
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	32516.42	120042.09
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2508.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	32516.42	117534.09
8. Cash on Hand at Close of Reporting Period (from Line 27).....	966973.89	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2005)

Page 3

Write or Type Committee Name
 WHITFIELD FOR CONGRESS COMMITTEE

Report Covering the Period: From: ^{M M} 07 ^{Y Y} 01 ^{Y Y} 2005 To: ^{Y M} 09 ^{Y P} 30 ^{Y Y} 2005

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).....	54535.00	146885.00
(ii) Unitemized.....	1625.00	10475.00
(iii) TOTAL of contributions from Individuals..... ▶	56160.00	157360.00
(b) Political Party Committees.....	0.00	246.00
(c) Other Political Committees (such as PACS).....	56377.02	239627.02
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	111537.02	397233.02
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	2508.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	3743.66	11465.37
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	115280.68	411206.39

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	32516.42	120042.09
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	21490.00	33490.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	54006.42	153532.09
<hr/>		
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....		905699.63
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....		115280.68
25. SUBTOTAL (add Line 23 and Line 24).....		1020980.31
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....		54006.42
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....		966973.89

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 65

(check only one)

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

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)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Herschel L. Abbott, Jr.		Date of Receipt M / D / Y 09 / 16 / 2005
Mailing Address 1133 - 21st Street NW, Suite 900		Transaction ID: SA11A1.18232
City Washington	State DC	Zip Code 20036-3351
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Bell South	Occupation VP Government Affairs	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Mr. Herschel L. Abbott, Jr.		Date of Receipt M / D / Y 09 / 16 / 2005
Mailing Address 1133 - 21st Street NW, Suite 900		Transaction ID: SA11A1.18244
City Washington	State DC	Zip Code 20036-3351
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Bell South	Occupation VP Government Affairs	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Dr. R. Craig Allen, DMD		Date of Receipt M / D / Y 09 / 29 / 2005
Mailing Address 314 Jonaquin Circle		Transaction ID: SA11A1.18257
City Hopkinsville	State KY	Zip Code 42240
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation Self Emp Orthodontist	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	2750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 65

(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Alan Beard		Date of Receipt M / D / Y 09 / 20 / 2005
Mailing Address 2504 South Virginia Street		Transaction ID: SA11A1.18259
City Hopkinsville	State KY	Zip Code 42240
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation Sif Emp Funeral Director	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. Trevor Bonnstedter		Date of Receipt M / D / Y 07 / 18 / 2005
Mailing Address 304 Canterbury Ct		Transaction ID: SA11A1.18053
City Mayfield	State KY	Zip Code 42066
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer West KY Rural Telephone Coop	Occupation Gen. Mgr.	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Dr. Mark V. Boswell		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 33005 Canterbury Rd.		Transaction ID: SA11A1.18181
City Avon Lake	State OH	Zip Code 44012-1588
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer University Anesthesiologist	Occupation M.D.	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 65

(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Lara L. Brown		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 11485 8th Street E		Transaction ID: SA11A1.18182
City	State	Zip Code
Treasure Island	FL	33706-1126
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer ASIPP	Occupation Exec	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mr. E. Guy Brownfield, Jr.		Date of Receipt M / D / Y 09 / 28 / 2005
Mailing Address 151 East Noel Avenue		Transaction ID: SA11A1.18260
City	State	Zip Code
Madisonville	KY	42431
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mr. Blair G. Childs		Date of Receipt M / D / Y 09 / 03 / 2005
Mailing Address 1885 Virginia Avenue		Transaction ID: SA11A1.18180
City	State	Zip Code
Mc Lean	VA	22101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer ADDA Med	Occupation Exec	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Keny Caran		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 3321 Southshore Drive		Transaction ID: SA11A1.18184
City Jacksonville	State TX	Zip Code 75766
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer N/A	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mr. Brent Delmonte		Date of Receipt M / D / Y 07 / 21 / 2005
Mailing Address 2400 N. Clarendon Blvd.		Transaction ID: SA11A1.18060
City Arlington	State VA	Zip Code 22201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Washington Council Ernst & You	Occupation Consultant	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Dr. P. Bobby Dey		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 13510 Cavanaugh Drive		Transaction ID: SA11A1.18190
City Rockville	State MD	Zip Code 20850
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Cntr for Pain Mgmt	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts TNs Page (optional)	▶	2000.00
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 9 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Dr. Elmer E. Dunbar		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 8502 Westover		Transaction ID: SA11A1.18192
City Prospect	State KY	Zip Code 40059
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Pain Control Network	Occupation Pain Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. Raymond J. Elliott		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 2015 S. Main Street		Transaction ID: SA11A1.18281
City Hopkinsville	State KY	Zip Code 42240
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self Employed	Occupation Developer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Mr. Richard D. Ellis		Date of Receipt M / D / Y 08 / 12 / 2005
Mailing Address 7265 Noble Road		Transaction ID: SA11A1.18130
City West Paducah	State KY	Zip Code 42088
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer N/A	Occupation Self Employed Businessman / farmer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	3100.00
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 10 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Barry Eveland		Date of Receipt M / D / Y 09 / 29 / 2005
Mailing Address 2405 Stagecoach Rd		Transaction ID: SA11A1.18261
City Hanson	State KY	Zip Code 42413
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Rocket Oil Co	Occupation President	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Dr. Frank Falco		Date of Receipt M / D / Y 09 / 29 / 2005
Mailing Address 108 Woodale Drive		Transaction ID: SA11A1.18262
City Kennett Square	State PA	Zip Code 19348
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Mid Atlantic Spine	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Ms. Pamela J. Garle		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 202 N. Columbus Street		Transaction ID: SA11A1.18285
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Preston, Gates	Occupation Attny	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 11 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Harold E. Gear		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 255B Admirals Walk Dr. S		Transaction ID: SA11A1.18193
City Orange Park	State LA	Zip Code 32073
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Clay Surgery Center	Occupation Administrator	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Dr. William L. Giese		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 2994 Coopertown Road		Transaction ID: SA11A1.18282
City Murray	State KY	Zip Code 42071
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer McCracken Co. Hsp/Pl Cancer Cntr	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Dr. Mark A. Goodson		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 508 Brawley School Road		Transaction ID: SA11A1.18195
City Moorestville	State NC	Zip Code 28117-9120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Rehab. Medicine & Pain Cntr	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Paula Hays		Date of Receipt M / D / Y 09 / 16 / 2005
Mailing Address 200 Tucker Lane		Transaction ID: SA11A1.18230
City Hopkinsville	State KY	Zip Code 42240
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer N/A	Occupation Housewife	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Mr. Alan S. Halfer		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 105D Thomas Jefferson St NW Ste 800		Transaction ID: SA11A1.18198
City Washington	State CA	Zip Code 20007
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Ginsberg & Halfer	Occupation CPA / Cnsltnt	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. William A. Holmer, M.D.		Date of Receipt M / D / Y 09 / 23 / 2005
Mailing Address 300 South 8th Street Suite 1B1 W		Transaction ID: SA11A1.18250
City Murray	State KY	Zip Code 42071
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	1800.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 13 / 65

