

RECEIVED
FEDERAL ELECTION
COMMISSION
OFFICE OF GENERAL

April 5, 1999

MAY 6 3 32 PM '99

George Anderson
18 Twickenham Road
Rome, Georgia 30161
Day Phone:

Federal Election Commission
Office of General Counsel
999 E Street, NW
Washington, D.C. 20464

MUR 4895

In 1975, Congress created the Federal Election Commission (FEC) to administer and enforce the Federal Election Campaign Act (FECA). The law and Commission were designed to ensure that candidates in federal elections were not or did not appear to be beholden to a narrow group of people. The FEC has jurisdiction over restrictions on contributions and expenditures. Since the Federal Election Commission is the body charged with regulating spending in campaigns for federal office and is set up to deter abuses by mandating public disclosure of campaign finances, I bring before this independent regulatory agency a researched documented complaint of abuses of the Federal Campaign Finance Law. Public office is a public trust and should not be abused. Congressman Bob Barr of the Congressional 7th District of the State of Georgia has not only abused his elected office but has also abused the Federal Election Campaign Act (FECA).

I am shocked that Bob Barr, a Georgia Congressman, who purports to believe in Ethics and the law would fail to properly disclose campaign contributions and fail to itemize campaign expenditures that total over \$386,998.00. I formally complain to the FEC and request an investigation and hearing be held involving the Barr-Congress Campaign.

I cite the following blatant examples by the Barr Campaign to fail time after time and year after year to provide full disclosure as the Federal Election Campaign Act requires:

- 1) Congressman Barr has been a member of the NRA (National Rifle Association) for over 15 years, however, his campaign disclosures do not list Barr as a Board member for the NRA.
- 2) Over 25 pages of Campaign Disclosures list paid out disbursements to PO Box 215, Dallas, GA 30132. This disclosure might be explained as simple error however, it still is sloppy, unethical and illegal.
- 3) Travel reimbursement is not properly disclosed. Full disclosure is required but Congressman Barr does not seem interested in following Campaign Disclosure Laws.
- 4) Pages after pages of Campaign Contributions are not fully disclosed. However, any concerned citizen has the right to review the Campaign Disclosures and be able to understand them.
- 5) "Consulting Fund": I'm sending copies of this disbursement to the IRS for an opinion. The Barr Campaign pays its staff a salary, expenses, bonus and a

consulting fee from the "Consulting Fund". I request the FEC determine if this violates Federal Election Laws.

- 6) I ask the FEC if it is legal for the Barr Campaign to pay \$10,000.00 bonuses to employees: Jeff Breedlove, Rick Shelby and Bill Adams.
- 7) Reimbursement is not sufficient disclosure for thousands disbursed by the Barr Campaign. When the Barr Campaign list Delta Airlines, not a single 7th District concerned citizen has any notion who is taking a plane trip.
- 8) When a disbursement of "cash" is disclosed, there is no full disclosure as to who received the "cash" and how much returned to the campaign after expenditure.
- 9) Contributors after contributors are not fully disclosed as to employment or occupation. This is a violation and I have documented my complaint with plenty of examples of this violation.
- 10) Employees, staff, Congressman Barr and his wife utilize campaign funds for food, trips, car repairs, etc. However, full disclosure and detailed itemization is not provided.
- 11) It is not sufficient to state that the campaign attempted disclosure of contributors' occupation and employment. Too many are left blank. Too many list "attempted" or "refused". It is not sufficient disclosure to list "No Recorded Employer" and "No Recorded Occupation".
- 12) The Barr Campaign does not sufficiently disclose: cellular phone reimbursements and American Express Card reimbursement, who is using them?
- 13) PACS are not fully disclosed: Example: ACRE, what is the address?
- 14) Why is Mike McDougald reimbursed for airfare? Are staff members' spouses paid to travel to Washington D.C.? Proper disclosure is not provided to the FEC.

I request the FEC (Federal Elections Commission) review all documents attached to this complaint. This 7th District Concerned Citizen of the State of Georgia has researched and uncovered over 450 specific instances of Campaign Disclosure violations. I have provided copies of Disclosure forms. I have provided specific examples that illustrate a total lack of preparation and consideration for the Federal Election Campaign Laws. It is my sworn belief that the Barr-Campaign demonstrated a total disregard to provide the information required by law.

Sworn to this 6 day
of April, 1999.

Audrey K. Beech
Notary Public

Greg Anderson

My commission expires:

Notary Public, Polk County, Georgia
My Commission Expires Mar. 6, 2001

April 19, 1999

George Anderson
18 Twickenham Road
Rome, Georgia 30161
Day Phone:

Federal Elections Commission

RE: Congressman Barr:

- 1) Barr does not report his membership with the National Rifle Association (NRA). He has been a member for over 16 years. He has been on the NRA Board of Directors for over 2 years.
- 2) I am also sending documents to the IRS seeking opinion concerning Barr's use of "Consulting Fund" to pay his staff members.
- 3) I seek information from the FEC concerning Corim, Inc. This company is listed at PO Box 359, Jacksonville, Florida 32201. What purpose does this serve the congressman's campaign?
- 4) Why does Congressman Barr have 3 committees? I understand one committee with a separate account was set up to raise contributions to be used to impeach the President of the United States. I question, was this proper?
- 5) Barr's petty cash fund is not fully disclosed. The purpose, for whom, and what amount left over is not fully revealed.
- 6) Example of many contributors not fully disclosed:
Lee Hight
144 Featherston Rd. SW
Rome, Georgia 30165
Contributed on 6/21/96
\$1000.00
What is her occupation or employment? This information is not revealed.
- 7) Campaign Period 1-1-95 through 6-30-95 lacks full disclosure on approximately \$32,688.00. There are over 3 pages of non-disclosure of employer/occupation. Bob Barr's expenses, reimbursements, and travel is not properly revealed.
- 8) Period 1-1-95 through 6-30-95 does not properly disclose over \$23,050.00 in contributions/ expenditures.
- 9) There are transfers to other "authorized" committees concerning blocks of money. The purpose is not fully disclosed. See period 7/1/95 through 12/31/95. Over \$17,900.00 is not properly revealed. Why does the Bob Barr Campaign pay for rental for NRA event? Question: Did Congressman Jim Leach pay for plane ticket for Congressman Bob Barr? Why is Barr reimbursing Leach for the flight? Barr's Campaign Disclosures do not reveal this information. Jeri Barr on 12-20-95 is reimbursed \$226.95. However, campaign disclosures do not properly reveal what travel concerned.
- 10) Period 1-1-96 through 3-31-96 does not properly reveal the following:
 - A) Sylvester Management Corporation on 2-21-96- who attended?
 - Sylvester Management Corporation on 2-27-96- who attended?

- B) Uniglobe Elite Travel for FEC Seminar on 2-29-96-who attended?
C) Refunds are not properly disclosed.
- 11) Period 1-1-96 through 3-31-96 does not properly reveal over \$12,722.00 in expenditures contributions.
- A) Delta Airlines does not reveal on 1-13-96 who took plane flight.
B) Bob Barr on 3-2-96 is reimbursed for travel of an amount of \$189.51. The Congressman does not fully disclose the reimbursement.
Footnote: I looked at other Congressmen's Campaign Disclosures as well as State Elected officials before filing this complaint. Most were much better disclosed than Barr's.
C) Jeff Breedlove is reimbursed on 3-29-96 for the amount of \$1202.12. However, proper disclosure is not revealed as to what expenses are reimbursed.
- 12) Period of 4-1-96 through 6-19-96 does not fully disclose over \$9,535.00 in expenditures and contributions.
- A) Delta Airlines on 5-23-96 for \$1446.00.
B) Jeri Barr on 6-13-96 in the amount of \$310.07.
C) Bob Barr on 4-4-96 in the amount of \$385.97.
D) Andy Bush on 4-4-96 in the amount of \$147.05.
E) Charles Black on 4-15-96 in the amount of \$1,178.19.
F) Brad Alexander on 4-24-96 in the amount of \$454.11.
G) Jeff Breedlove on 4-26-96 in the amount of \$473.99.
H) Bill Adams on 4-26-96 in the amount of \$717.14.
I) Jeff Breedlove on 5-15-96 in the amount of \$342.45.
J) Bill Adams on 6-13-96 in the amount of \$795.150.
- 13) Period of 7-1-96 through 9-30-96 does not properly reveal over \$37,770.00.
There are over 27 pages with wrong address for disbursements with 6 to each page, which equals 162 wrong addresses.
- 14) Period of 10-17-96 through 11-25-96 does not fully disclose over \$9015.00.
15) Period of 10-1-96 through 10-16-96 does not fully disclose over \$16,541.00.
16) Period of 10-17-96 through 11-25-96 does not fully disclose over \$7905.00.
17) Period of 10-17-96 through 11-25-96 does not fully disclose over \$55,385.00 in disbursements and contributions.
Example on contributions:
Terry Griffin
PO Box 404 on 10-16-96
Rome, GA 30162 Contributed \$100.00
Campaign Disclosure does not reveal occupation/employment.
Example of disbursement:
Bill Adams received reimbursements on 11-1-96 of \$4117.21, for what reason, the disclosures do not reveal.
- 18) Period of 1-1-97 through 6-30-97 does not properly reveal over \$27,200.00 in contributions/disbursements.

- 19) Period of March '97 does not properly disclose over \$24,867 in contributions/disbursements.
- 20) Period of 1-1-97 through 6-30-97 does not properly reveal over \$11,775.00. Why does "Friends of Newt Gingrich" receive \$820.67 on 1-7-97 for reimbursement for travel. This information is not fully disclosed. Why does Mr. Bobby Tanner, 5811 Cousins St., Austell, Georgia 30001, receive \$275.00 for automobile repairs on 1-27-97? Is this a personal or campaign expense?
- 21) Period of 7-1-97 through 12-31-97 does not properly disclose over \$20,215.00 in expenses and contributions.
- A) Delta Airlines- Who took the flight?
 - B) Jeri Barr- Over \$1796.16 on 7-15-97 reimbursement for what?
 - C) Petty Cash- for what purpose: 7-15-97? 7-29-97? 9-10-97? 12-9-97? These expenses are not properly disclosed.
- 22) Period of 1-1-98 through 3-31-98 does not properly reveal over \$6,726.00 in expenses and contributions. Example: Rick Shelby is reimbursed for airfare on 2-18-98 of \$749.14. What airline? What destination? We can only assume the purpose is campaign related.
- 23) Period of 7-2-98 through 9-30-98 does not properly reveal over \$4624.00 in expenses and contributions. It is not sufficient disclosure to list "small business owner" or "self-employed". A business name should be disclosed.
- 24) Period of 10-1-98 through 10-14-98 does not properly reveal over \$946.55 in expenses and contributions. American Express on 10-1-98 of \$146.55 does not reveal for whom or for what.
- 25) Period of 11-24-98 through 12-31-98 does not disclose properly over \$15,000.00.
- A) BellSouth Mobility expenditures of 12-21-98, for whom?
 - B) Bob Barr reimbursement on 12-31-98- for what?
 - C) Delta Airlines on 12-30-98 for \$146.00, for whom?
- 26) Period of 10-1-96 through 10-16-96 does not reveal over \$5800.00 in expenditures and contributions.
- 27) Period of 7-2-98 through 9-30-98 does not reveal over \$17,976.00 in expenditures and contributions.
- A) Full address of PAC is not revealed: ACRE of Arlington, VA 22203 contributed \$1,000.00 on 8-3-98.
 - B) Refund of airfare on 7-6-98 for \$951.00, for whom. All we know is it is for Delta Airlines.
 - C) American Airlines on 9-30-98 for \$690.64, for what purpose? For what member of campaign staff?
 - D) American Express on 8-3-98 for \$192.06, for whom?
 - E) American Express on 9-4-98 for \$422.87, for whom?
 - F) American Express on 7-2-98 for \$612.63, for whom?
 - G) American Express on 7-2-98 for \$1,146.47, for whom?
 - H) Andy Bush's travel reimbursement, for what purpose? It is not disclosed.
 - I) Delta Airlines on 7-21-98 and 8-31-98, for whom?

