

**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

Georgia Berner for Congress

ADDRESS (number and street)

c/o Frederick N. Frank 33rd Floor

707 Grant Street

X Check if different than previously reported. (ACC)

Pittsburgh

PA

15219

2. **FEC IDENTIFICATION NUMBER**

C00412528

CITY

STATE

ZIP CODE

STATE DISTRICT

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

PA 04

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

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

X July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

In the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period 04 01 2005 through 06 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 John M. Dagnon

Signature of Treasurer Electronically Filed by John M. Dagnon Date 08 29 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 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Georgia Berner for Congress

Report Covering the Period: From: <sup>M</sup> 0 <sup>M</sup> 4 <sup>D</sup> 0 <sup>D</sup> 1 <sup>Y</sup> 2 <sup>Y</sup> 0 <sup>Y</sup> 0 <sup>Y</sup> 5 To: <sup>V</sup> 0 <sup>M</sup> 6 <sup>D</sup> 3 <sup>D</sup> 0 <sup>Y</sup> 2 <sup>Y</sup> 0 <sup>Y</sup> 0 <sup>Y</sup> 5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(a)).....	28605.00	28605.00
(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)).....	28605.00	28605.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	17671.54	17671.54
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	17671.54	17671.54
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	25033.46	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	14100.00	

**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  
Georgia Berner for Congress

Report Covering the Period: From: <sup>M M</sup> 0 4 <sup>Y Y</sup> 0 1 <sup>Y Y</sup> 2 0 0 5 To: <sup>Y M</sup> 0 6 <sup>Y P</sup> 3 0 <sup>Y Y</sup> 2 0 0 5

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	28270.00	28270.00
(ii) Unitemized.....	335.00	335.00
(iii) TOTAL of contributions from Individuals..... ▶	28605.00	28605.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	28605.00	28605.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	0.00	0.00
<b>13. LOANS</b>		
(a) Made or Guaranteed by the Candidate.....	14100.00	14100.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	14100.00	14100.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	42705.00	42705.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	17671.54	17671.54
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	17671.54	17671.54

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	42705.00
25. SUBTOTAL (add Line 23 and Line 24).....	42705.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17671.54
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	25033.46

**CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)  
(Millionaires' Amendment)**

<b>Name of Candidate</b> GEORGIA BERNER		<b>Candidate ID Number</b> H6PA04102
<b>Name of Principal Campaign Committee</b> Georgia Berner for Congress		<b>Committee ID Number</b> <b>C</b> C00412628
<b>Committee Address</b> c/o Frederick N. Frank 33rd Floor 707 Grant Street		
<b>City</b> Pittsburgh	<b>State</b> PA	<b>ZIP</b> 15219
<b>Report Covering Period (check one)</b> <input checked="" type="checkbox"/> through June 30, or <input type="checkbox"/> through December 31 of the year preceding the year of the general election		
	<b>Primary</b>	<b>General</b>
1. Gross receipts of authorized committees .....	42705.00	0.00
2. Aggregate amount of contributions from personal funds of the candidate .....	14100.00	0.00
3. Gross receipts minus the candidate's personal contributions .....	28605.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 22

(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)  
Georgia Berner for Congress

Full Name (Last, First, Middle Initial) A. Norman Anthony		Date of Receipt M / D / Y 06 / 28 / 2005
Mailing Address 3407 Seventh Avenue		Transaction ID: SA11A1.4140
City State Zip Code Carmel CA 93823	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer Anthony & Inardock	Occupation Attorney	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Kwan Berner		Date of Receipt M / D / Y 06 / 28 / 2005
Mailing Address 166B Kitchener Drive		Transaction ID: SA11A1.4175
City State Zip Code Sunnyvale CA 94087	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation Homemaker	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Leif Berner		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 4127 Caroline Avenue		Transaction ID: SA11A1.4106
City State Zip Code Portsmouth VA 23701	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 2000.00
Name of Employer Self-Employed	Occupation Manufacturing Representative	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

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 7 / 22

(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)  
Georgia Berner for Congress