(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. J. D. Howell		Date of Receipt M / D / Y 09 / 29 / 2005
Mailing Address 2035 S. Montgomery Rd.		Transaction ID: SA11A1.18264
City Cadiz	State KY	Zip Code 42211
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Sif. Emp.	Occupation Agri-Business	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Mrs. Beth Hunt		Date of Receipt M / D / Y 07 / 07 / 2005
Mailing Address 145 Prestwick Place		Transaction ID: SA11A1.18038
City Paducah	State KY	Zip Code 42001-9764
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer A & K Construction Co, Inc	Occupation Owner/Operator	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. G. Ronald James		Date of Receipt M / D / Y 08 / 06 / 2005
Mailing Address P. O. Box 2674		Transaction ID: SA11A1.18103
City Paducah	State KY	Zip Code 42002-2674
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer James Marine-Paducah River Svc.	Occupation President	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	1800.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 14 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Dr. Joseph Jasper		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 2811 Lemons Boh Rd W		Transaction ID: SA11A1.18200
City Tacoma	State WA	Zip Code 98466-1833
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer West Tacoma Surgery Cntr	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Linda S. Jencks		Date of Receipt M / D / Y 07 / 21 / 2005
Mailing Address 1136 Waverly Way		Transaction ID: SA11A1.18061
City McLean	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Linda Jencks Associates	Occupation President	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Solomon Kameon		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 8400 Island Dr. S		Transaction ID: SA11A1.18202
City Seattle	State WA	Zip Code 98118
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self Emp	Occupation Interventional Pain Specialist	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

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

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

FOR LINE NUMBER: PAGE 15 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Dr. David Kloth		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 85 Georges Hill Road		Transaction ID: SA11A1.18203
City Newtown	State CT	Zip Code 06470-1035
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer CT Pain Mgmt Care	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Mr. Edward Samuel Kutler		Date of Receipt M / D / Y 07 / 21 / 2005
Mailing Address 8405 Tree Top Circle		Transaction ID: SA11A1.18063
City Columbia	State MD	Zip Code 21045-2895
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Clark & Weinstock	Occupation Managing Director	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mr. Peter T. Madigan		Date of Receipt M / D / Y 09 / 28 / 2005
Mailing Address 903 Vicar Lane		Transaction ID: SA11A1.18293
City Alexandria	State VA	Zip Code 22302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Griffin, Johnson, Madigan, Peck	Occupation Principal	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 16 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Anuradha Manchikanti		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 366 Longview Dr		Transaction ID: SA11A1.18204
City Paducah	State KY	Zip Code 42001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer CVS Pharmacy	Occupation Pharmacist	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. Chandrakala Manchikanti		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 2075 Natchez Lane		Transaction ID: SA11A1.18206
City Paducah	State KY	Zip Code 42001-5415
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer N/A	Occupation Homemaker	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) C. Leornah Manchikanti, Dr.		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 2075 Natchez Lane		Transaction ID: SA11A1.18207
City Paducah	State KY	Zip Code 42001-5415
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer PMCP, PSC	Occupation Physican	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Murali Manchikanti		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 305 Forest Ridge Dr.		Transaction ID: SA11A1.18205
City Paducah	State KY	Zip Code 42003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer N/A	Occupation Sif/Emp Businessman	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. Ram M. Manchikanti		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 105 Paddock Ct		Transaction ID: SA11A1.18208
City Paducah	State KY	Zip Code 42003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer M P M. Inc	Occupation Exec	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) C. Dr. Lee T. Meala		Date of Receipt M / D / Y 07 / 11 / 2005
Mailing Address 1124 Hedge Lane		Transaction ID: SA11A1.18043
City Paducah	State KY	Zip Code 42001-5250
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer N/A	Occupation Sif Emp Family Practice Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Dr. Renier Mendez		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address Box 19065 Fernandez Juncos Sta.		Transaction ID: SA11A1.18209
City Sanburaca	State PR	Zip Code 00910
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer N/A	Occupation Self Emp Medical Doctor	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Dr. W. Stephan Minore Sr		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 2816 Spring Creek Rd.		Transaction ID: SA11A1.18211
City Rockford	State IL	Zip Code 61107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Rockford Anesthesiologist Assn	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Mr. Donald L. Muller SR. 3		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 456B Blue Springs Road		Transaction ID: SA11A1.18289
City Cadiz	State KY	Zip Code 42211
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	2750.00
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 10 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Dr. Bentley A. Ogoko		Date of Receipt M / D / Y 09 / 20 / 2005
Mailing Address 116 Hunters Greene Circle		Transaction ID: SA11A1.18285
City Agawam	State MA	Zip Code 01001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Pioneer Valley Pain Mgmt. Inc	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Dr. J. D. Durland		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address P. O. Box 386		Transaction ID: SA11A1.18292
City Murray	State KY	Zip Code 42071
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation Self Emp dentist	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Dr. Guprett S. Pedda		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 691B Washington		Transaction ID: SA11A1.18212
City University City	State MO	Zip Code 63130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Cntr for Pain Mgmt	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

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

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

FOR LINE NUMBER: PAGE 20 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Mrs. Sharada Pampati		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 220 Mohawk Drive		Transaction ID: SA11A1.18214
City Paducah	State KY	Zip Code 42001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer N/A	Occupation Homemaker	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. Vidyaagar Pampati		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 220 Mohawk Drive		Transaction ID: SA11A1.18215
City Paducah	State KY	Zip Code 42001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer PMCP	Occupation Staticition	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) C. Mr. Gary E. Peyton		Date of Receipt M / D / Y 09 / 29 / 2005
Mailing Address 755 Nebo Road		Transaction ID: SA11A1.18287
City Madisonville	State KY	Zip Code 42431
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Pleasant View Mining Co Inc	Occupation Coal Operator	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	2250.00
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 21 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Jimmy N. Ponder, MD		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 209 Country Club Blvd.		Transaction ID: SA11A1.18216
City Thibodaux	State LA	Zip Code 70301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Headache and Pain Center	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Whynn L. Radford, III		Date of Receipt M / D / Y 09 / 28 / 2005
Mailing Address 200 James Lyn Drive		Transaction ID: SA11A1.18269
City Hopkinsville	State KY	Zip Code 42240
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Higgins Insurance	Occupation Ins. Agent	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Betsy U. Rivera		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 450 Ashcreek Dr.		Transaction ID: SA11A1.18217
City Paducah	State KY	Zip Code 42001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer N/A	Occupation Homemaker	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Jose J. Rivera, Dr.		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 450 Ashcreek Dr.		Transaction ID: SA11A1.18218
City Paducah	State KY	Zip Code 42001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer PMCP	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Jose J. Rivera, Dr.		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 450 Ashcreek Dr.		Transaction ID: SA11A1.18218
City Paducah	State KY	Zip Code 42001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer PMCP	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) C. Dr. Steven A. Rupert		Date of Receipt M / D / Y 09 / 29 / 2005
Mailing Address 8221 Berry Drive		Transaction ID: SA11A1.18270
City Evansville	State IN	Zip Code 47710-5817
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer N/A	Occupation Self Emp Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 23 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Dr. Mahendra Ganapati		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address P.O. Box 5249		Transaction ID: SA11A1.18220
City Evansville	State IN	Zip Code 47716
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Advanced Care Pain Clinic	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. David M. Schultz, M.D.		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 595D Ridge Road		Transaction ID: SA11A1.18222
City Shorewood	State MN	Zip Code 55331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Maps Medical Pain Clinic	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Vijay Singh, Dr.		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 1111 Houghtaling St.		Transaction ID: SA11A1.18223
City Iron Mountain	State MI	Zip Code 49801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer N/A	Occupation Self Emp Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