- J) Jeri Barr on 9-25-98 for \$155.27. It is not disclosed properly.
- K) Leeta McDougald on 7-7-98 for \$470.00, for what purpose?
Travel reimbursement is not sufficient.
- L) How is a golf cart repair on 7-10-98 for Matt Brady a campaign expense?
- M) Mike McDougald's airfare reimbursed on 7-9-98 for \$951.00, how is it campaign related? He is not on the campaign staff.

99 " 04 " 393 " 2989

Over \$1,000

Disbursements

Marietta Travel
Pkwy 11
Ath. GA. 30339

~~Travel Expense - DC~~
fn whom?

12/10/94 \$633.

Rick Shelby
7700 Leesburgh Pike travel Expense
Falls Church, VA
22043

(Not suff. disclosure)

12/28/94

\$469.58

Consulting fund to members of staff is most probably
an IRS violation:

Examples:

Bill Adams

12/30/94
consulting
fund \$1,000.

John Watson

consulting fund
12/30/94 \$10,000

Debts & Obligations

Corim, Inc.
P.O. Box 359
Gay. Fl. 32201

→ what is purpose & debt?

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

FEDERAL ELECTION COMMISSION

SECRETARY OF STATE

Name of Committee (In full)
BOB BARR FOR CONGRESS '94

Report Covering the Period

From **1/1/95**

FILE COPY

| | COLUMN A Total This Period | COLUMN B Calendar Year To |
|--|-------------------------------|------------------------------|
| I. RECEIPTS | | |
| 11. CONTRIBUTIONS (other than loans) FROM | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A) | 5,148.12 | |
| (ii) Unitemized | 16,508.74 | |
| (iii) Total of contributions from individuals | 21,656.86 | 21,656.86 |
| (b) Political Party Committees | | |
| (c) Other Political Committees (such as PACs) | 26,550.60 | 26,550.60 |
| (d) The Candidate | | |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d)) | 48,207.46 | 48,207.46 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 1,682.39 | 1,682.39 |
| 13. LOANS | | |
| (a) Made or Guaranteed by the Candidate | | |
| (b) All Other Loans | | |
| (c) TOTAL LOANS (add 13(a) and (b)) | | |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 3,273.30 | 3,273.30 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 5.95 | 5.95 |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) | 53,169.10 | 53,169.10 |
| II. DISBURSEMENTS | | |
| 17. OPERATING EXPENDITURES | 67,951.78 | 67,951.78 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | |
| 19. LOAN REPAYMENTS | | |
| (a) Of Loans Made or Guaranteed by the Candidate | | |
| (b) Of All Other Loans | | |
| (c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) | | |
| 20. REFUNDS OF CONTRIBUTIONS TO | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (b) Political Party Committees | | |
| (c) Other Political Committees (such as PACs) | | |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) | | |
| 21. OTHER DISBURSEMENTS | | |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) | 67,951.78 | 67,951.78 |

III. CASH SUMMARY

| | | |
|---|--|--------------|
| 23 CASH ON HAND AT BEGINNING OF REPORTING PERIOD | | \$ 17,314.79 |
| 24 TOTAL RECEIPTS THIS PERIOD (from Line 16) | | \$ 53,169.10 |
| 25 SUBTOTAL (add Line 23 and Line 24) | | \$ 70,483.89 |
| 26 TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) | | \$ 67,951.78 |
| 27 CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) | | \$ 2,532.11 |

RECEIVED

SEP 15 1995

SECRETARY OF STATE

SCHEDULE A ITEMIZED RECEIPTS

| | |
|---|--------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | Page 1 of _____ |
| | FOR LINE NUMBER 12 |

TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

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

NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS '94 C00283150 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| BOB BARR CONGRESS 231 MAXHAM ROAD # 100 AUSTELL GA 30001 | Occupation OFFICE EXPENSE REIMBURSE | 05/29/1995 | \$ 1,682.39 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other | Aggregate Year-to-Date > \$ | | 1,682.39 |

| | |
|---|-------------|
| TOTAL This Period (last page this line number only) | \$ 1,682.39 |
|---|-------------|

SUBTOTAL of Receipts This Page (optional)

\$

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1995

FORM A

For use by Members, officers, and employees.

20 JUL 14 AM 10:01 R 6 1/2
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

BOB BARR

(Full Name)

1607 LONGWORTH

(Mailing Address)

WASHINGTON DC 20515

Filer Status: Member of the U.S. House of Representatives

State: GA

District: 07

Officer or Employee:

Employing Office:

HAND DELIVERED

(Office Use Only)

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

Termination Date:

Termination

Amendment

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

| | | | | | |
|---|---|--|---|---|--|
| I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$250 and not otherwise exempt)? If yes, complete and attach Schedule VI. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$250 from one source)? If yes, complete and attach Schedule VII. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than \$1,000 in the reporting period? If yes, complete and attach Schedule IV. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | Each question in this part must be answered and the appropriate schedule attached for each "Yes" response. | | |

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

| | | |
|--|------------------------------|--|
| TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See instructions, pages 10-11.) | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See instructions, page 11.) | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended, and is available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its staff. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties (See 5 U.S.C. app. 5, § 104).

SIGNATURE OF REPORTING INDIVIDUAL

DISCLOSED

JUN 24 1996

DATE (Month/Day/Year)

SECRETARY OF STATE

Name **BOB BARR**

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. For further information, see instructions, pages 12-13.

| | Source | Type | Amount |
|---|---------------------------------------|--|----------|
| Keene State | | Approved Teaching Fee | \$6,000 |
| State of Maryland | | Legislative Pension | \$9,000 |
| Examples: Civil War Roundtable (Oct. 2nd) | | Spouse Speech | \$1,000 |
| Ontario County Board of Education | | Spouse Salary | NA |
| | COBB FAMILY RESOURCES, MARIETTA, GA | SPOUSE SALARY DISTRIBUTION FROM | N/A |
| | THE BARR LAW FIRM, P.C., MARIETTA, GA | S CORPORATION FOR LEGAL SERVICES PREVIOUSLY PROVIDED | \$ 9,000 |
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For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name **BOB BARR**

Page **3** of **5**

| BLOCK A Asset and/or Income Source | | BLOCK B Value of Asset | | BLOCK C Type of Income | | BLOCK D Amount of Income | | | | | | | | | BLOCK E Transaction | | | | | | | | | | |
|---------------------------------------|---|---------------------------|----------------------|---------------------------|------------------------|-----------------------------|-------------------------|---------------------------|-----------------------------|------------------------------|-------------------------------|---------------------|----------------|--------------------|------------------------|----------------------|----------------------|------------------------|--------------------------|------------------------------|------------------------------|--------------------|---|--|--|
| SP, DC, JT | Examples: SP Mega Corp. Stock DC 123 Main St., Dover, Del. JT 1st Bank of Paducah, KY accounts | A None - \$1,000 | B \$1,001 - \$15,000 | C \$15,001 - \$50,000 | D \$50,001 - \$100,000 | E \$100,001 - \$250,000 | F \$250,001 - \$500,000 | G \$500,001 - \$1,000,000 | H \$1,000,001 - \$5,000,000 | I \$5,000,001 - \$25,000,000 | J \$25,000,001 - \$50,000,000 | K Over \$50,000,000 | I None - \$200 | II \$201 - \$1,000 | III \$1,001 - \$2,500 | IV \$2,501 - \$5,000 | V \$5,001 - \$15,000 | VI \$15,001 - \$50,000 | VII \$50,001 - \$100,000 | VIII \$100,001 - \$1,000,000 | IX \$1,000,001 - \$5,000,000 | X Over \$5,000,000 | Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year. | | |
| | | | | | | X | | | | | | | X | | | | | | | | | | | | |
| | THE BARR LAW FIRM, P.C. | | | | | | | | | | | | | | | | | | | | | | | | |
| SP | IRA, SUNTRUST | | | | | | | | | | | | | | | | | | | | | | | | |
| JT | CHECKING ACCOUNT, SUNTRUST | | | | | | | | | | | | | | | | | | | | | | | | |
| SP | IRA, MUTUAL OF AMERICA | | | | | | | | | | | | | | | | | | | | | | | | |
| SP | IRA, COBB FEDERAL | | | | | | | | | | | | | | | | | | | | | | | | |
| SP | C-MAR CREDIT UNION | | | | | | | | | | | | | | | | | | | | | | | | |

SCHEDULE V — LIABILITIES

Name **BOB BARR**

Page **4** of **5**

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts only if the balance at the end of the reporting period exceeded \$10,000. For further information, see Instructions, pages 21-22.

| SP, DC, JT | Creditor | Type of Liability | Amount of Liability | | | | | | | | | | | | | |
|------------------|---|---------------------------------------|---------------------|---|---|---|---|---|---|---|---|---|--|--|--|--|
| | | | B | C | D | E | F | G | H | I | J | K | | | | |
| | Example: First Bank of Wilmington, Delaware | Mortgage on 123 Main St., Dover, Del. | | | | X | | | | | | | | | | |
| | SUNTRUST BANK, MARIETTA, GA | NOTE | ✓ | | | | | | | | | | | | | |
| | JT CONGRESSIONAL FED. CR. UNION | CREDIT CARD CONSOLIDAT- ION LOANS | | ✓ | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totaling more than \$250 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$100 or less need not be added towards the \$250 disclosure threshold.

Note: House Rule 43, clause 4, prohibits most gifts exceeding \$250. For further information, see Instructions, pages 22-23.

| Source | Description | Value |
|---|--|-------|
| Example: Mr. Joseph H. Smith, Anytown, Anystate | Silver Platter (waiver received from Committee on Standards) | \$270 |
| | | |
| | | |
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| | | |

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, pages 25-26.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

| Position | Name of Organization |
|--------------|---|
| PRESIDENT | THE BARR LAW FIRM, P.C., MARIETTA, GA. |
| BOARD MEMBER | ATLANTA TASK FORCE FOR THE HOMELESS, ATLANTA, GA. |
| BOARD MEMBER | FEDERATIST SOCIETY ADVISORY BOARD, ATLANTA, GA. |
| BOARD MEMBER | WASHINGTON LEGAL FOUNDATION NATL. ADVISORY BOARD |

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

| Date | Parties To | Terms of Agreement |
|-------|--|---|
| 12/94 | THE BARR LAW FIRM, P.C., MARIETTA, GA. | DEFERRED PAYMENT OF ANY FEES FOR LEGAL SERVICES RENDERED BEFORE ENTERING CONGRESS |

RECEIPTS AND DISBURSEMENTS
For An Authorized Committee
(Summary Page)

2/18
18R

USE FEC MAILING LABEL OR TYPE OR PRINT

| | | |
|---|--------------------------------|--|
| 1. NAME OF COMMITTEE (in full) BOB BARR - CONGRESS | | 2. FEC IDENTIFICATION NUMBER C00300640 |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 231 MAXHAM RD., SUITE 100 | | |
| CITY, STATE and ZIP CODE AUSTELL, GA 30001 | STATE/DISTRICT GA/07 | 3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |

4. TYPE OF REPORT

| | |
|---|---|
| <input type="checkbox"/> April 15 Quarterly Report | <input type="checkbox"/> Twelfth day report preceding _____ (Type of Election) |
| <input type="checkbox"/> July 15 Quarterly Report | election on _____ in the State of _____ |
| <input type="checkbox"/> October 15 Quarterly Report | <input type="checkbox"/> Thirtieth day report following the General Election on _____ |
| <input checked="" type="checkbox"/> January 31 Year End Report | _____ in the State of _____ |
| <input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) | <input type="checkbox"/> Termination Report |