Full Name (Last, First, Middle Initial) <b>A. Mikael Berner</b>		Date of Receipt M / D / Y 06 / 28 / 2005
Mailing Address 188B Kitchener Drive		Transaction ID: SA11A1.4138
City Sunnyvale	State CA	Zip Code 94087
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer BeVocal, Inc.	Occupation CEO	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. Miranda Sofia Berner</b>		Date of Receipt M / D / Y 06 / 13 / 2005
Mailing Address 111 S. Clay Street		Transaction ID: SA11A1.4173
City Zelenople	State PA	Zip Code 16063
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Berner International	Occupation Management	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Miranda Sofia Berner</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 111 S. Clay Street		Transaction ID: SA11A1.4100
City Zelenople	State PA	Zip Code 16063
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Berner International	Occupation Management	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>4000.00</b>
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 / 22

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

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NAME OF COMMITTEE (In Full)  
Georgia Bemer for Congress

Full Name (Last, First, Middle Initial) <b>A. Mitsun Bemer</b>		Date of Receipt M / D / Y 06 / 23 / 2005
Mailing Address 4127 Caroline Avenue		Transaction ID: SA11A1.4198
City Portsmouth	State VA	Zip Code 23701
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation Homemaker	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. James J. Browne</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 38 Newgate Drive		Transaction ID: SA11A1.4120
City Pittsburgh	State PA	Zip Code 15202
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer Allegheny Financial Group	Occupation President	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Noel W. Browne</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 38 Newgate Drive		Transaction ID: SA11A1.4177
City Pittsburgh	State PA	Zip Code 15202
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation Homemaker	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>6000.00</b>
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 / 22

(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)  
Georgia Bemer for Congress

Full Name (Last, First, Middle Initial) <b>A. Judy Bruce</b>		Date of Receipt M / D / Y 06 / 28 / 2005
Mailing Address 3401 Sanberry Lane		Transaction ID: SA11A1.4145
City New Castle	State PA	Zip Code 16105
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation Homemaker	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Yvonne R. Campos</b>		Date of Receipt M / D / Y 06 / 17 / 2005
Mailing Address 595D Centre Avenue #411		Transaction ID: SA11A1.4126
City Pittsburgh	State PA	Zip Code 15206
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Campos Market Research	Occupation President	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Jennifer A. Cury</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 2481 El Capitan Drive		Transaction ID: SA11A1.4098
City Turlock	State CA	Zip Code 95380
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation Homemaker	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>3000.00</b>
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 / 22

(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)  
Georgia Bemer for Congress

Full Name (Last, First, Middle Initial) A. Donald L. Ewart		Date of Receipt M / D / Y 06 / 23 / 2005
Mailing Address 1021 Whitesdown Road		Transaction ID: SA11A1.4134
City Butler	State PA	Zip Code 16001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation Retired	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Christine Forzell		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 274D Gamble Court		Transaction ID: SA11A1.4110
City Hayward	State CA	Zip Code 94542
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation Retired	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Marcena Love		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 1175 Pelham Road		Transaction ID: SA11A1.4122
City Winnetka	State IL	Zip Code 60093
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation Homemaker	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>4500.00</b>
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 11 / 22

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

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NAME OF COMMITTEE (In Full)  
Georgia Bemer for Congress

Full Name (Last, First, Middle Initial) <b>A. Christopher S. Maher</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 111 South Clay Street		Transaction ID: SA11A1.4102
City Zelienople	State PA	Zip Code 16063
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer Armstrong World Industries	Occupation Engineer	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. Louise R. Malekoff</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 142 Yorkshire Drive		Transaction ID: SA11A1.4124
City Pittsburgh	State PA	Zip Code 15208
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation Retired	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Branda Dillon Murdock</b>		Date of Receipt M / D / Y 06 / 28 / 2005
Mailing Address P.O. Box 4881		Transaction ID: SA11A1.4143
City Camel	State CA	Zip Code 95521
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Anthony & Murdock	Occupation Attorney	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>3250.00</b>
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 12 / 22  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Georgia Bemer for Congress

Full Name (Last, First, Middle Initial) <b>A. Ronald C. Myers</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 124 Gregg Drive		Transaction ID: SA11A1.4104
City Harmony	State PA	Zip Code 16037
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation Retired	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. PDF Printing Solutions</b>		Date of Receipt M / D / Y 06 / 23 / 2005
Mailing Address 208 Mechanic Street		Transaction ID: SA11A1.4165
City New Castle	State PA	Zip Code 16101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer	Occupation	In-kind - Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 20.00	

Full Name (Last, First, Middle Initial) <b>C. Catherine Shantz</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 102 Endres Drive		Transaction ID: SA11A1.4116
City Zelienople	State PA	Zip Code 16063
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Ellwood City Hospital	Occupation RN	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1520.00</b>
<b>TOTAL</b> 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 / 22  
 (check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
 Georgia Bemer for Congress