SUBTOTAL of Receipts This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Stewart Tolbr		Date of Receipt M / D / Y 09 / 16 / 2005
Mailing Address 158D Gleneagles Drive		Transaction ID: SA11A1.18231
City Paducah	State KY	Zip Code 42001-8657
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer N/A	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Dr. Andrea M. Trascot		Date of Receipt M / D / Y 09 / 13 / 2005
Mailing Address 255B Admirals Walk Dr. S		Transaction ID: SA11A1.18224
City Orange Park	State FL	Zip Code 32073
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer The Pain Center	Occupation Pain Specialist	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) C. Mr. Matthew T. Tuten		Date of Receipt M / D / Y 09 / 16 / 2005
Mailing Address P.O. Box 310		Transaction ID: SA11A1.18235
City Hume	State VA	Zip Code 22639-0310
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Patton-Boggs	Occupation Senior Policy Adviser	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 85
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Dr. C. L. Wagoner		Date of Receipt M / D / Y 09 / 29 / 2005
Mailing Address 859D Canton Road		Transaction ID: SA11A1.18272
City	State	Zip Code
Cadiz	KY	42211
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer N/A	Occupation Self Emp Veterinarian	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mrs. Mary C. Whitfield		Date of Receipt M / D / Y 09 / 29 / 2005
Mailing Address 108 Alumni Ave.		Transaction ID: SA11A1.18276
City	State	Zip Code
Hopkinsville	KY	42240
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer N/A	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mr. William H. Wooley		Date of Receipt M / D / Y 08 / 06 / 2005
Mailing Address 1425 Wilshire Circle		Transaction ID: SA11A1.18104
City	State	Zip Code
Hopkinsville	KY	42240
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer CometesOfficeSupply&Service	Occupation Owner/Operator	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

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 26 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Dr. Peter D. Wright		Date of Receipt M / D / Y 09 / 29 / 2005	
Mailing Address 3221 Lansdowne Dr		Transaction ID: SA11A1.18278	
City Lexington	State KY	Zip Code 40602	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)	
Name of Employer Ballard-Wright PSC	Occupation Physician	Election Cycle-to-Date 2006	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼			
Full Name (Last, First, Middle Initial) B. Lester A. Zuckerman		Date of Receipt M / D / Y 09 / 13 / 2005	
Mailing Address 9917 Chapel Road		Transaction ID: SA11A1.18225	
City Potomac	State MD	Zip Code 20854-4918	Amount of Each Receipt this Period 335.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)	
Name of Employer Center for Pain Mgmt	Occupation Physician	Election Cycle-to-Date 2006	335.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	▶	1335.00
TOTAL This Period (last page this line number only)	▶	54535.00

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

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

FOR LINE NUMBER: PAGE 27 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Action Committee/Rural Electrification PAC		Date of Receipt M / D / Y 07 / 30 / 2005
Mailing Address 4301 Wilson Blvd.		Transaction ID: SA11C.18081
City Arlington	State VA	Zip Code 22203-1800
FEC ID number of contributing federal political committee. C C00002872		Amount of Each Receipt this Period 4877.02
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 4877.02	

Full Name (Last, First, Middle Initial) B. ADVANCED MEDICAL TECHNOLOGY ASSOCIATION PAC (ADVAMED PAC)		Date of Receipt M / D / Y 08 / 11 / 2005
Mailing Address 1200 G STREET NW - SUITE 400		Transaction ID: SA11C.18127
City WASHINGTON	State DC	Zip Code 20005-3814
FEC ID number of contributing federal political committee. C CD0340358		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. ALTRIA GROUP INC. POLITICAL ACTION COMMITTEE		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 120 Park Avenue		Transaction ID: SA11C.18279
City New York	State NY	Zip Code 10017
FEC ID number of contributing federal political committee. C CD0089138		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	10877.02
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 28 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION		Date of Receipt M / D / Y 07 / 21 / 2005
Mailing Address 1891 Preston White Drive		Transaction ID: SA11C.18065
City Reston	State VA	Zip Code 20191
FEC ID number of contributing federal political committee. C C00343459		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION		Date of Receipt M / D / Y 09 / 16 / 2005
Mailing Address 1891 Preston White Drive		Transaction ID: SA11C.18239
City Reston	State VA	Zip Code 20191
FEC ID number of contributing federal political committee. C C00343459		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. AMERICAN DENTAL POLITICAL ACTION CMTE.		Date of Receipt M / D / Y 07 / 06 / 2005
Mailing Address 1111 14th Street NW Suite 1100		Transaction ID: SA11C.18D19
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00000729		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 28 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. AMERICAN DENTAL POLITICAL ACTION CMTE.		Date of Receipt M / D / Y 07 / 18 / 2005
Mailing Address 1111 14th Street NW Suite 1100		Transaction ID: SA11C.18054
City State Zip Code Washington DC 20005	FEC ID number of contributing federal political committee. C C00000729	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 4500.00	

Full Name (Last, First, Middle Initial) B. AMERICAN NURSES' ASSOCIATION PAC (ANA-PAC) (FKA N-CAP)		Date of Receipt M / D / Y 08 / 03 / 2005
Mailing Address 800 MARYLAND AVENUE SW SUITE 100 West		Transaction ID: SA11C.18099
City State Zip Code WASHINGTON DC 20024	FEC ID number of contributing federal political committee. C CD0017525	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. American Public Power Assn. (POWER PAC)		Date of Receipt M / D / Y 08 / 15 / 2005
Mailing Address 2301 M STREET NW		Transaction ID: SA11C.18132
City State Zip Code WASHINGTON DC 20037	FEC ID number of contributing federal political committee. C CD0161570	Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 30 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. ARENT FOX PLLC PAC (AFPAC)		Date of Receipt M / D / Y 09 / 23 / 2005
Mailing Address Arent Fox PLLC 1050 Connecticut Avenue NW		Transaction ID: SA11C.18251
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C C00241380		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. AUTOMOTIVE FREE INTERNATIONAL TRADE AFIT-PAC		Date of Receipt M / D / Y 07 / 14 / 2005
Mailing Address 1625 Prince Street Suite 225		Transaction ID: SA11C.18046
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C C00250399		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Blue Pac Blue Cross Blue Shield Assoc.PAC		Date of Receipt M / D / Y 07 / 18 / 2005
Mailing Address 131D G Street, NW		Transaction ID: SA11C.18055
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00194748		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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 31 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Blue Pac Blue Cross Blue Shield Assoc.PAC		Date of Receipt M / D / Y 07 / 25 / 2005
Mailing Address 131D G Street, NW		Transaction ID: SA11C.18071
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee. C C00194746		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. BOSTON SCIENTIFIC CORPORATION POLITICAL ACTION COMMITTEE ('BSC PAC')		Date of Receipt M / D / Y 07 / 28 / 2005
Mailing Address ONE BOSTON SCIENTIFIC PLACE		Transaction ID: SA11C.18079
City	State	Zip Code
NATICK	MA	01760
FEC ID number of contributing federal political committee. C CD0357863		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND		Date of Receipt M / D / Y 09 / 16 / 2005
Mailing Address 1880 Capital One Drive Attn: 18050-1201		Transaction ID: SA11C.18238
City	State	Zip Code
McLean	VA	22102
FEC ID number of contributing federal political committee. C CD0326595		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 32 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. CONSERVATIVE OPPORTUNITY LEADERSHIP AND ENTERPRISE PAC AKA COLE PAC		Date of Receipt M / D / Y 09 / 28 / 2005
Mailing Address 12176 Chancery Station Circle		Transaction ID: SA11C.18327
City Reston	State VA	Zip Code 20180
FEC ID number of contributing federal political committee. C C00404392		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE; THE		Date of Receipt M / D / Y 09 / 23 / 2005
Mailing Address 701 Pennsylvania Avenue NW Suite 750		Transaction ID: SA11C.18252
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C CD0039578		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Credit Union Legislative Action Council		Date of Receipt M / D / Y 09 / 03 / 2005
Mailing Address 601 Pennsylvania Ave, NW South Bldg., Suite 600		Transaction ID: SA11C.18320
City Washington	State DC	Zip Code 20004-2601
FEC ID number of contributing federal political committee. C CD0007850		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