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

SUMMARY

| 5. Covering Period <u>11/26/96</u> through <u>12/31/96</u> | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|---|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)) | 25,710.31 | 779,527.44 |
| (b) Total Contribution Refunds (from Line 20(d)) | | 42,951.10 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) | 25,710.31 | 736,576.34 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 25,147.08 | 886,523.57 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | 250.00 | |
| (c) Net Operating Expenditures (subtract Line 7(b) from 7(a)) | 24,897.08 | 886,204.82 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | 18,907.68 | For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 79,709.05 | |

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 CHARLES C. BLACK | |
| Signature of Treasurer | Date 2-17-97 |

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

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) **BOB BARR - CONGRESS** Report Covering the Period:
From: **11/26/96** To: **12/31/96**

| I. RECEIPTS | | COLUMN A Total This Period | COLUMN B Calendar Year-To-Date |
|--|--|-------------------------------|-----------------------------------|
| 11 CONTRIBUTIONS (other than loans) FROM: | | | |
| (a) Individuals/Persons Other Than Political Committees | | | |
| (i) Itemized (use Schedule A) | | 4,900.00 | |
| (ii) Unitemized | | 14,310.31 | |
| (iii) Total of contributions from individuals | | 19,210.31 | 559,949.15 |
| (b) Political Party Committees | | | 18,371.02 |
| (c) Other Political Committees (such as PACs) | | 6,500.00 | 201,207.27 |
| (d) The Candidate | | | |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i)-(iii), (b), (c) and (d)) | | 25,710.31 | 628,944.17 |
| 12 TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | | 36,728.25 |
| 13 LOANS: | | | |
| (a) Made or Guaranteed by the Candidate | | | |
| (b) All Other Loans | | | |
| (c) TOTAL LOANS (add 13(a) and (b)) | | | |
| 14 OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | | 250.00 | 318.75 |
| 15 OTHER RECEIPTS (Dividends, Interest, etc.) | | | 3,467.43 |
| 16 TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) | | 25,960.31 | 820,041.87 |
| II. DISBURSEMENTS | | | |
| 17 OPERATING EXPENDITURES | | 25,147.08 | 886,523.57 |
| 18 TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | | 47,184.00 |
| 19 LOAN REPAYMENTS: | | | |
| (a) Of Loans Made or Guaranteed by the Candidate | | | |
| (b) Of All Other Loans | | | |
| (c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) | | | |
| 20 REFUNDS OF CONTRIBUTIONS TO: | | | |
| (a) Individuals/Persons Other Than Political Committees | | | 42,451.10 |
| (b) Political Party Committees | | | |
| (c) Other Political Committees (such as PACs) | | | 500.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) | | | 500.00 |
| 21 OTHER DISBURSEMENTS | | | |
| 22 TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) | | 25,147.08 | 976,658.67 |

III. CASH SUMMARY

| | |
|--|--------------|
| 23 CASH ON HAND AT BEGINNING OF REPORTING PERIOD | \$ 18,094.45 |
| 24 TOTAL RECEIPTS THIS PERIOD (from Line 16) | \$ 25,960.31 |
| 25 SUBTOTAL (add Line 23 and Line 24) | \$ 44,054.76 |
| 26 TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) | \$ 25,147.08 |
| 27 CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) | \$ 18,907.68 |

SCHEDULE A ITEMIZED RECEIPTS

Contributions from individuals/Persons Other than Political Committees

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

NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| EUGENE VEZZANI 531 MULBERRY ROAD WINDER GA 30680 | UNIVERSAL METRO MEDIA Occupation | 11-26-1996 | \$875.00 |
| Receipt For: _____ Primary _____ Other | FINANCIAL CONSULTANT Aggregate Year-to-Date > \$ | | \$2,750.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| GRAHAM COLE 1643 EAST LAKE DRIVE MARIETTA GA 30062 | WARDROBE CARE INC. Occupation | 12-02-1996 | \$125.00 |
| Receipt For: _____ Primary _____ Other | DRY CLEANER Aggregate Year-to-Date > \$ | | \$595.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| J. PAUL FERGUSON 321 COOPER DRIVE ROME GA 30161 | HARBIN CLINIC Occupation | 12-01-1996 | \$200.00 |
| Receipt For: _____ Primary _____ Other | PHYSICIAN Aggregate Year-to-Date > \$ | | \$800.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| DELOS H. YANCEY, III 31 HUNTINGTON ROAD, SW ROME GA 30165 | STATE MUTUAL (REQUESTED) Occupation | 12-17-1996 | \$500.00 |
| Receipt For: _____ Primary _____ Other | Aggregate Year-to-Date > \$ | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------|--------------------------|------------------------------------|
| JAMES L. WEBB 2598 SHARONDALE DR., NE ATLANTA GA 30305-3859 | Occupation | 12-15-1996 | \$500.00 |
| Receipt For: _____ Primary _____ Other | Aggregate Year-to-Date > \$ | | \$500.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

| | |
|---|-----------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | Page 1 of _____ |
| | FOR LINE NUMBER 11(c) |

CONTRIBUTIONS FROM OTHER POLITICAL COMMITTEES

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

NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS '94 C00283150 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| TRUST CO. OF GA GOOD GOV. P.O. BOX 4418 ATLANTA GA 30302 | Occupation | 09/23/1993 | \$ 200.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > \$ 200.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| GA MARBLE CO. PAC 1200 ROBERTS DRIVE BLDG. #100 KENNESAW GA 30144 | Occupation | 11/11/1993 | \$ 100.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > \$ 100.00 | | | |

| | |
|---|-----------|
| TOTAL This Period (last page this line number only) | \$ 300.00 |
|---|-----------|

| | |
|---|----|
| SUBTOTAL of Receipts This Page (optional) | \$ |
|---|----|

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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

NAME OF COMMITTEE (In Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|-----------------------------|------------------------------------|
| ROBERT OLIVER 449 SHADOWLAWN RD. MARIETTA GA 30067 | SOUTH STAR BUILDERS Occupation PRESIDENT | 12-20-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | Aggregate Year-to-Date > \$ | \$3,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|-----------------------------|------------------------------------|
| RONALD S. HOLLEY 3807 ACWORTH DUE WEST RD. ACWORTH GA 30101 | SELF Occupation AUTOMOBILE REPAIRS | 12-02-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | Aggregate Year-to-Date > \$ | \$1,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|-----------------------------|------------------------------------|
| MAC COLLINS FOR CONGRESS P.O. BOX 35 JONESBORO GA 30237 | Occupation | 12-03-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | Aggregate Year-to-Date > \$ | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------------------------|-----------------------------|------------------------------------|
| JAMES B. ALEXANDER POST OFFICE BOX 247 COVINGTON GA 30209 | SELF Occupation ATTORNEY | 12-03-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | Aggregate Year-to-Date > \$ | \$1,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-------------------------------------|-----------------------------|------------------------------------|
| JEFF ROBINSON 4 RIVERMONT DRIVE ROME GA 30161 | SELF Occupation PHYSICIAN | 12-06-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | Aggregate Year-to-Date > \$ | \$1,150.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

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

Page 3 of 3.

FOR LINE NUMBER

11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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

NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

TOTAL This Period (last page this line number only)

\$4,900.00

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

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

Page 1 of 2
FOR LINE NUMBER 11(c)

Contributions from Political Committees

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

NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| BELLSOUTH PAC SUITE 450, 400 CHASTAIN BOULEVARD KENNESAW GA 30144-5512 | Occupation | 12-17-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$2,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| GOLD KIST PAC FOR FARMERS, INC. P O BOX 2210 ATLANTA GA 30301-2210 | Occupation | 12-09-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$2,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| FARM CREDIT PAC 50 F STREET, SUITE 900 WASHINGTON DC 20001 | Occupation | 11-26-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$1,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| AMERICAN BANKERS ASSOCIATION PAC 1120 CONNECTICUT AVENUE, NW WASHINGTON DC 20036 | Occupation | 12-25-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$1,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| GEORGIA POWER FEDERAL PAC 333 PIEDMONT AVENUE ATLANTA GA 30308 | Occupation | 11-27-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$1,000.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| WACHOVIA BANK OF GA, N.A. FUND FOR BET 191 PEACHTREE STREET NE ATLANTA GA 30303 | Occupation | 12-20-1996 | \$2,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > | | | \$1,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| EAGLE FORUM PAC BOX 618 ALTON IL 32002 | Occupation | 12-04-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > | | | \$500.00 |

| | |
|---|------------|
| TOTAL This Period (last page this line number only) | \$6,500.00 |
|---|------------|

SUBTOTAL of Receipts This Page (optional)

5005 3005 3005 3005 3005 3005 3005 3005 3005 3005

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

Use separate schedule
for each category of the
Detailed Summary Page

FOR LINE NUMBER

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

NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

AT&T

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|--|--------------------------|---|
| AT&T P.O. BOX 598010 ORLANDO, FL 32859 | TELEPHONE ____ Primary <input checked="checked" type="checkbox"/> General ____ Other | 11-26-1996 | \$1,033.73 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|--|--------------------------|---|
| BILL ADAMS P.O. BOX 215 DALLAS GA 30132 | REIM. ____ Primary <input checked="checked" type="checkbox"/> General ____ Other | 11-26-1996 | \$448.25 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| BILL ADAMS P.O. BOX 215 DALLAS GA 30132 | SALARY ____ Primary <input checked="checked" type="checkbox"/> General ____ Other | 12-04-1996 | \$1,000.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| DELTA AIRLINES 1030 DELTA BLVD ATLANTA, GA 30320-6001 | TRAVEL EXPENSE ____ Primary <input checked="checked" type="checkbox"/> General ____ Other | 12-29-1996 | \$352.92 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|--|--------------------------|---|
| FEDERAL EXPRESS 229 PEACHTREE ST NE ATLANTA, GA 30303 | OVERNIGHT POSTAGE ____ Primary <input checked="checked" type="checkbox"/> General ____ Other | 12-04-1996 | \$25.50 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|--|--------------------------|---|
| FEDERAL EXPRESS 229 PEACHTREE ST NE ATLANTA, GA 30303 | OVERNIGHT POSTAGE ____ Primary <input checked="checked" type="checkbox"/> General ____ Other | 12-12-1996 | \$35.50 |

Full Name, Mailing Address and Zip Code Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

SCHEDULE B ITEMIZED DISBURSEMENTS
 OPERATING EXPENDITURES

Use separate schedule for each category of the Detailed Summary Page

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

JEFF BREEDLOVE

Date (month, date, year)

Amount of Each Disbursement This Period

JEFF BREEDLOVE

EXP. REIM. - TRAVEL

1306 BAYLISS DR

___ Primary General
 ___ Other

12-11-1996

\$38.00

ALEXANDRIA VA 22302

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

JEFF BREEDLOVE

SALARY

1306 BAYLISS DR

___ Primary General
 ___ Other

12-10-1996

\$3,234.55

ALEXANDRIA VA 22302

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

JEFF BREEDLOVE

EXP. REIM. - TRAVEL

1306 BAYLISS DR

___ Primary General
 ___ Other

12-10-1996

\$340.00

ALEXANDRIA VA 22302

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

LASER X-PRESS

PRINTING

5600 SCOFIELD RD

___ Primary General
 ___ Other

12-12-1996

\$190.64

ATLANTA, GA 30349

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

POSTMASTER

POSTAGE

POSTMASTER

___ Primary General
 ___ Other

12-03-1996

\$1,600.00

MARIETTA GA 30067

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

POSTMASTER

POSTAGE

POSTMASTER

___ Primary General
 ___ Other

12-11-1996

\$64.00

MARIETTA GA 30067

Full Name, Mailing Address and Zip Code Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

SCHEDULE B ITEMIZED DISBURSEMENTS

OPERATING EXPENDITURES

Use separate schedule for each category of the Detailed Summary Page

FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

> BOB BARR - CONGRESS C00300640 GA/07

POSTMASTER

Date (month, date, year)

Amount of Each Disbursement This Period

POSTMASTER

ANNUAL FEES P.O. BOX

POSTMASTER

MARIETTA GA 30067

Primary General
 Other

12-12-1996

\$85.00

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

POSTMASTER

POSTAGE

POSTMASTER

MARIETTA GA 30067

Primary General
 Other

12-18-1996

\$44.40

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

SOUTHERN BELL

TELEPHONE

5147 PEACHTREE INDUSTRIAL BLVD

CHAMBLEE GA 30341

Primary General
 Other

11-26-1996

\$219.82

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

SOUTHERN BELL

TELEPHONE

5147 PEACHTREE INDUSTRIAL BLVD

CHAMBLEE GA 30341

Primary General
 Other

11-26-1996

\$1,040.95

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

ANDY BUSH

SALARY

3128 NECTAR DRIVE

POWDER SPRINGS, GA 30073

Primary General
 Other

12-03-1996

\$2,020.00

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

ANDY BUSH

REIM.