Full Name (Last, First, Middle Initial) <b>A. Kevin Stone</b>		Date of Receipt M / D / Y Y Y Y 06 / 24 / 2005	
Mailing Address P.O. Box 4873		Transaction ID: SA11A1.4114	
City State Zip Code Mountain View CA 94040	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)	
Name of Employer BeVocal, Inc.	Occupation Vice President	Election Cycle-to-Date 500.00	
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Carol H. Tillotson</b>		Date of Receipt M / D / Y Y Y Y 06 / 28 / 2005	
Mailing Address 115 Lake Manor Drive		Transaction ID: SA11A1.4147	
City State Zip Code Butler PA 16001	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)	
Name of Employer	Occupation Homemaker	Election Cycle-to-Date 500.00	
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) .....	1000.00
TOTAL This Period (last page this line number only) .....	28270.00

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

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

FOR LINE NUMBER: PAGE 14 / 22

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Georgia Berner for Congress

Full Name (Last, First, Middle Initial) A. GEORGIA BERNER		Date of Receipt M / D / Y 05 / 01 / 2005
Mailing Address		Transaction ID: SA13A.4149
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	Loan Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) B. GEORGIA BERNER		Date of Receipt M / D / Y 05 / 02 / 2005
Mailing Address BOX 517		Transaction ID: SA13A.4150
City	State	Zip Code
ZELIENOPE	PA	16063
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Berner International	Occupation President	Loan Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. GEORGIA BERNER		Date of Receipt M / D / Y 05 / 17 / 2005
Mailing Address BOX 517		Transaction ID: SA13A.4151
City	State	Zip Code
ZELIENOPE	PA	16063
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Berner International	Occupation President	Loan Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1600.00</b>
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 / 22

(check only one)

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

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NAME OF COMMITTEE (In Full) Georgia Berner for Congress	
Full Name (Last, First, Middle Initial) A. GEORGIA BERNER Mailing Address BDX 517 <hr/> City State Zip Code ZELIENOPLE PA 16063 <hr/> FEC ID number of contributing federal political committee. <b>C</b> <hr/> Name of Employer Berner International Receipt For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Date of Receipt M M / U U / Y Y Y Y 06 / 17 / 2005 <hr/> Transaction ID: SA13A.4152 <hr/> Amount of Each Receipt this Period 12500.00 <hr/> Loan Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)/441a-1) Election Cycle-to-Date ▼ 14000.00

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>12500.00</b>
TOTAL This Period (last page this line number only) .....	▶	<b>14100.00</b>

**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 16 / 22

<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)  
Georgia Bemer for Congress

Full Name (Last, First, Middle Initial)  
A. Allegheny County Democratic Committee

Mailing Address 810 River Avenue  
Suite 21D

City Pittsburgh State PA Zip Code 15212

Purpose of Disbursement  
Sponsorship - golf outing

Candidate Name

Office Sought: House Senate President  
Disbursement For: 2005  
X Primary General  
Other (specify) ▼

State: District

Category/  
Type

Transaction ID: SB17.4162  
Date of Disbursement  
06 / 23 / 2005

Amount of Each Disbursement this Period

1200.00

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

Full Name (Last, First, Middle Initial)  
B. John Marshall

Mailing Address 2432 Royal Meadows Lane

City Grove City State OH Zip Code 43123

Purpose of Disbursement  
Salary

Candidate Name

Office Sought: House Senate President  
Disbursement For: 2005  
X Primary General  
Other (specify) ▼

State: District

Category/  
Type

Transaction ID: SB17.4155  
Date of Disbursement  
06 / 15 / 2005

Amount of Each Disbursement this Period

2128.88

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

Full Name (Last, First, Middle Initial)  
C. John Marshall

Mailing Address 2432 Royal Meadows Lane

City Grove City State OH Zip Code 43123

Purpose of Disbursement  
Housing and car expenses

Candidate Name

Office Sought: House Senate President  
Disbursement For: 2005  
X Primary General  
Other (specify) ▼

State: District

Category/  
Type

Transaction ID: SB17.4157  
Date of Disbursement  
06 / 19 / 2005

Amount of Each Disbursement this Period

1786.78

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

SUBTOTAL of Disbursements This Page (optional) ▶

5095.66

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

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

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

FOR LINE NUMBER:  
 (check only one)