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 33 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. EXELON CORPORATION PAC		Date of Receipt M / D / Y 08 / 03 / 2005
Mailing Address 1 FINANCIAL PLACE 440 S. LASALLE ST. 33RD FLOOR		Transaction ID: SA11C.18100
City CHICAGO	State IL	Zip Code 60605
FEC ID number of contributing federal political committee. C C00141218		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Federal Express Corporation PAC		Date of Receipt M / D / Y 09 / 28 / 2005
Mailing Address 942 S. Shady Grove Rd.		Transaction ID: SA11C.18294
City Memphis	State TN	Zip Code 38132
FEC ID number of contributing federal political committee. C C00068892		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. General Electric Company PAC		Date of Receipt M / D / Y 07 / 21 / 2005
Mailing Address 1299 Pennsylvania Ave., NW Suite 1100		Transaction ID: SA11C.18088
City Washington	State DC	Zip Code 20004-2407
FEC ID number of contributing federal political committee. C C00024869		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

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 34 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC		Date of Receipt M / D / Y 07 / 21 / 2005
Mailing Address 3 HUNTINGTON QUADRANGLE SUITE 200S		Transaction ID: SA11C.18067
City	State	Zip Code
MELVILLE	NY	11747
FEC ID number of contributing federal political committee. C C00407080		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Humana PAC		Date of Receipt M / D / Y 08 / 15 / 2005
Mailing Address P. O. Box 1438		Transaction ID: SA11C.18131
City	State	Zip Code
Louisville	KY	40201-1438
FEC ID number of contributing federal political committee. C CD0271007		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. JOHNSON & JOHNSON EMPLOYEES' GOOD GOVERNMENT FUND		Date of Receipt M / D / Y 08 / 19 / 2005
Mailing Address One Johnson & Johnson Plaza		Transaction ID: SA11C.18139
City	State	Zip Code
New Brunswick	NJ	08533-7204
FEC ID number of contributing federal political committee. C CD0010963		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 35 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. National Assoc. of Chain Drug Stores PAC		Date of Receipt M / D / Y 07 / 21 / 2005
Mailing Address 413 North Lee Street P. O. Box 1417-D49		Transaction ID: SA11C.18069
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C C00303685		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. NATIONAL THOROUGHBRED RACING ASSOCIATION POLITICAL ACTION COMMITTEE/HORSE PAC		Date of Receipt M / D / Y 09 / 28 / 2005
Mailing Address 2525 Hamodsburg Road		Transaction ID: SA11C.18336
City LEXINGTON	State KY	Zip Code 40504
FEC ID number of contributing federal political committee. C C00360008		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. NorfolkSouthernCorp.GoodGovtFund PAC		Date of Receipt M / D / Y 08 / 11 / 2005
Mailing Address Three Commercial Place		Transaction ID: SA11C.18128
City Norfolk	State VA	Zip Code 23510-2191
FEC ID number of contributing federal political committee. C C00009282		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	▶	8500.00
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 36 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. PFIZER INC. PAC		Date of Receipt M / D / Y 09 / 29 / 2005
Mailing Address 235 EAST 42ND STREET		Transaction ID: SA11C.18297
City NEW YORK	State NY	Zip Code 10017
FEC ID number of contributing federal political committee. C C00016683		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. PFIZER INC. PAC		Date of Receipt M / D / Y 09 / 29 / 2005
Mailing Address 235 EAST 42ND STREET		Transaction ID: SA11C.18298
City NEW YORK	State NY	Zip Code 10017
FEC ID number of contributing federal political committee. C C00016683		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 5500.00	

Full Name (Last, First, Middle Initial) C. Preston Gates/Ellis & Rouvalis/Meade		Date of Receipt M / D / Y 07 / 12 / 2005
Mailing Address 1735 New York Ave., NW Suite 500		Transaction ID: SA11C.18045
City Washington	State DC	Zip Code 20008
FEC ID number of contributing federal political committee. C C00213173		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Preston/Gates/Elis & Rouvelas/Meeds		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 1735 New York Ave., NW Suite 500		Transaction ID: SA11C.18280
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C C00213173		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. RJR Political Action Committee		Date of Receipt M / D / Y 07 / 28 / 2005
Mailing Address Post Office Box 718 401 N. Main Street		Transaction ID: SA11C.18078
City Winston-Salem	State NC	Zip Code 27102
FEC ID number of contributing federal political committee. C CD0042002		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 4500.00	

Full Name (Last, First, Middle Initial) C. RJR Political Action Committee		Date of Receipt M / D / Y 09 / 16 / 2005
Mailing Address Post Office Box 718 401 N. Main Street		Transaction ID: SA11C.18240
City Winston-Salem	State NC	Zip Code 27102
FEC ID number of contributing federal political committee. C CD0042002		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 65

(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. RJR Political Action Committee		Date of Receipt M / D / Y 09 / 16 / 2005
Mailing Address Post Office Box 718 401 N. Main Street		Transaction ID: SA11C.18243
City Winston-Salem	State NC	Zip Code 27102
FEC ID number of contributing federal political committee. C C00042002		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 5500.00	

Full Name (Last, First, Middle Initial) B. SHAW GROUP INC/STONE & WEBSTER INC. POLITICAL ACTION COMMITTEE		Date of Receipt M / D / Y 09 / 16 / 2005
Mailing Address 1717 Pennsylvania Ave NW Suite 900		Transaction ID: SA11C.18242
City Washington DC	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C CD0104885		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00	