3128 NECTAR DRIVE

POWDER SPRINGS, GA 30073

Primary General
 Other

12-09-1996

\$82.73

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

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

FOR LINE NUMBER

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

NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

GA POWER

Date (month, date, year)

Amount of Each
 Disbursement This Period

GA POWER

UTILITY

333 PIEDMONT AVE NE
 ATLANTA GA 30308

____ Primary General
 ____ Other

12-06-1996

\$415.25

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each
 Disbursement This Period

GA POWER

UTILITY

333 PIEDMONT AVE NE
 ATLANTA GA 30308

____ Primary General
 ____ Other

12-13-1996

\$3.92

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each
 Disbursement This Period

BOB BARR

REIM. TRAVEL

631 CONCORD ROAD
 SMYRNA GA 30082

____ Primary General
 ____ Other

11-26-1996

\$62.90

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each
 Disbursement This Period

SPRINT

TELEPHONE

P O BOX 101343
 ATLANTA, GA 30392-1343

____ Primary General
 ____ Other

12-12-1996

\$94.15

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each
 Disbursement This Period

SHIRLEY GREEN

SECRETARIAL

8208 WINNDALE ROAD
 DALLAS GA 30132

____ Primary General
 ____ Other

11-27-1996

\$60.00

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each
 Disbursement This Period

SHIRLEY GREEN

SECRETARIAL

8208 WINNDALE ROAD
 DALLAS GA 30132

____ Primary General
 ____ Other

12-06-1996

\$360.00

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

SCHEDULE B ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the Detailed Summary Page

FOR LINE NUMBER

OPERATING EXPENDITURES

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

NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

SHIRLEY GREEN

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period | |
|---|---|--------------------------|---|--|
| | | | | |
| SHIRLEY GREEN | SECRETARIAL | | | |
| 8208 WINNDALE ROAD | _____ Primary <input checked="" type="checkbox"/> _____ General | 12-13-1996 | \$150.00 | |
| DALLAS GA 30132 | _____ Other | | | |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period | |
|---|---|--------------------------|---|--|
| | | | | |
| SHIRLEY GREEN | SECRETARIAL | | | |
| 8208 WINNDALE ROAD | _____ Primary <input checked="" type="checkbox"/> _____ General | 12-20-1996 | \$45.00 | |
| DALLAS GA 30132 | _____ Other | | | |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period | |
|---|---|--------------------------|---|--|
| | | | | |
| WEST GA SHOPPER | ADVERTISING/PRINT | | | |
| 850 CEDAR ST | _____ Primary <input checked="" type="checkbox"/> _____ General | 12-11-1996 | \$432.00 | |
| CARROLLTON GA 30117 | _____ Other | | | |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period | |
|---|---|--------------------------|---|--|
| | | | | |
| MONTY WARNER | EXP. REIM. - OFFICE SUPPLIES | | | |
| 3825 LAVISTA RD #U-1 | _____ Primary <input checked="" type="checkbox"/> _____ General | 11-26-1996 | \$272.00 | |
| TUCKER GA 30084 | _____ Other | | | |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period | |
|---|---|--------------------------|---|--|
| | | | | |
| MONTY WARNER | SALARY | | | |
| 3825 LAVISTA RD #U-1 | _____ Primary <input checked="" type="checkbox"/> _____ General | 12-04-1996 | \$1,220.00 | |
| TUCKER GA 30084 | _____ Other | | | |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period | |
|---|---|--------------------------|---|--|
| | | | | |
| MONTY WARNER | EXP. REIM. - OFFICE SUPPLIES | | | |
| 3825 LAVISTA RD #U-1 | _____ Primary <input checked="" type="checkbox"/> _____ General | 12-04-1996 | \$22.19 | |
| TUCKER GA 30084 | _____ Other | | | |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement |
|---|-------------------------|
|---|-------------------------|

SUBTOTAL of Receipts This Page (optional)

99.04.2010.2010

SCHEDULE B ITEMIZED DISBURSEMENTS

OPERATING EXPENDITURES

Use separate schedules for each category of the Detailed Summary Page

FOR LINE NUMBER

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

NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

MONTY WARNER

Date (month, date, year)

Amount of Each Disbursement This Period

MONTY WARNER

EXP. REIM. - OFFICE SUPPLIES

3825 LAVISTA RD #U-1

Primary General
 Other

12-11-1996

\$52.36

TUCKER GA 30084

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

MONTY WARNER

SALARY

3825 LAVISTA RD #U-1

Primary General
 Other

12-13-1996

\$1,270.00

TUCKER GA 30084

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

MONTY WARNER

EXP. REIM. - OFFICE SUPPLIES

3825 LAVISTA RD #U-1

Primary General
 Other

12-18-1996

\$42.40

TUCKER GA 30084

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

STORAGE TRUST

STORAGE

45 WHITLOCK PLACE

Primary General
 Other

12-04-1996

\$100.00

MARIETTA, GA 30064

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

GARY PETERS

EXP. REIM. - TRAVEL

P.O. BOX 215

Primary General
 Other

12-10-1996

\$57.30

DALLAS GA 30132

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

GARY PETERS

EXP. REIM. - TRAVEL

P.O. BOX 215

Primary General
 Other

12-13-1996

\$49.60

DALLAS GA 30132

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

SCHEDULE B ITEMIZED DISBURSEMENTS

OPERATING EXPENDITURES

Use separate schedule for each category of the Detailed Summary Page

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

GARY PETERS

Date (month, date, year)

Amount of Each Disbursement This Period

GARY PETERS

EXP. REIM. - TRAVEL

P.O. BOX 215

Primary General Other

12-18-1996

\$18.90

DALLAS GA 30132

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

GARY PETERS

SALARY

P.O. BOX 215

Primary General Other

12-18-1996

\$750.00

DALLAS GA 30132

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

GARY PETERS

EXP. REIM. - TRAVEL

P.O. BOX 215

Primary General Other

12-30-1996

\$44.58

DALLAS GA 30132

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

MIAMI SYSTEMS

PRINTING

10150 ALLIANCE RD.

Primary General Other

12-11-1996

\$3,000.00

CINCINNATI, OH 45242

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

MENTER MEDIA SERVICES INC

EXPRESS SHIPPING

122 KENILWORTH DRIVE #317

Primary General Other

12-12-1996

\$13.50

TOWSON MD 21204

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

WHEELER'S AUTO SVC

REPAIRS

2829 BANKHEAD HWY

Primary General Other

12-09-1996

\$154.93

AUSTELL GA 30001

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

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

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

| | | | | | |
|-------------------|--|--|--------------------------|--|--|
| | Hall Printing | | Date (month, date, year) | | Amount of Each Disbursement This Period |
| HALL PRINTING | PRINTING | | | | |
| 470 ROSWELL ST | ___ Primary <input checked="" type="checkbox"/> General ___ Other | | 12-11-1996 | | \$147.00 |
| MARIETTA GA 30060 | | | | | |

| | | | | | |
|---|--|--|--------------------------|--|--|
| | Purpose of Disbursement | | Date (month, date, year) | | Amount of Each Disbursement This Period |
| FULL NAME, MAILING ADDRESS AND ZIP CODE | | | | | |
| FRIENDS OF DOLLY MADISON | ___ Primary <input checked="" type="checkbox"/> General ___ Other | | 11-26-1996 | | \$500.00 |

| | | | | | |
|---|--|--|--------------------------|--|--|
| | Purpose of Disbursement | | Date (month, date, year) | | Amount of Each Disbursement This Period |
| FULL NAME, MAILING ADDRESS AND ZIP CODE | | | | | |
| GA LUMBER | ___ Primary <input checked="" type="checkbox"/> General ___ Other | | 12-06-1996 | | \$262.35 |
| 7250 WASHINGTON ST SW | | | | | |
| COVINGTON GA 30209 | | | | | |

| | | | | | |
|---|--|--|--------------------------|--|--|
| | Purpose of Disbursement | | Date (month, date, year) | | Amount of Each Disbursement This Period |
| FULL NAME, MAILING ADDRESS AND ZIP CODE | | | | | |
| PATSY BANNISTER | ___ Primary <input checked="" type="checkbox"/> General ___ Other | | 12-06-1996 | | \$715.00 |
| 2446 NORTH VIEW DR. | | | | | |

| | | | | | |
|---|--|--|--------------------------|--|--|
| | Purpose of Disbursement | | Date (month, date, year) | | Amount of Each Disbursement This Period |
| FULL NAME, MAILING ADDRESS AND ZIP CODE | | | | | |
| COBB HOSPITAL | ___ Primary <input checked="" type="checkbox"/> General ___ Other | | 12-11-1996 | | \$243.25 |
| 3950 AUSTELL RD | | | | | |
| AUSTELL GA 30001 | | | | | |

| | | | | | |
|---|--|--|--------------------------|--|--|
| | Purpose of Disbursement | | Date (month, date, year) | | Amount of Each Disbursement This Period |
| FULL NAME, MAILING ADDRESS AND ZIP CODE | | | | | |
| DIANE MITCHELL | ___ Primary <input checked="" type="checkbox"/> General ___ Other | | 12-11-1996 | | \$200.00 |

| | | | | | |
|---|-------------------------|--|--|--|--|
| | Purpose of Disbursement | | | | |
| FULL NAME, MAILING ADDRESS AND ZIP CODE | | | | | |

SUBTOTAL of Receipts This Page (optional)

FORM 990-BL 10-06-99

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

Use separate schedule
 for each category of the
 Detailed Summary Page

Page 9 of 9
 FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

> BOB BARR - CONGRESS C00300640 GA/07

SOUTHERN PINE MFG.

Date (month, date, year)

Amount of Each
 Disbursement This Period

SOUTHERN PINE MFG.

WOOD

Primary

General

General

12-11-1996

\$641.00

2550 GREENSBORO RD

WASHINGTON GA 30673

Other

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each
 Disbursement This Period

CLYDE COLLIER PHOTOGRAPHY, I

PHOTOGRAPHY

Primary

General

General

12-12-1996

\$502.45

600 BROAD ST

ROME GA 30161

Other

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each
 Disbursement This Period

SPECIAL OCCASIONS CATERING

FUND RAISERS - FOOD

Primary

General

General

12-07-1996

\$229.25

4 COACH TRL

ROME GA 30161

Other

TOTAL This Period (last page this line number only)

\$23,987.27

SUBTOTAL of Receipts This Page (optional)

110303043014

(Use separate schedule for each numbered line.)

| > BOB BARR - CONGRESS C00300640 GA07 Nature of Debt (purpose) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|--|--|--------------------------------|---------------------|---|
| PRINTING Full Name, Mailing Address and Zip PPI 1095 HUFF RD NW ATLANTA GA 30368 | \$14,044.40 | \$0.00 | \$0.00 | \$14,044.40 |
| Nature of Debt (purpose) | ADVERTISING/SIGNS | | | |

| | |
|---|-------------|
| 1) SUBTOTALS This Period This Page (optional) | \$79,709.05 |
| 2) TOTALS This Period (last page in this line only) | \$79,709.05 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | \$79,709.05 |

10/25/2011 10:58:10 AM

\$1800

Bob Barry

Period 11/26/96 through 12/31/96

James L. Webb ? 12/15/96 \$500.
2598 Starondale dr. NE
Ath. GA. 30305-3859

Disbursements

Bill Adams 11/26/96 \$448.25
P.O. Box 215
Dallas, GA. 30132
reim
Not sufficient
Disclosure

Delta Airlines 12/29/96
1030 Delta Blvd TRAVEL Expense \$352.92
Ath. GA. 30320-6001 for whom?