PAGE 17 / 22

<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)  
 Georgia Bemer for Congress

Full Name (Last, First, Middle Initial)  
**A. John Marshall**

Mailing Address 2432 Royal Meadows Lane

City State Zip Code  
 Grove City OH 43123

Purpose of Disbursement  
 Salary

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2005  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB17.4164  
 Date of Disbursement

06 / 30 / 2005

Amount of Each Disbursement this Period

2128.88

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

Full Name (Last, First, Middle Initial)  
**B. PAC Services**

Mailing Address 33rd Floor, Gulf Tower  
 707 Grant Street

City State Zip Code  
 Pittsburgh PA 15210

Purpose of Disbursement  
 Document preparation fee

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2005  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB17.4153  
 Date of Disbursement

06 / 15 / 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. PDF Printing Solutions**

Mailing Address 208 Mechanic Street

City State Zip Code  
 New Castle PA 16101

Purpose of Disbursement  
 In-kind -

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2005  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB17.4167  
 Date of Disbursement

06 / 23 / 2005

Amount of Each Disbursement this Period

20.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

2398.88

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

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

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

FOR LINE NUMBER:  
 (check only one)

PAGE 18 / 22

<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)  
 Georgia Bemer for Congress

Full Name (Last, First, Middle Initial)  
 A. Paula J. Reno

Mailing Address 625 Winter Road

City State Zip Code  
 New Castle PA 16101

Purpose of Disbursement  
 Reimbursement of post office box rental

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2005  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB17.4160  
 Date of Disbursement

06 / 20 / 2005

Amount of Each Disbursement this Period

177.00

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

Full Name (Last, First, Middle Initial)  
 B. Rideout Research Group

Mailing Address 304 E. Jones Street

City State Zip Code  
 Raleigh NC 27601

Purpose of Disbursement  
 Research

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2005  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB17.4158  
 Date of Disbursement

06 / 20 / 2005

Amount of Each Disbursement this Period

10000.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

10177.00

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

17671.54

**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 10 / 22
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)  
Georgia Berner for Congress

Transaction ID: SC/10.4149

LOAN SOURCE Full Name (Last, First, Middle Initial) GEORGIA BERNER, - Personal funds		Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Mailing Address			
City	State	ZIP Code	
Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period	
100.00	0.00	100.00	

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	05 <sup>th</sup> 01 <sup>st</sup> 2005	N/A	N/A % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional) .....	<b>100.00</b>
<b>TOTALS</b> This Period (last page in this line only) .....	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 20 / 22
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)  
Georgia Berner for Congress

Transaction ID: SC/10.4150

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) GEORGIA BERNER, - Personal funds	<b>Election:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Mailing Address BOX 517			
City ZELIENOPLE State PA ZIP Code 16063			
Original Amount of Loan 500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 500.00	

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	06 <sup>th</sup> 02 <sup>nd</sup> 2005	N/A	N/A % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional) .....	<b>500.00</b>
<b>TOTALS</b> This Period (last page in this line only) .....	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 21 / 22
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)  
Georgia Berner for Congress

Transaction ID: SC/10.4151

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) GEORGIA BERNER, - Personal funds	<b>Election:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Mailing Address BOX 517			
City ZELIENOPLE State PA ZIP Code 16063			
Original Amount of Loan 1000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1000.00	

<b>TERMS</b>	Date Incurred 06 <sup>th</sup> 17 <sup>th</sup> 2006	Date Due N/A	Interest Rate N/A % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---	-----------------	------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional) .....	<b>1000.00</b>
<b>TOTALS</b> This Period (last page in this line only) .....	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

**SCHEDULE C (FEC Form 3 )**

**LOANS**

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

NAME OF COMMITTEE (In Full)  
Georgia Berner for Congress

Transaction ID: SC/10.4152

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) GEORGIA BERNER, - Personal funds	<b>Election:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Mailing Address BOX 517			
City ZELIENOPLE State PA ZIP Code 16063			
Original Amount of Loan 12500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 12500.00	

<b>TERMS</b>	Date Incurred 06 <sup>th</sup> 17 <sup>th</sup> 2006	Date Due N/A	Interest Rate N/A % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---	-----------------	------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional) .....	<b>12500.00</b>
<b>TOTALS</b> This Period (last page in this line only) .....	<b>14100.00</b>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	