Full Name (Last, First, Middle Initial) C. United Parcel Service PAG		Date of Receipt M / D / Y 08 / 27 / 2005
Mailing Address 55 Glenlake Parkway NE		Transaction ID: SA11C.18150
City Atlanta	State GA	Zip Code 30328
FEC ID number of contributing federal political committee. C CD0064768		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

SUBTOTAL of Receipts This Page (optional)	▶	4000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 65
 (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
 WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. US-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE		Date of Receipt M / D / Y 07 / 06 / 2005
Mailing Address 1200 West 49th Street		Transaction ID: SA11C.18022
City Hialeah	State FL	Zip Code 33012
FEC ID number of contributing federal political committee. C C00387720		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1A-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	55377.02

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

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

FOR LINE NUMBER: PAGE 40 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. BB&T		Date of Receipt
Mailing Address 1002 S. Virginia Street		MM / DD / YYYY 07 / 20 / 2005
City	State	Zip Code
Hopkinsville	KY	42240
FEC ID number of contributing federal political committee. C		Transaction ID: SA15.18082
Name of Employer		Amount of Each Receipt this Period
Occupation		76.04
Receipt For: Primary General Other (specify) ▼		interest received
Election Cycle-to-Date ▼		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
460.79		

Full Name (Last, First, Middle Initial) B. BB&T		Date of Receipt
Mailing Address 1002 S. Virginia Street		MM / DD / YYYY 08 / 31 / 2005
City	State	Zip Code
Hopkinsville	KY	42240
FEC ID number of contributing federal political committee. C		Transaction ID: SA15.18151
Name of Employer		Amount of Each Receipt this Period
Occupation		75.78
Receipt For: Primary General Other (specify) ▼		interest received
Election Cycle-to-Date ▼		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
538.57		

Full Name (Last, First, Middle Initial) C. BB&T		Date of Receipt
Mailing Address 1002 S. Virginia Street		MM / DD / YYYY 09 / 30 / 2005
City	State	Zip Code
Hopkinsville	KY	42240
FEC ID number of contributing federal political committee. C		Transaction ID: SA15.18256
Name of Employer		Amount of Each Receipt this Period
Occupation		70.65
Receipt For: Primary General Other (specify) ▼		Interest Received
Election Cycle-to-Date ▼		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
607.22		

SUBTOTAL of Receipts This Page (optional)	222.47
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 41 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Planters Bank		Date of Receipt M / D / Y 07 / 10 / 2005
Mailing Address P.O.Box 1570		Transaction ID: SA15.18041
City Hopkinsville	State KY	Zip Code 42241-1570
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 226.03
Name of Employer	Occupation	interest received
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 2742.32	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Planters Bank		Date of Receipt M / D / Y 07 / 22 / 2005
Mailing Address P.O.Box 1570		Transaction ID: SA15.18050
City Hopkinsville	State KY	Zip Code 42241-1570
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 141.36
Name of Employer	Occupation	Interest received
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 2883.68	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Planters Bank		Date of Receipt M / D / Y 08 / 10 / 2005
Mailing Address P.O.Box 1570		Transaction ID: SA15.18120
City Hopkinsville	State KY	Zip Code 42241-1570
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 233.58
Name of Employer	Occupation	Interest received
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 3117.24	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	600.95
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 42 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Planters Bank		Date of Receipt M / D / Y 08 / 22 / 2005
Mailing Address P.O.Box 1570		Transaction ID: SA15.18141
City Hopkinsville	State KY	Zip Code 42241-1570
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 146.08
Name of Employer	Occupation	interest received
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 3263.32	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Planters Bank		Date of Receipt M / D / Y 09 / 10 / 2005
Mailing Address P.O.Box 1570		Transaction ID: SA15.18227
City Hopkinsville	State KY	Zip Code 42241-1570
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 233.56
Name of Employer	Occupation	Interest Received
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 3498.88	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Planters Bank		Date of Receipt M / D / Y 09 / 21 / 2005
Mailing Address P.O.Box 1570		Transaction ID: SA15.18247
City Hopkinsville	State KY	Zip Code 42241-1570
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 146.08
Name of Employer	Occupation	Interest received
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 3642.96	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	525.72
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. United Southern Bank		Date of Receipt M / D / Y 07 / 10 / 2005
Mailing Address P. O. Box 951		Transaction ID: SA15.18042
City Hopkinsville	State KY	Zip Code 42241-0851
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 267.12
Name of Employer	Occupation	interest received
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 5087.79	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. United Southern Bank		Date of Receipt M / D / Y 07 / 10 / 2005
Mailing Address P. O. Box 951		Transaction ID: SA15.18058
City Hopkinsville	State KY	Zip Code 42241-0851
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 246.58
Name of Employer	Occupation	interest received
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 5334.37	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. United Southern Bank		Date of Receipt M / D / Y 07 / 24 / 2005
Mailing Address P. O. Box 951		Transaction ID: SA15.18075
City Hopkinsville	State KY	Zip Code 42241-0851
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 267.12
Name of Employer	Occupation	Interest received
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 5601.49	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	790.82
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 44 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. United Southern Bank		Date of Receipt M / D / Y 08 / 10 / 2005
Mailing Address P. O. Box 951		Transaction ID: SA15.18123
City Hopkinsville	State KY	Zip Code 42241-0851
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 276.03
Name of Employer	Occupation	Interest received
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 5877.52	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. United Southern Bank		Date of Receipt M / D / Y 08 / 10 / 2005
Mailing Address P. O. Box 951		Transaction ID: SA15.18134
City Hopkinsville	State KY	Zip Code 42241-0851
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 254.79
Name of Employer	Occupation	Interest received
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 6132.31	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. United Southern Bank		Date of Receipt M / D / Y 08 / 24 / 2005
Mailing Address P. O. Box 951		Transaction ID: SA15.18144
City Hopkinsville	State KY	Zip Code 42241-0851
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 276.03
Name of Employer	Occupation	Interest received
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 6408.34	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	806.85
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 45 / 65

(check only one)

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. United Southern Bank		Date of Receipt M / D / Y 09 / 10 / 2005
Mailing Address P. O. Box 951		Transaction ID: SA15.18229
City Hopkinsville	State KY	Zip Code 42241-0851
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 276.03
Name of Employer	Occupation	interest received
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 6684.37	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)41a-1)

Full Name (Last, First, Middle Initial) B. United Southern Bank		Date of Receipt M / D / Y 09 / 10 / 2005
Mailing Address P. O. Box 951		Transaction ID: SA15.18245
City Hopkinsville	State KY	Zip Code 42241-0851
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 254.79
Name of Employer	Occupation	Interest Received
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 6839.18	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)41a-1)

Full Name (Last, First, Middle Initial) C. United Southern Bank		Date of Receipt M / D / Y 09 / 24 / 2005
Mailing Address P. O. Box 951		Transaction ID: SA15.18253
City Hopkinsville	State KY	Zip Code 42241-0851
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 276.03
Name of Employer	Occupation	Interest received
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 7215.19	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)41a-1)

SUBTOTAL of Receipts This Page (optional)	806.85
TOTAL This Period (last page this line number only)	3743.66