Jeff Breedlove 12-10-96
1306 Bayliss Dr. EXP/reim/travel \$340.
Alexandria, VA 22302 (NOT suff.)

Andy Bush \$82.73
3128 Nectar ave. (NOT suff.) 12/9/96
Powder Springs, GA. 30073
reim

9103E 56E 40 66

BARR

12/31/93 report

received
9-15-95

Sec. of STATE

\$2,000.

Victory America

< Not disclosed
Address >

What Addr.?

10-6-94 \$1,000.

Electrical Construction

< ? Addr. >

9-22-94 \$1,000.

99-04-303-3017

| | |
|----------------|-----------|
| JONATHAN Blyth | BOB BARR |
| 202- | Committee |
| 225 | |
| 2931 | |

Correction to FEC form 3
Page 3
for additional PAC contributions

SECRETARY OF STATE
FILE COPY

| Report for | 12/31/93 original | amendment | Corrected | Corrected Year to date |
|---|----------------------|-----------|-----------|---------------------------|
| 11 CONTRIBUTIONS (other than loans) FROM: | | | | |
| (a) Individuals/Persons Other Than Political Committees | | | | |
| (i) Itemized (use Schedule A) | 60,985.01 | | 60,985.01 | |
| (ii) Unitemized | 17,438.00 | (300.00) | 17,138.00 | |
| (iii) Total of contributions from individuals | 78,423.01 | | 78,423.01 | 78,423.01 |
| (b) Political Party Committees | | | | |
| (c) Other Political Committees (such as PAC's) | 2,750.00 | 300.00 | 3,050.00 | 3,050.00 |
| (d) The Candidate | | | | |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11) | 81,173.01 | | 81,473.01 | 81,473.01 |

| Report for | 09/30/94 original | amendment | Corrected | Corrected Year to date |
|---|----------------------|------------|------------|---------------------------|
| 11 CONTRIBUTIONS (other than loans) FROM: | | | | |
| (a) Individuals/Persons Other Than Political Committees | | | | |
| (i) Itemized (use Schedule A) | 106,384.28 | | 106,384.28 | |
| (ii) Unitemized | 62,962.10 | (3,000.00) | 59,962.10 | |
| (iii) Total of contributions from individuals | 169,346.38 | | 169,346.38 | 312,990.28 |
| (b) Political Party Committees | 15,079.73 | | 15,079.73 | 15,079.73 |
| (c) Other Political Committees (such as PAC's) | 29,265.85 | 3,000.00 | 32,265.85 | 34,065.85 |
| (d) The Candidate | | | | |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11) | 213,691.96 | | 216,691.96 | 362,135.86 |

| Report for | 10/19/94 original | amendment | Corrected | Corrected Year to date |
|---|----------------------|------------|-----------|---------------------------|
| 11 CONTRIBUTIONS (other than loans) FROM: | | | | |
| (a) Individuals/Persons Other Than Political Committees | | | | |
| (i) Itemized (use Schedule A) | 49,075.00 | | 49,075.00 | |
| (ii) Unitemized | 21,745.60 | (2,800.00) | 18,945.60 | |
| (iii) Total of contributions from individuals | 70,820.60 | | 70,820.60 | 383,810.88 |
| (b) Political Party Committees | | | | 15,079.73 |
| (c) Other Political Committees (such as PAC's) | 17,548.95 | 2,800.00 | 20,348.95 | 54,414.80 |
| (d) The Candidate | | | | |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11) | 88,369.55 | | 91,169.55 | 453,305.41 |

| Report for | 11/28/94 original | amendment | Corrected | Corrected Year to date |
|---|----------------------|-----------|-----------|---------------------------|
| 11 CONTRIBUTIONS (other than loans) FROM: | | | | |
| (a) Individuals/Persons Other Than Political Committees | | | | |
| (i) Itemized (use Schedule A) | 54,198.00 | | 54,198.00 | |
| (ii) Unitemized | 2,539.45 | (200.00) | 2,339.45 | |
| (iii) Total of contributions from individuals | 56,737.45 | | 56,737.45 | 440,548.33 |
| (b) Political Party Committees | 4,920.00 | | 4,920.00 | 19,999.73 |
| (c) Other Political Committees (such as PAC's) | 20,387.00 | 200.00 | 20,587.00 | 75,001.80 |
| (d) The Candidate | | | | |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11) | 82,044.45 | | 82,244.45 | 535,549.86 |

RECEIVED

SEP 15 1995

| Report for | 12/31/94 original | amendment | Corrected | Corrected Year to date |
|---|----------------------|-----------|-----------|---------------------------|
| 11 CONTRIBUTIONS (other than loans) FROM: | | | | |
| (a) Individuals/Persons Other Than Political Committees | | | | |
| (i) Itemized (use Schedule A) | 17,810.00 | | 17,810.00 | |
| (ii) Unitemized | 2,686.12 | - | 2,686.12 | |
| (iii) Total of contributions from individuals | 20,496.12 | | 20,496.12 | 461,044.45 |
| (b) Political Party Committees | 46.65 | | 46.65 | 20,046.38 |
| (c) Other Political Committees (such as PAC's) | 13,500.00 | - | 13,500.00 | 68,501.80 |
| (d) The Candidate | | | | |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11) | 34,042.77 | | 34,042.77 | 589,592.63 |

SECRETARY OF STATE

SCHEDULE A ITEMIZED RECEIPTS

CONTRIBUTIONS FROM OTHER POLITICAL COMMITTEES

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

NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS '94 C00283150 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| BAKE PAC 50 HURT PLAZA #1050 ATLANTA GA 30303 | Occupation | 10/24/1994 | \$ 100.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > \$ 100.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| THE COMMITTEE TO CHANGE THE CONGRESS | Occupation | 11/04/1994 | \$ 100.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > \$ 100.00 | | | |

| | |
|---|-----------|
| TOTAL This Period (last page this line number only) | \$ 200.00 |
|---|-----------|

| | |
|---|----|
| SUBTOTAL of Receipts This Page (optional) | \$ |
|---|----|

99.04.393.3019

SCHEDULE A ITEMIZED RECEIPTS

CONTRIBUTIONS FROM OTHER POLITICAL COMMITTEES

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS '94 C00283150 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| COLUMBIA HEALTHCARE GOOD GOV. FUND 1200 "G" STREET NW SUITE 600 WASHINGTON DC 20005 | Occupation | 10/01/1994 | \$ 1,000.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other Aggregate Year-to-Date > \$ 1,000.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| VICTORY AMERICA | Occupation | 10/06/1994 | \$ 1,000.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other Aggregate Year-to-Date > \$ 1,000.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| NORTH DEKALB REP. WOMEN 1385 GREENLAND DRIVE NE ATLANTA GA 30306 | Occupation | 10/08/1994 | \$ 100.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other Aggregate Year-to-Date > \$ 100.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| SECURITY LIFE PAC 601 THIRTEENTH STREET NW SUI SOUTH WASHINGTON DC 20005 | Occupation | 10/10/1994 | \$ 500.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other Aggregate Year-to-Date > \$ 500.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| FIRST UNION EMPLOYEES ONE FIRST UNION PLAZA CHARLOTTE NC 28288 | Occupation | 10/12/1994 | \$ 200.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other Aggregate Year-to-Date > \$ 200.00 | | | |

SUBTOTAL of Receipts This Page (optional)

\$

SCHEDULE A ITEMIZED RECEIPTS

| | |
|---|-----------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | Page 2 of _____ |
| | FOR LINE NUMBER 11(c) |

CONTRIBUTIONS FROM OTHER POLITICAL COMMITTEES

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NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS '94 C00283150 GA/07

TOTAL This Period (last page this line number only)

\$ 2,800.00

SUBTOTAL of Receipts This Page (optional)

\$

SCHEDULE A ITEMIZED RECEIPTS

CONTRIBUTIONS FROM OTHER POLITICAL COMMITTEES

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS '94 C00283150 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| ILLINOIS TOOL WORKERS FOR BETTER GOV. 3600 WEST LAKE AVENUE GLENVIEW IL 60025 | Occupation | 08/18/1994 | \$ 500.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > \$ 500.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| MAPCO PAC 1800 SO. BALTIMORE AVENUE P.O. TULSA OK 74101 | Occupation | 09/19/1994 | \$ 500.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > \$ 500.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| ELECTRICAL CONSTRUCTION PAC | Occupation | 09/22/1994 | \$ 1,000.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > \$ 1,000.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| MCDONALD'S PAC MCDONALD'S PLAZA OAK BROOK ILL 60521 | Occupation | 09/22/1994 | \$ 500.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > \$ 500.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| ASSOCIATES BUILDERS & CONTRACTORS 1300 NORTH SEVENTEENTH STRE ROSSLYN VA 22209 | Occupation | 09/30/1994 | \$ 500.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > \$ 500.00 | | | |

SUBTOTAL of Receipts This Page (optional)

\$

SCHEDULE A ITEMIZED RECEIPTS

| | |
|---|-----------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | Page 2 of _____ |
| | FOR LINE NUMBER 11(c) |

CONTRIBUTIONS FROM OTHER POLITICAL COMMITTEES

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

NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS '94 C00283150 GA/07

TOTAL This Period (last page this line number only)

\$ 3,000.00

SUBTOTAL of Receipts This Page (optional)

\$

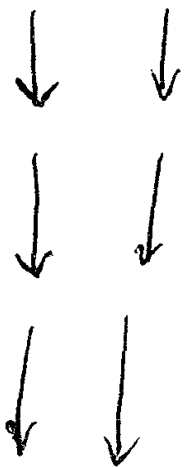
BARR

\$1393

Period -> 10/1/96 thru 10/16/96

Disbursements:

Clarke Steele



reim
for what?

10-1-96

\$75.

reim - travel
< Not Full Disclosure >

10-7-96

\$302.

reim - travel

10-10-96

\$78.

10-10-96

\$300.

Wheeler's Auto Sew.

2829 Bankhead Hwy
Austell, GA. 30001

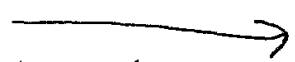
repairs

10-11-96

\$138.93

is this a personal expense?

Cash



Barbecue

\$500.

231 Maxham Rd.
Austell GA, 30001

who is cash

10-11-96

who received the cash?

Gary Peters

reim
for what?

10-11-96

\$82.57

11203 303 10 68

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

10/23

USE FEC MAILING LABEL

TYPE OR PRINT

| | | |
|---|--------------------------------|------|
| 1. NAME OF COMMITTEE (In full) BOB BARR - CONGRESS | | 10y. |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 231 MAXHAM RD., SUITE 100 | | |
| CITY, STATE and ZIP CODE AUSTELL, GA 30001 | STATE/DISTRICT GA/07 | |
| 2. FEC IDENTIFICATION NUMBER C00300640 | | |
| 3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | | |

4. TYPE OF REPORT

- April 15 Quarterly Report
- Twelfth day report preceding GENERAL (Type of Election)
election on 11/5/96 in the State of GEORGIA
- July 15 Quarterly Report
- October 15 Quarterly Report
- Thirtieth day report following the General Election on _____ in the State of _____
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- Termination Report

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

SUMMARY

| 5. Covering Period <u>10/1/96</u> through <u>10/16/96</u> | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)) | 83,349.00 | 603,233.86 |
| (b) Total Contribution Refunds (from Line 20(d)) | | 500.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) | 83,349.00 | 602,733.86 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 126,113.91 | 513,438.19 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | | |
| (c) Net Operating Expenditures (subtract Line 7(b) from 7(a)) | 126,113.91 | 513,438.19 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | 250,081.83 | |
| 9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) | | |
| 10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D) | | |

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

| | |
|--|-------------------------|
| Type or Print Name of Treasurer CHARLES C. BLACK | |
| Signature of Treasurer | Date 10/23/96 |

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

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

| Name of Committee (In full) | Report Covering the Period: | |
|---|-------------------------------|-----------------------------------|
| BOB BARR - CONGRESS | From: 10/1/96 | To: 10/16/96 |
| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Calendar Year-To-Date |
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A) TO | | |
| (ii) Unitemized BE | | |
| (iii) Total of contributions from individuals ADDED | | 387,058.59 |
| (b) Political Party Committees BY | | 10,584.00 |
| (c) Other Political Committees (such as PACs) AMENDMENT | | 122,242.27 |
| (d) The Candidate | | |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d)) | 83,349.00 | 603,233.86 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | 36,728.25 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate | | |
| (b) All Other Loans | | |
| (c) TOTAL LOANS (add 13(a) and (b)) | | |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | | |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 179.70 | 3,467.43 |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) | 83,528.70 | 643,429.54 |
| II. DISBURSEMENTS | | |
| 17. OPERATING EXPENDITURES | 126,113.91 | 513,438.19 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | 47,184.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate | | |
| (b) Of All Other Loans | | |
| (c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) | | |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 7,750.00 | |
| (b) Political Party Committees | | |
| (c) Other Political Committees (such as PACs) | | 500.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) | | 500.00 |
| 21. OTHER DISBURSEMENTS | | |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) | 133,863.91 | 568,872.19 |
| III. CASH SUMMARY | | |
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | \$ | 300,417.04 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16) | \$ | 83,528.70 |
| 25. SUBTOTAL (add Line 23 and Line 24) | \$ | 383,945.74 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) | \$ | 133,863.91 |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) | \$ | 250,081.83 |

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

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

NAME OF COMMITTEE (in Full)
> BOB BARR - CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|--|--------------------------|---|
| PROCESS POSTERS 1095 Huff Road Nw Atlanta GA 30318 | YARD SIGNS <input type="checkbox"/> Primary <input type="checkbox"/> Other <input checked="" type="checkbox"/> General | 10-01-1996 | \$2,000.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| OFFICE DEPOT 119 COBB PKY N MARIETTA, GA 30062 | OFFICE SUPPLIES <input type="checkbox"/> Primary <input type="checkbox"/> Other <input checked="" type="checkbox"/> General | 10-01-1996 | \$9.96 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|--|--------------------------|---|
| POSTMASTER POSTMASTER MARIETTA GA 30067 | STAMPS <input type="checkbox"/> Primary <input type="checkbox"/> Other <input checked="" type="checkbox"/> General | 10-01-1996 | \$2,400.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| CLARKE STEELE P.O. BOX 215 DALLAS GA 30132 | REIMBURSEMENT <input type="checkbox"/> Primary <input type="checkbox"/> Other <input checked="" type="checkbox"/> General | 10-01-1996 | \$75.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| HARRIS BROADCASTING P.O. BOX 96488 CHACAGO IL 60693 | REMOTE BROADCASTS <input type="checkbox"/> Primary <input type="checkbox"/> Other <input checked="" type="checkbox"/> General | 10-01-1996 | \$361.25 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| CITY OF CARROLLTON CARROLLTON CITY HALL CARROLLTON, GA 30117 | SIGN BOND <input type="checkbox"/> Primary <input type="checkbox"/> Other <input checked="" type="checkbox"/> General | 10-01-1996 | \$500.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
| | | | |

SUBTOTAL of Receipts This Page (optional)

99.04.393.3027

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

Use separate schedule for each category of the Detailed Summary Page

Page 2 of 8
 FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

| | | | | Amount of Each Disbursement This Period |
|-----------------|-------|---------|---------|---|
| GARY PETERS | REIM. | | | |
| P.O. BOX 215 | | | X | 10-01-1996 |
| | | Primary | General | |
| DALLAS GA 30132 | | Other | | \$80.49 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
| Menter Media Services Inc | MEDIA | | |
| 122 Kenilworth Drive #317 | | | X |
| | | Primary | General |
| Towson MD 21204 | | | Other |
| | | | 10-03-1996 |
| | | | \$43,566.75 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
| CLARKE STEELE | PHOTOS | | |
| P.O. BOX 215 | | | X |
| | | Primary | General |
| DALLAS GA 30132 | | | Other |
| | | | 10-03-1996 |
| | | | \$20.72 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
| KRISTINA TWITTY | REIM. OFFICE SUPPLIES | | |
| P.O. BOX 215 | | | X |
| | | Primary | General |
| DALLAS GA 30132 | | | Other |
| | | | 10-03-1996 |
| | | | \$14.26 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
| JEFF BREEDLOVE | REIM. GAS | | |
| 1306 BAYLISS DR | | | X |
| | | Primary | General |
| ALEXANDRIA VA 22302 | | | Other |
| | | | 10-03-1996 |
| | | | \$84.38 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
| MONTY WARNER | SALARY | | |
| 3825 LAVISTA RD #U-1 | | | X |
| | | Primary | General |
| TUCKER GA 30084 | | | Other |
| | | | 10-03-1996 |
| | | | \$1,220.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) |
|---|-------------------------|--------------------------|
|---|-------------------------|--------------------------|

SUBTOTAL of Receipts This Page (optional)

99.04.393.3028

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

Use separate schedule for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)
> BOB BARR - CONGRESS C00300640 GA/07

99.04.393.3029

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| CLARKE STEELE P.O. BOX 215 DALLAS GA 30132 | SALARY <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-03-1996 | \$1,985.00 |
| JEFF BREEDLOVE 1306 BAYLISS DR ALEXANDRIA VA 22302 | SALARY <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-03-1996 | \$250.00 |
| JEFF BREEDLOVE 1306 BAYLISS DR ALEXANDRIA VA 22302 | SALARY <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-03-1996 | \$3,234.55 |
| BRIAN JOHNSON P.O. BOX 215 DALLAS GA 30132 | SALARY <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-03-1996 | \$700.00 |
| FEDERAL EXPRESS 229 PEACHTREE ST NE ATLANTA, GA 30303 | OVERNIGHT <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-03-1996 | \$27.00 |
| LASER X-PRESS 5600 SCOFIELD RD ATLANTA, GA 30349 | PRINTING <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-03-1996 | \$84.75 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

Use separate schedule for each category of the Detailed Summary Page

Page 4 of 8
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)
 > BOB BARR - CONGRESS C00300840 GA/07

| | | | Amount of Each Disbursement This Period |
|-------------------|--------|--|---|
| POSTMASTER | STAMPS | | |
| | | 10-04-1996 | \$800.00 |
| POSTMASTER | | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | |
| MARIETTA GA 30067 | | | |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--|---|
| SHIRLEY GREEN | SECRETARIAL | | |
| | | 10-04-1996 | \$120.00 |
| 8208 WINNDALE ROAD | | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | |
| DALLAS GA 30132 | | | |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--|---|
| CITY OF DOUGLASVILLE | SIGN BOND | | |
| | | 10-07-1996 | \$275.00 |
| 8485 COURTHOUSE SQ W | | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | |
| DOUGLASVILLE GA 30134 | | | |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--|---|
| WHEELER'S AUTO SVC | REPAIRS | | |
| | | 10-07-1996 | \$150.00 |
| 2829 BANKHEAD HWY | | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | |
| AUSTELL GA 30001 | | | |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--|---|
| POSTMASTER | POSTAGE | | |
| | | 10-07-1996 | \$640.00 |
| POSTMASTER | | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | |
| MARIETTA GA 30067 | | | |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--|---|
| POSTMASTER | POSTAGE | | |
| | | 10-07-1996 | \$635.00 |
| POSTMASTER | | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | |
| MARIETTA GA 30067 | | | |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
| | | | |

SUBTOTAL of Receipts This Page (optional)

PEOPLE PAGE 110 00 00 01 3030

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

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NAME OF COMMITTEE (in Full)
 > BOB BARR - CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| SAM'S CLUB 150 S. COBB PKWY. MARIETTA, GA 30060 | SUPPLIES FOR OFFICE _____ Primary <input checked="" type="checkbox"/> General _____ Other | 10-07-1996 | \$113.75 |
| CLARKE STEELE P.O. BOX 215 DALLAS GA 30132 | REIM. TRAVEL _____ Primary <input checked="" type="checkbox"/> General _____ Other | 10-07-1996 | \$302.82 |
| POSTMASTER POSTMASTER MARIETTA GA 30067 | POSTAGE _____ Primary <input checked="" type="checkbox"/> General _____ Other | 10-07-1996 | \$111.40 |
| CASH 231 MAXHAM ROAD AUSTELL GA 30001 | CASH FOR PROPS _____ Primary <input checked="" type="checkbox"/> General _____ Other | 10-10-1996 | \$1,261.00 |
| CLARKE STEELE P.O. BOX 215 DALLAS GA 30132 | REIM. TRAVEL _____ Primary <input checked="" type="checkbox"/> General _____ Other | 10-10-1996 | \$78.00 |
| CLARKE STEELE P.O. BOX 215 DALLAS GA 30132 | REIM. TRAVEL _____ Primary <input checked="" type="checkbox"/> General _____ Other | 10-10-1996 | \$300.00 |

SUBTOTAL of Receipts This Page (optional)

19960403 10:00

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

Use separate schedule for each category of the Detailed Summary Page

Page 6 of 8
 FOR LINE NUMBER

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

NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| JEFF BREEDLOVE 1306 BAYLISS DR ALEXANDRIA VA 22302 | REIM. GAS <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-10-1996 | \$24.51 |
| JEFF BREEDLOVE 1306 BAYLISS DR ALEXANDRIA VA 22302 | REIM. GAS <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-10-1996 | \$24.51 |
| DIANE MICHAEL P.O. BOX 215 DALLAS GA 30132 | BAND <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-10-1996 | \$200.00 |
| Menter Media Services Inc 122 Kenilworth Drive #317 Towson MD 21204 | MEDIA <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-11-1996 | \$49,254.38 |
| CASH 231 MAXHAM ROAD AUSTELL GA 30001 | BAR-B-QUE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-11-1996 | \$500.00 |
| WHEELER'S AUTO SVC 2829 BANKHEAD HWY AUSTELL GA 30001 | REPAIRS <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-11-1996 | \$138.93 |

SUBTOTAL of Receipts This Page (optional)

2025 RELEASE UNDER E.O. 14176

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

Use separate schedule
 for each category of the
 Detailed Summary Page

Page 7 of 8
 FOR LINE NUMBER

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

NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

| | | | Amount of Each Disbursement This Period |
|-----------------|--|------------|--|
| BILL ADAMS | SALARY | | |
| P.O. BOX 215 | | 10-11-1996 | \$1,000.00 |
| | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | |
| DALLAS GA 30132 | | | |

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| | | | |
|-----------------|--|------------|----------|
| GARY PETERS | SALARY | | |
| P.O. BOX 215 | | 10-11-1996 | \$550.00 |
| | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | |
| DALLAS GA 30132 | | | |

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| | | | |
|-----------------|--|------------|---------|
| GARY PETERS | REIM. | | |
| P.O. BOX 215 | | 10-11-1996 | \$82.57 |
| | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | |
| DALLAS GA 30132 | | | |

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| | | | |
|----------------------|--|------------|------------|
| MONTY WARNER | SALARY | | |
| 3825 LAVISTA RD #U-1 | | 10-11-1996 | \$1,220.00 |
| | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | |
| TUCKER GA 30084 | | | |

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| | | | |
|-----------------|--|------------|------------|
| CLARKE STEELE | SALARY | | |
| P.O. BOX 215 | | 10-11-1996 | \$1,985.00 |
| | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | |
| DALLAS GA 30132 | | | |

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| | | | |
|--------------------|--|------------|---------|
| SHIRLEY GREEN | SECRETARIAL | | |
| 8208 WINNDALE ROAD | | 10-11-1996 | \$45.00 |
| | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | |
| DALLAS GA 30132 | | | |

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year)

SUBTOTAL of Receipts This Page (optional)

99.04.303.303

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

Use separate schedule
for each category of the
Detailed Summary Page

Page 8 of 8
FOR LINE NUMBER

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

NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

| | | | Amount of Each Disbursement This Period |
|-----------------|--|---|--|
| KRISTINA TWITTY | SALARY | | |
| P.O. BOX 215 | | 10-11-1996 | \$1,146.60 |
| DALLAS GA 30132 | <input type="checkbox"/> Primary <input type="checkbox"/> Other | <input checked="" type="checkbox"/> General | |

TOTAL This Period (last page this line number only)

\$117,572.58

SUBTOTAL of Receipts This Page (optional)

1100E " 593 " 10 " 66

BARR

\$800.