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 46 / 65

<input checked="" type="checkbox"/>	17 20a	<input type="checkbox"/>	18 20b	<input type="checkbox"/>	19a 20c	<input type="checkbox"/>	19b 21
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NAME OF COMMITTEE (In Full)
 WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 1002 S. Virginia Street

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
 Ovrhd: Analysis Srvc Chrg

Candidate Name

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

001
 Category/
 Type

Transaction ID: SB17.18076

Date of Disbursement

07 / 21 / 2005

Amount of Each Disbursement this Period

42.91

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

Full Name (Last, First, Middle Initial)

B. BB&T

Mailing Address 1002 S. Virginia Street

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
 Ovrhd: Fee chrg check deposit slips

Candidate Name

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

001
 Category/
 Type

Transaction ID: SB17.18136

Date of Disbursement

08 / 17 / 2005

Amount of Each Disbursement this Period

5.13

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

Full Name (Last, First, Middle Initial)

C. BB&T

Mailing Address 1002 S. Virginia Street

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
 Ovrhd: Analysis Srvc Chrg

Candidate Name

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

001
 Category/
 Type

Transaction ID: SB17.18152

Date of Disbursement

08 / 22 / 2005

Amount of Each Disbursement this Period

24.08

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

SUBTOTAL of Disbursements This Page (optional) ▶

72.12

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 47 / 65

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 1002 S. Virginia Street

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
Ovrhd: Acct. Analysis Chrg

Candidate Name

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

State: District

001
Category/
Type

Transaction ID: SB17.1824B

Date of Disbursement

09 / 23 / 2005

Amount of Each Disbursement this Period

20.13

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

Full Name (Last, First, Middle Initial)

B. BB&T Bankcard Corporation

Mailing Address P.O. Box 580362

City Charlotte State NC Zip Code 28258-0362

Purpose of Disbursement
Ovrhd: Credit Card Pmnt

Candidate Name

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

State: District

001
Category/
Type

Transaction ID: SB17.18023

Date of Disbursement

07 / 07 / 2005

Amount of Each Disbursement this Period

478.16

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

Full Name (Last, First, Middle Initial)

C. USPS Hopkinsville Office

Mailing Address 105 S Main Street

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
Ovrhd: Postage 5/27/05

Candidate Name

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

State: District

001
Category/
Type

Transaction ID: SB17.18023.1

Date of Disbursement

07 / 07 / 2005

Amount of Each Disbursement this Period

B.15

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

499.29

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 48 / 65

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
BB&T Bankcard Corporation

Mailing Address P.O. Box 580362

City Charlotte State NC Zip Code 28258-0362

Purpose of Disbursement
Ovhd: Credit Card Pmnt

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type 001

Transaction ID: SB17.18084
Date of Disbursement
08 / 02 / 2005

Amount of Each Disbursement this Period
530.00

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

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

Mailing Address 190 Clinic Dr.

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
Ovhd: office supplies 6/25/05

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type 001

Transaction ID: SB17.18084.0
Date of Disbursement
08 / 02 / 2005

Amount of Each Disbursement this Period
44.50

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

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
USPS Hopkinsville Office

Mailing Address 105 S Main Street

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
Ovhd: Certified mail 7/1/05

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type

Transaction ID: SB17.18084.1
Date of Disbursement
08 / 02 / 2005

Amount of Each Disbursement this Period
4.42

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ **530.00**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 49 / 65

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. USPS Hopkinsville Office

Mailing Address 105 S Main Street

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
Ovhd: certified mail 7/8/05

Candidate Name

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

State: District

001
Category/
Type

Transaction ID: SB17.18084.2
Date of Disbursement

08 / 02 / 2005

Amount of Each Disbursement this Period

4.42

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. USPS Hopkinsville Office

Mailing Address 105 S Main Street

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
Ovhd: certified mail 7/19/05

Candidate Name

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

State: District

001
Category/
Type

Transaction ID: SB17.18084.4
Date of Disbursement

08 / 02 / 2005

Amount of Each Disbursement this Period

4.42

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Prime Rib - Washington DC

Mailing Address 2020 K Street, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement
Ovhd: Dinner KY Constituents 7/22/05

Candidate Name

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

State: District

001
Category/
Type

Transaction ID: SB17.18084.5
Date of Disbursement

08 / 02 / 2005

Amount of Each Disbursement this Period

428.94

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 50 / 65

<input checked="" type="checkbox"/>	17 20a	<input type="checkbox"/>	18 20b	<input type="checkbox"/>	19a 20c	<input type="checkbox"/>	19b 21
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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
A. BB&T Bankcard Corporation

Mailing Address P.O. Box 580362

City Charlotte State NC Zip Code 28258-0362

Purpose of Disbursement
Ovhd: Credit Card Pmnt

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.18164
Date of Disbursement
09 / 07 / 2005

Amount of Each Disbursement this Period
374.51

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

001
Category/
Type

Full Name (Last, First, Middle Initial)
B. Charlie's Steak House

Mailing Address 14850 Highway 41 S.

City Oak Grove State KY Zip Code 42262

Purpose of Disbursement
Ovhd: Dinner with Staff 8/6/05

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.18164.0
Date of Disbursement
09 / 07 / 2005

Amount of Each Disbursement this Period
105.54

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

[MEMO ITEM]

001
Category/
Type

Full Name (Last, First, Middle Initial)
C. USPS Hopkinsville Office

Mailing Address 105 S Main Street

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
Ovhd: Priority&Certified Mail 8/9&24/05

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.18164.1
Date of Disbursement
09 / 07 / 2005

Amount of Each Disbursement this Period
8.37

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

[MEMO ITEM]

001
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶ **374.51**

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 51 / 65

<input checked="" type="checkbox"/>	17 20a	<input type="checkbox"/>	18 20b	<input type="checkbox"/>	19a 20c	<input type="checkbox"/>	19b 21
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NAME OF COMMITTEE (In Full)
 WHITFIELD FOR CONGRESS COMMITTEE

A. Malone's

Full Name (Last, First, Middle Initial)
 Malone's

Mailing Address 3347 Tates Creek Road

City Lexington State KY Zip Code 42502

Purpose of Disbursement
 FRExp: 8/14 Dinner Potential FR Hosts & Co Hosts

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

OD3 Category/Type

Transaction ID: SB17.18164.3
 Date of Disbursement
 09 / 07 / 2005

Amount of Each Disbursement this Period
 151.52

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B. Bogart Associates Inc.

Full Name (Last, First, Middle Initial)
 Bogart Associates Inc.

Mailing Address 1200 Trinity Dr.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
 FR Exp: Fr Constnl July 05 Retainer

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

OD3 Category/Type

Transaction ID: SB17.18008
 Date of Disbursement
 07 / 01 / 2005

Amount of Each Disbursement this Period
 2500.00

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

C. Bogart Associates Inc.

Full Name (Last, First, Middle Initial)
 Bogart Associates Inc.