Period 6/20/96 thru 6/30/96

Disbursements

Rick Shelby exp-reim-Travel 6/21/96 \$398.2
< Not full disclosure >

Jeff Breedlove 6/21/96 \$205.23
↓ ↓ exp-reim-Travel
petty cash fund 6/21/96
< For what purpose > \$200.

94.04.393.3035

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

8p.

7/15

USE FEC MAILING LABEL OR TYPE OR PRINT

| | | |
|--|-------------------------|---|
| 1. NAME OF COMMITTEE (in full) BOB BARR - CONGRESS | | 2. FEC IDENTIFICATION NUMBER C00300640 |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 231 MAXHAM RD., SUITE 100 | | |
| CITY, STATE and ZIP CODE: AUSTELL, GA 30001 | STATE/DISTRICT GA/07 | |
| 3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | | |

4. TYPE OF REPORT

April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid-Year Report (Non-election Year Only)

Termination Report

RECEIVED PRIMARY (Type of Election)
 Election on JULY 9 in the State of GEORGIA
JUL 17 1996 Thirtieth day report following the General Election on
SECRETARY OF STATE in the State of _____

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

SUMMARY

| 5. Covering Period | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|---|
| <u>6/20/96</u> through <u>6/30/96</u> | | |
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)) | 50,319.76 | 333,852.08 |
| (b) Total Contribution Refunds (from Line 20(d)) | | 500.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) | 50,319.76 | 333,352.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 10,928.92 | 177,124.30 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | | |
| (c) Net Operating Expenditures (subtract Line 7(b) from 7(a)) | 10,928.92 | 177,124.30 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | 318,967.63 | For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 24,974.54 | |

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 CHARLES C. BLACK | |
| Signature of Treasurer | Date 7-15-96 |

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

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full)
BOB BARR - CONGRESS

Report Covering the Period:

From: 6/20/96

To: 6/30/96

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Calendar Year To Date |
|--|-------------------------------|-----------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A) TO | | |
| (ii) Unitemized BE | | |
| (iii) Total of contributions from individuals ADDED | | 211,207.32 |
| (b) Political Party Committees BY | | |
| (c) Other Political Committees (such as PACs) AMENDMENT | | 72,325.00 |
| (d) The Candidate | | |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d)) | 50,319.76 | 333,852.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | 31,228.25 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate | | |
| (b) All Other Loans | | |
| (c) TOTAL LOANS (add 13(a) and (b)) | | |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | | |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | | 1,671.12 |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) | 50,319.76 | 366,751.45 |
| II. DISBURSEMENTS | | |
| 17. OPERATING EXPENDITURES | 10,928.92 | 177,124.30 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | 45,684.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate | | |
| (b) Of All Other Loans | | |
| (c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) | | |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (b) Political Party Committees | | |
| (c) Other Political Committees (such as PACs) | | 500.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) | | 500.00 |
| 21. OTHER DISBURSEMENTS | | |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) | 10,928.92 | 223,308.30 |

III. CASH SUMMARY

| | |
|---|---------------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | \$ 279,576.79 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16) | \$ 50,319.76 |
| 25. SUBTOTAL (Add Line 23 and Line 24) | \$ 329,896.55 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) | \$ 10,928.92 |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) | \$ 318,967.63 |

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1
FOR LINE NUM. N/A

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NAME OF COMMITTEE (In Full)
BOB BARR - CONGRESS

| | | | |
|---|--|--------------------------------|---|
| <p>A. Full Name, Mailing Address and ZIP Code CHARLES C. BLACK 231 MAXHAM RD., SUITE 100 AUSTELL, GA 30001</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer SELF-EMPLOYED</p> <p>Occupation ATTORNEY - CPA</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Receipt this \$1,150. MEMO</p> |
| <p>B. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Receipt this</p> |
| <p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Receipt this</p> |
| <p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Receipt this</p> |
| <p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Receipt this</p> |
| <p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Receipt this</p> |
| <p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Receipt this</p> |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (label page this line number only)

09.04.2023.3038

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

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

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NAME OF COMMITTEE (in Full)
 > BOB BARR - CONGRESS C00300640 GA/07

62020 "E03E" 40 "66

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
|---|-------------------------|--------------------------|---|

| CAMPAIGN MAIL & DATA | | ADVERTISING/ CABLE | |
|---------------------------------------|--------------|-----------------------|------------|
| 2560 HUNTINGTON AVE ALEXANDRIA, VA | X Primary | General 06-20-1996 | \$1,340.60 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
|---|-------------------------|--------------------------|---|

| NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE | | SATELLITE FEED | |
|--|--------------|-----------------------|------------|
| 320 FIRST STREET S.E. WASHINGTON DC 20003 | X Primary | General 06-20-1996 | \$4,282.68 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
|---|-------------------------|--------------------------|---|

| NATIONAL RESTAURANT ASSOC PAC | | CAMPAIN FLY-IN | |
|---|--------------|-----------------------|----------|
| 1200 SEVENTEETH ST NW WASHINGTON DC 20036-3097 | X Primary | General 06-20-1996 | \$859.95 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
|---|-------------------------|--------------------------|---|

| ATLANTA JRNL & CONSTITUTION | | SUBSCRIPTION | |
|--|--------------|-----------------------|---------|
| 315 W PONCE DE LEON AVE DECATUR, GA 30030 | X Primary | General 06-21-1996 | \$89.48 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
|---|-------------------------|--------------------------|---|

| DAVID TURLEY | | EXP. REIM. - OFFICE SUPPLIES | |
|-------------------------------------|--------------|------------------------------|--------|
| 444 MAINGET ST MARIETTA GA 30060 | X Primary | General 06-21-1996 | \$6.25 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
|---|-------------------------|--------------------------|---|

| RICK SHELBY | | CONSULTING | |
|---|--------------|-----------------------|------------|
| 7700 LEESBURGH PIKE SUITE 307 FALLS CHURCH, VA 22043 | X Primary | General 06-21-1996 | \$3,000.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE B ITEMIZED DISBURSEMENTS

OPERATING EXPENDITURES

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NAME OF COMMITTEE (in Full)
 > BOB BARR - CONGRESS C003U0640 GA/07

PHONE "363" 40" 66

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| EXP. REIM. - TRAVEL | | | |
| RICK SHELBY 7700 LEESBURGH PIKE SUITE 307 FALLS CHURCH, VA 22043 | X ----- Primary ----- ----- Other ----- | General 06-21-1996 | \$398.20 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| EXP. REIM. - TRAVEL | | | |
| BOB BARR 631 CONCORD ROAD SMYRNA GA 30082 | X ----- Primary ----- ----- Other ----- | General 06-21-1996 | \$4.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| EXP. REIM. - TRAVEL | | | |
| JEFF BREEDLOVE 1306 BAYLISS DR ALEXANDRIA VA 22302 | X ----- Primary ----- ----- Other ----- | General 06-21-1996 | \$205.23 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| DUES & SUBSCRIPTIONS | | | |
| ROME NEWS TRIBUNE 12 REDMOND CT ROME, GA 30165 | X ----- Primary ----- ----- Other ----- | General 06-21-1996 | \$57.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| SUBSCRIPTION | | | |
| DALLAS NEWS | X ----- Primary ----- ----- Other ----- | General 06-21-1996 | \$5.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| SUBSCRIPTION | | | |
| PAULDING NEIGHBOR | X ----- Primary ----- ----- Other ----- | General 06-21-1996 | \$56.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE B ITEMIZED DISBURSEMENTS

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

Page 3 of 3

FOR LINE NUMBER

17

OPERATING EXPENDITURES

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NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

POSTMASTER POSTAGE
 X Primary General 06-21-1996 \$122.00
 MARIETTA GA 30067 Other

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

WBHF ADVERTISING/RADIO
 X Primary General 06-21-1996 \$245.00
 768 WEST AVE Other
 CARTERSVILLE GA 30120

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

SHIRLEY GREEN SECRETARIAL
 X Primary General 06-21-1996 \$30.00
 8208 WINNDALE ROAD Other
 DALLAS GA 30132

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

JEFF BREEDLOVI PETTY CASH FUND
 X Primary General 06-21-1996 \$200.00
 1306 BAYLISS DR Other
 ALEXANDRIA VA 22302

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

POSTMASTER POSTAGE
 X Primary General 06-21-1996 \$27.53
 MARIETTA GA 30067 Other

TOTAL This Period (last page this line number only) \$10,928.92

SUBTOTAL of Receipts Page (optional)

F050304066

SCHEDULE D

DEBTS AND OBLIGATIONS

Excluding Loans

Page 1 of 2 for

LINE NUMBER 10

(Use separate schedule for each numbered line.)

| > BOB BARR - CONGRESS C00300640 GA/07 | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|--|--------------------------------|---------------------|---|
| <i>Full Name, Mailing Address and Zip</i> | | | | |
| JEFF BREEDLOVE | \$0.00 | \$2,905.23 | \$405.23 | \$2,500.00 |
| 1306 BAYLISS DR | | | | |
| ALEXANDRIA VA 22302 | | | | |
| <i>Nature of Debt (purpose)</i> | <i>Salary</i> | | | |
| <i>Full Name, Mailing Address and Zip</i> | | | | |
| SOUTHERN BELL | \$0.00 | \$714.51 | \$0.00 | \$714.51 |
| S147 PEACHTREE INDUSTRIAL B | | | | |
| CHAMBLEE GA 30341 | | | | |
| <i>Nature of Debt (purpose)</i> | <i>Telephone</i> | | | |
| <i>Full Name, Mailing Address and Zip</i> | | | | |
| BILL ADAMS | \$0.00 | \$3,986.43 | \$0.00 | \$3,986.43 |
| P.O. BOX 215 | | | | |
| DALLAS GA 30132 | | | | |
| <i>Nature of Debt (purpose)</i> | <i>EXP. REIM. - FUND RA</i> | | | |
| <i>Full Name, Mailing Address and Zip</i> | | | | |
| RICK SHELBY | \$0.00 | \$6,398.00 | \$3,398.20 | \$3,000.00 |
| 7700 LEESBURGH PIKE SUITE 3 | | | | |
| FALLS CHURCH, VA 22043 | | | | |
| <i>Nature of Debt (purpose)</i> | <i>Consulting</i> | | | |
| <i>Full Name, Mailing Address and Zip</i> | | | | |
| TERRANCE GROUP | \$0.00 | \$11,300.00 | \$0.00 | \$11,300.00 |
| 211 NORTH UNION, SUITE 200 | | | | |
| ALEXANDRIA VA 22314 | | | | |
| <i>Nature of Debt (purpose)</i> | <i>Polling</i> | | | |
| <i>Full Name, Mailing Address and Zip</i> | | | | |
| WALLACE CATERING | \$0.00 | \$1,908.00 | \$0.00 | \$1,908.00 |
| 1010 OWEN ROAD | | | | |
| DALLAS GA 30132 | | | | |
| <i>Nature of Debt (purpose)</i> | <i>FUND RAISERS - FOOD</i> | | | |
| <i>Full Name, Mailing Address and Zip</i> | | | | |
| DAN MORGAN & ASSOCIATES | \$0.00 | \$1,565.60 | \$0.00 | \$1,565.60 |
| 445f Brookfield Corp. Dr., | | | | |
| Chantilly, VA 22021-1652 | | | | |

2025 RELEASE UNDER E.O. 14176

| > BOB BARR - CONGRESS GA07 | C00300640 | Outstanding Balance Beginning This Period | Amount incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|-------------------------------|-----------------|--|--------------------------------|---------------------|---|
| Nature of Debt (purpose) | CONSULTING FUND | | | | |

| | |
|---|-------------|
| 1) SUBTOTALS This Period This Page (optional) | |
| 2) TOTALS This Period (last page in this line only) | \$24,974.54 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | \$24,974.54 |

20080303 10:30 AM

4402" 562" 40" 66

\$ 5800.