Mailing Address 1200 Trinity Dr.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
 FR Exp: Reimb Exp Incurred

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

OD3 Category/Type

Transaction ID: SB17.18009
 Date of Disbursement
 07 / 01 / 2005

Amount of Each Disbursement this Period
 538.26

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

SUBTOTAL of Disbursements This Page (optional) ▶ **3039.26**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 52 / 65

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
A. FedEx Corporation

Mailing Address 101 Constitution Avenue N.W.
Suite 801 E

City Washington State DC Zip Code 20510

Purpose of Disbursement
FR Exp: FedEx Shp 6/3 & 10/ 05

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

OD3
Category/
Type

Transaction ID: SB17.18009.0
Date of Disbursement
07 / 01 / 2005

Amount of Each Disbursement this Period
24.28

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. USPS

Mailing Address Alexandria

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
FR Exp: 3 FR Mailings 7/15-6/7 & 3/11/05

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

OD3
Category/
Type

Transaction ID: SB17.18009.1
Date of Disbursement
07 / 01 / 2005

Amount of Each Disbursement this Period
505.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. Bogart Associates Inc.

Mailing Address 1200 Trinity Dr.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
FR Exp: August retainer FR Cnsknt

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

OD3
Category/
Type

Transaction ID: SB17.18093
Date of Disbursement
08 / 02 / 2005

Amount of Each Disbursement this Period
2500.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ **2500.00**

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 53 / 65

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
A. Bogart Associates Inc.

Mailing Address 1200 Trinity Dr.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
FRExp: FRCnsfrt Retainer Sept 05

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type 003

Transaction ID: SB17.18246
Date of Disbursement
09 / 20 / 2005

Amount of Each Disbursement this Period
2500.00

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

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

Mailing Address 300 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
FRExp: Cater FR Luncheon 6/7/05

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type 003

Transaction ID: SB17.18016
Date of Disbursement
07 / 05 / 2005

Amount of Each Disbursement this Period
1604.99

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

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

Mailing Address 300 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
FRExp: Cater food 8/23/05 FR

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type 003

Transaction ID: SB17.18056
Date of Disbursement
07 / 18 / 2005

Amount of Each Disbursement this Period
573.21

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

SUBTOTAL of Disbursements This Page (optional) 4678.20

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
 (check only one)

PAGE 54 / 65

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

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NAME OF COMMITTEE (In Full)
 WHITFIELD FOR CONGRESS COMMITTEE

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

Mailing Address 300 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
 FRExp: cater & host 7/14/05 Event

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type 003

Transaction ID: SB17.18077
 Date of Disbursement
 07 / 28 / 2005

Amount of Each Disbursement this Period
 808.50

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

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

Mailing Address 300 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
 Ovrhd: 7/05 Statmnt/GR Lunch Food

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type

Transaction ID: SB17.18147
 Date of Disbursement
 08 / 28 / 2005

Amount of Each Disbursement this Period
 57.83

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

Full Name (Last, First, Middle Initial)
C. Cinergy Communications

Mailing Address P.O. Box 740094

City Cincinnati State OH Zip Code 45274-0094

Purpose of Disbursement
 Ovrhd: Office phone bill

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type 0D1

Transaction ID: SB17.18014
 Date of Disbursement
 07 / 05 / 2005

Amount of Each Disbursement this Period
 144.87

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

SUBTOTAL of Disbursements This Page (optional) ▶ **1011.00**

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 55 / 65

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
A. Cinergy Communications

Mailing Address P.O. Box 740094

City Cincinnati State OH Zip Code 45274-0094

Purpose of Disbursement
Ovrhd: Office Phone

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/Type: 001

Transaction ID: SB17.18083
Date of Disbursement
08 / 01 / 2005

Amount of Each Disbursement this Period
126.42

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

Full Name (Last, First, Middle Initial)
B. Cinergy Communications

Mailing Address P.O. Box 740094

City Cincinnati State OH Zip Code 45274-0094

Purpose of Disbursement
Ovrhd: Office phone

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/Type: 001

Transaction ID: SB17.18153
Date of Disbursement
09 / 01 / 2005

Amount of Each Disbursement this Period
130.68

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

Full Name (Last, First, Middle Initial)
C. Russell E. Croft, Jr.

Mailing Address 308 Briarwood Dr.

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
Ovrhd: Office rent

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/Type: 001

Transaction ID: SB17.18039
Date of Disbursement
07 / 08 / 2005

Amount of Each Disbursement this Period
400.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ **657.10**

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)

PAGE 56 / 65

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
A. Russell E. Croft, Jr.

Mailing Address 306 Briarwood Dr.

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
Ovrhd: office rent April 05

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17.1804D
Date of Disbursement
07 / 11 / 2005

Amount of Each Disbursement this Period
400.00

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

Full Name (Last, First, Middle Initial)
B. Russell E. Croft, Jr.

Mailing Address 306 Briarwood Dr.

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
Ovrhd: Office rent

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17.1809B
Date of Disbursement
08 / 09 / 2005

Amount of Each Disbursement this Period
400.00

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

Full Name (Last, First, Middle Initial)
C. Russell E. Croft, Jr.

Mailing Address 306 Briarwood Dr.

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
Ovrhd: Office Rent

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB17.1816B
Date of Disbursement
09 / 07 / 2005

Amount of Each Disbursement this Period
400.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ 1200.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 57 / 65

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
A. Free Enterprise System

Mailing Address One Sodrel Drive

City Jeffersonville State IN Zip Code 47130

Purpose of Disbursement
FRExp: Lease vehicle for 10/8/05 FR

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type 003

Transaction ID: SB17.18166
Date of Disbursement
09 / 08 / 2005

Amount of Each Disbursement this Period
983.00

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

Full Name (Last, First, Middle Initial)
B. G & S Embroidery & Screenprinting

Mailing Address 7269 Princeton Road

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
Cmpng Mtrl: TeeShirts /Rally Events

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type 003

Transaction ID: SB17.18080
Date of Disbursement
07 / 29 / 2005

Amount of Each Disbursement this Period
1010.28

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

Full Name (Last, First, Middle Initial)
C. Gary Morse, House of Flowers

Mailing Address P. O. Box 801

City Hopkinsville State KY Zip Code 42241-0801

Purpose of Disbursement
Ovrbd: Flowers Constituent Funeral

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/Type 001

Transaction ID: SB17.18013
Date of Disbursement
07 / 05 / 2005

Amount of Each Disbursement this Period
53.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ 2046.28

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 58 / 65

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
A. Greenbrier, The

Mailing Address 300 West Main

City White Sulphur Spring State WV Zip Code 24986

Purpose of Disbursement
FR Exp: Lodging

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Transaction ID: SB17.18094
Date of Disbursement
08 / 02 / 2005

Amount of Each Disbursement this Period
1368.70

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

Full Name (Last, First, Middle Initial)
B. Constance B. Harriman

Mailing Address 108 Alumni Ave.

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
Reimburse Exp.

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Transaction ID: SB17.18109
Date of Disbursement
08 / 08 / 2005

Amount of Each Disbursement this Period
69.50

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

Full Name (Last, First, Middle Initial)
C. Higgins Insurance, Inc

Mailing Address 1819 East 9th Street

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
Ovhd: annual ins. premium

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Transaction ID: SB17.18135
Date of Disbursement
08 / 18 / 2005

Amount of Each Disbursement this Period
643.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ **2081.20**

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 59 / 65

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Hopkinsville Electric System

Mailing Address 1820 East 9th Street
P. O. Box 728

City Hopkinsville State KY Zip Code 42241-0728

Purpose of Disbursement
Ovrhd: Utility Bill

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/ Type 001

Transaction ID: SB17.18049
Date of Disbursement
07 / 15 / 2005

Amount of Each Disbursement this Period
30.35

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

B. Full Name (Last, First, Middle Initial)
Hopkinsville Electric System

Mailing Address 1820 East 9th Street
P. O. Box 728

City Hopkinsville State KY Zip Code 42241-0728

Purpose of Disbursement
Ovrhd: utility bill

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/ Type 001

Transaction ID: SB17.18133
Date of Disbursement
08 / 18 / 2005

Amount of Each Disbursement this Period
32.23

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

C. Full Name (Last, First, Middle Initial)
Hopkinsville Electric System

Mailing Address 1820 East 9th Street
P. O. Box 728

City Hopkinsville State KY Zip Code 42241-0728

Purpose of Disbursement
Ovrhd: Utility bill

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/ Type 001

Transaction ID: SB17.18180
Date of Disbursement
09 / 15 / 2005

Amount of Each Disbursement this Period
30.50

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

SUBTOTAL of Disbursements This Page (optional) ▶ **93.08**

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 60 / 65

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
A. Kentucky Press Service

Mailing Address 101 Consumer Lane

City Frankfort State KY Zip Code 40601

Purpose of Disbursement
Print Advertisement 7/13/05

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.18095
Date of Disbursement
08 / 03 / 2005

Amount of Each Disbursement this Period
405.00

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

Full Name (Last, First, Middle Initial)
B. Spalding Groupe

Mailing Address 2306 Frankfort Avenue

City Louisville State KY Zip Code 40206

Purpose of Disbursement
CmpngMtl: Empr Strs & Lapel Strs

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.18057
Date of Disbursement
07 / 18 / 2005

Amount of Each Disbursement this Period
838.73

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

Full Name (Last, First, Middle Initial)
C. St. Luke Free Clinic of Hopkinsville

Mailing Address 408 W 17th Street

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
Contribution:as Memorial to constituent

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.18048
Date of Disbursement
07 / 12 / 2005

Amount of Each Disbursement this Period
150.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ **1393.73**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 61 / 65

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
A. St. Luke Free Clinic of Hopkinsville

Mailing Address 408 W 17th Street

City Hopkinsville State KY Zip Code 42240

Purpose of Disbursement
Ovhd: Donation as Memorial to Constitua

Candidate Name

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

012
Category/
Type

Transaction ID: SB17.18254
Date of Disbursement

09 / 26 / 2005

Amount of Each Disbursement this Period

100.00

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

Full Name (Last, First, Middle Initial)
B. SWISHER INTERNATIONAL INC PAC FUND

Mailing Address 459 EAST 16TH STREET

City JACKSONVILLE State FL Zip Code 32206

Purpose of Disbursement
TravExp: Air Fare Ed & Connie Whitfield: Vail

Candidate Name

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

002
Category/
Type

Transaction ID: SB17.18145
Date of Disbursement

08 / 24 / 2005

Amount of Each Disbursement this Period

3934.20

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

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

Mailing Address P.O. Box 18000

City Greenville State SC Zip Code 29608-9000

Purpose of Disbursement
Ovhd: Cell Phone Bill

Candidate Name

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

001
Category/
Type

Transaction ID: SB17.18015
Date of Disbursement

07 / 05 / 2005

Amount of Each Disbursement this Period

46.81

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

SUBTOTAL of Disbursements This Page (optional) ▶

4081.01

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 62 / 65

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

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

Mailing Address P.O.Box 18000

City Greenville State SC Zip Code 29606-9000

Purpose of Disbursement
Ovrhd: Cell Phone bill

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/Type 001

Transaction ID: SB17.18106
Date of Disbursement
08 / 08 / 2005

Amount of Each Disbursement this Period
46.76

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

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

Mailing Address P.O.Box 18000

City Greenville State SC Zip Code 29606-9000

Purpose of Disbursement
Ovrhd: cell phone

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/Type

Transaction ID: SB17.18165
Date of Disbursement
08 / 07 / 2005

Amount of Each Disbursement this Period
46.76

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

Full Name (Last, First, Middle Initial)
C. Washington Nationals

Mailing Address 2400 East Capitol Street SE
RFK Stadium, Attn Wagner

City Washington State DC Zip Code 20003

Purpose of Disbursement
FRExp: 50 Tkts 9/11/05 Game FR Event

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/Type 003

Transaction ID: SB17.18034
Date of Disbursement
07 / 07 / 2005

Amount of Each Disbursement this Period
8585.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ **6658.52**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 63 / 65

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
A. Woodford Reserve Distillery, The

Mailing Address 7855 McCracken Pike

City Versailles State KY Zip Code 40383

Purpose of Disbursement
FRExp:Deposit/Rent:ConfmcaCntr10/8/05FR

Candidate Name

Office Sought: House
Senate
President
State: District

Disbursement For:
Primary General
Other (specify) ▼

007
Category/
Type

Transaction ID: SB17.18121
Date of Disbursement

08 / 10 / 2005

Amount of Each Disbursement this Period

400.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

400.00

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

31315.30

**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 64 / 65

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

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NAME OF COMMITTEE (In Full)
WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
A. Faith & Politics Institute, The

Mailing Address 110 Maryland Ave., NE
Suite 504

City Washington State DC Zip Code 20002

Purpose of Disbursement
Donation

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

012
Category/
Type

Transaction ID: SB21.18072
Date of Disbursement
07 / 25 / 2005

Amount of Each Disbursement this Period
1000.00

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

Full Name (Last, First, Middle Initial)
B. Intrepid Fallen Hero's Fund

Mailing Address One Intrepid Square
West 46th St. & 12th Ave.

City New York State NY Zip Code 10036

Purpose of Disbursement
Contribution as Memorial to Jason Ames

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

012
Category/
Type

Transaction ID: SB21.18168
Date of Disbursement
09 / 09 / 2005

Amount of Each Disbursement this Period
250.00

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

Full Name (Last, First, Middle Initial)
C. National Republican Congressional Cmte.

Mailing Address 320 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Transfer Excess Funds

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

008
Category/
Type

Transaction ID: SB21.18012
Date of Disbursement
07 / 01 / 2005

Amount of Each Disbursement this Period
20000.00

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

SUBTOTAL of Disbursements This Page (optional) ▶ 21250.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
 (check only one)

PAGE 65 / 65

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

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NAME OF COMMITTEE (In Full)
 WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
 A. R. Fred Capps Memorial Golf Tournament

Transaction ID: SB21.18107

Date of Disbursement

Mailing Address P.O. Box 779

08 / 08 / 2005

City State Zip Code
 Burkesville KY 42717

Amount of Each Disbursement this Period

Purpose of Disbursement
 Contribution

240.00

Candidate Name

012
 Category/
 Type

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

Office Sought: House Senate President
 State: District

Disbursement For: Primary General Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

240.00

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

21490.00