BOB BARR

Covering Period

10-1-96 thru 10-16-96

James Mathew Davis ? 10-5-96 \$ 500.
JACK Kirby ? 10-5-96 \$ 250.

Robert H. Richie ? 10-7-96 \$ 250.

Jimmy G. Sanders ? 10-7-96 \$ 100.

William H. Wiggins ? 10-7-96 \$ 25.

Richard M. Jones ? 10-8-96 \$ 100.

Tommy H. Karalson ? 10-9-96 \$ 500.

David R. Little ? 10-9-96 \$ 250.

James C. Scott ? 10-10-96 \$ 500.

Terry R. Griffin ? 10-16-96 \$ 100.

William H. W. Huntley ? 10-16-96 \$ 200.

Robert L. Johnston ? 10-16-96 \$ 200.

Elliott A. Lewis ? 10-16-96 \$ 250.

Guy & Ginny Millner ? 10-16-96 \$ 2000.

Lewis B. Watford ? 10-16-96 \$ 100.

William H. Wiggins ? 10-16-96 \$ 50.

Charles C. Wilson ? 10-16-96 \$ 200.

John F. Sackett ? 10-4-96 \$ 250.

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full)
BOB BARR - CONGRESS

Report Covering the Period

From: **10/01/96**

To: **10/16/96**

I. RECEIPTS

11 CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Remitted (use Schedule A)

(ii) Unremitted

(B) Total of contributions from individuals

(b) Political Party Committees

(c) Other Political Committees (such as PACs)

(d) The Candidate

(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c) and (d))

12 TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

13 LOANS:

(a) Made or Guaranteed by the Candidate

(b) All Other Loans

(c) TOTAL LOANS (add 13(a) and (b))

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

15 OTHER RECEIPTS (Dividends, Interest, etc.)

16 TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)

II. DISBURSEMENTS

17 OPERATING EXPENDITURES

18 TRANSFERS TO OTHER AUTHORIZED COMMITTEES

19 LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed by the Candidate

(b) Of All Other Loans

(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))

20 REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other Than Political Committees

(b) Political Party Committees

(c) Other Political Committees (such as PACs)

(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))

21 OTHER DISBURSEMENTS

22 TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)

III. CASH SUMMARY

23 CASH ON HAND AT BEGINNING OF REPORTING PERIOD

24 TOTAL RECEIPTS THIS PERIOD (from Line 16)

25 SUBTOTAL (add Line 23 and Line 24)

26 TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)

27 CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)

FECA-96

| | COLUMN A Total This Period | COLUMN B Calendar Year-To-Date |
|--|-------------------------------|-----------------------------------|
|--|-------------------------------|-----------------------------------|

| | | | |
|---|------------|------------|-------|
| | | | |
| 11 CONTRIBUTIONS (other than loans) FROM: | | | |
| (a) Individuals/Persons Other Than Political Committees | | | |
| (i) Remitted (use Schedule A) | 31,503.00 | | 11f |
| (ii) Unremitted | 331.00 | | 11g |
| (B) Total of contributions from individuals | 31,834.00 | 418,892.59 | 11h |
| (b) Political Party Committees | 5,000.00 | 15,584.00 | 11i |
| (c) Other Political Committees (such as PACs) | 46,515.00 | 168,757.27 | 11j |
| (d) The Candidate | | | 11k |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c) and (d)) | 83,349.00 | 603,233.86 | 11l |
| 12 TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | 36,728.25 | 12 |
| 13 LOANS: | | | |
| (a) Made or Guaranteed by the Candidate | | | 13a |
| (b) All Other Loans | | | 13b |
| (c) TOTAL LOANS (add 13(a) and (b)) | | | 13c |
| 14 OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, Etc.) | | | 14 |
| 15 OTHER RECEIPTS (Dividends, Interest, etc.) | 179.70 | 3,467.43 | 15 |
| 16 TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) | 83,528.70 | 643,429.54 | 16 |
| II. DISBURSEMENTS | | | |
| 17 OPERATING EXPENDITURES | 122,681.14 | 510,005.42 | 17 |
| 18 TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | 47,184.00 | 18 |
| 19 LOAN REPAYMENTS: | | | |
| (a) Of Loans Made or Guaranteed by the Candidate | | | 19(a) |
| (b) Of All Other Loans | | | 19(b) |
| (c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) | | | 19(c) |
| 20 REFUNDS OF CONTRIBUTIONS TO: | | | |
| (a) Individuals/Persons Other Than Political Committees | 7,750.00 | 7,750.00 | 20(a) |
| (b) Political Party Committees | | | 20(b) |
| (c) Other Political Committees (such as PACs) | | 500.00 | 20(c) |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) | | 500.00 | 20(d) |
| 21 OTHER DISBURSEMENTS | | | 21 |
| 22 TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) | 130,431.14 | 565,439.42 | 22 |

| | | | |
|--|--|---------------|--|
| | | \$ 300,417.04 | |
| | | \$ 83,528.70 | |
| | | \$ 383,945.74 | |
| | | \$ 130,431.14 | |
| | | \$ 253,514.60 | |

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

28 pgs.

3/17

USE FEC MAILING LABEL

TYPE OR PRINT

| | | |
|---|--------------------------------|--|
| 1. NAME OF COMMITTEE (in full) BOB BARR - CONGRESS | | 2. FEC IDENTIFICATION NUMBER C00300640 |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 231 MAXHAM RD., SUITE 100 | | |
| CITY, STATE and ZIP CODE AUSTELL, GA 30001 | STATE/DISTRICT GA/07 | |
| 3. IS THIS REPORT AN AMENDMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | | |

4. TYPE OF REPORT

April 15 Quarterly Report

Twelfth day report preceding GENERAL (Type of Election)
election on 11/5/96 in the State of GEORGIA

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid-Year Report (Non election Year Only)

Termination Report

Title report contains activity for: Primary Election General Election Special Election Runoff Election

SUMMARY

| 5. Covering Period <u>10/01/96</u> through <u>10/16/96</u> | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)) | 83,349.00 | 603,233.86 |
| (b) Total Contribution Refunds (from Line 20(d)) | 7,750.00 | 8,250.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) | 75,599.00 | 594,983.86 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 122,681.14 | 510,005.42 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | | |
| (c) Net Operating Expenditures (subtract Line 7(b) from 7(a)) | 122,681.14 | 510,005.42 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | 253,514.60 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | | |

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

| | |
|--|------------------------|
| Type or Print Name of Treasurer CHARLES C. BLACK | Date 7-17-97 |
| Signature of Treasurer | |

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 6437g.

SCHEDULE A ITEMIZED RECEIPTS

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

Page 1 of 23
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| JAMES MATTHEW DAVIS 9983 EPHESUS CHURCH ROAD VILLA RICA GA 30180 | Occupation | 10-05-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$500.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| JACK KIRBY 203 LAKESHORE DRIVE LAGRANGE GA 30240 | Occupation | 10-05-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$250.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| GERALD E. SANDERS 1250 VALLEY RESERVE KENNESAW GA 30144 | MARIETTA EYE CLINIC/SELF Occupation PHYSICIAN | 10-05-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$1,815.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| MELVIN STEELY 60 S GREENWOOD DRIVE CARROLLTON GA 30117 | WEST GEORGIA UNIVERSITY Occupation HISTORIAN | 10-05-1996 | \$150.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$250.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| BUCK SWINDLE 105 SOMERSET PLACE, SUITE A CARROLLTON GA 30116 | BSA AMERICAN ACTIVEWEAR Occupation PRESIDENT/OWNER | 10-05-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$650.00 | | | |

SUBTOTAL of Receipts This Page (optional)

2025 RELEASE UNDER E.O. 14176

SCHEDULE A ITEMIZED RECEIPTS

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

Page 2 of 23
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--------------------------|--------------------------|------------------------------------|
| RALPH E. FLECK 354 WEST CLUB DRIVE CARROLLTON GA 30117 | PHYSICIAN | 10-07-1996 | \$250.00 |
| Receipt For: _____ Primary _____ Other | Aggregate Year-to-Date > | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| JAMES E. GARNER 3043 POPE ROAD DOUGLASVILLE GA 30135 | GARNER & ASSOCIATES EXECUTIVE SERVICES | 10-07-1996 | \$400.00 |
| Receipt For: _____ Primary _____ Other | Aggregate Year-to-Date > | | \$400.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---------------------------------------|--------------------------|------------------------------------|
| J. DANIEL HANKS, JR. 79 HUNTINGTON ROAD, SW ROME GA 30165 | ROME RADIOLOGY GROUP, PA PHYSICIAN | 10-07-1996 | \$500.00 |
| Receipt For: _____ Primary _____ Other | Aggregate Year-to-Date > | | \$1,035.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--------------------------|--------------------------|------------------------------------|
| ROBERT HOSKINS, JR. 2485 CAJUN DRIVE MARIETTA GA 30066 | RETIRED | 10-07-1996 | \$500.00 |
| Receipt For: _____ Primary _____ Other | Aggregate Year-to-Date > | | \$1,070.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--------------------------|--------------------------|------------------------------------|
| DON N. HOWELL 1642 SILVER HILL ROAD STONE MOUNTAIN GA 30087 | SELF CONSTRUCTION | 10-07-1996 | \$500.00 |
| Receipt For: _____ Primary _____ Other | Aggregate Year-to-Date > | | \$1,000.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

| | |
|---|--------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | Page 3 of 23 |
| | FOR LINE NUMBER 11(a)(1) |

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| HUBERT R. JOHNSON POST OFFICE BOX 685 MABLETON GA 30059 | JOHNSON DRILLING CO. Occupation CONSTRUCTION | 10-07-1996 | \$500.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | \$900.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| JAMES D. MASSIE 3707 CIRCLE HILL ROAD ALEXANDRIA VA 22305 | ALPINE GROUP (REQUESTED) Occupation | 10-07-1996 | \$250.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | \$750.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| WILLIAM G. MOORE 3113 FARMINGTON DRIVE, NW ATLANTA GA 30339-4706 | NONE Occupation HOUSEWIFE | 10-07-1996 | \$250.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| ROBERT H. RICHIE 614 ALABAMA AVENUE BREMEN GA 30110 | Occupation | 10-07-1996 | \$250.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| JIMMY G SANDERS 110 OLD HICKORY TRAIL CARROLLTON GA 30117 | REQUESTED Occupation | 10-07-1996 | \$100.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | \$225.00 |

SUBTOTAL of Receipts This Page (optional)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| MELVIN STEELY 60 S GREENWOOD DRIVE CARROLLTON GA 30117 | WEST GEORGIA UNIVERSITY HISTORIAN | 10-07-1996 | \$50.00 |
| Receipt For _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| WILLIAM H WIGGINS POST OFFICE BOX 28 SANDERSVILLE GA 31082-0028 | RETIRE | 10-07-1996 | \$25.00 |
| Receipt For _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$175.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| ANNE ELDRIDGE 1886 NORTHSIDE DRIVE, NW ATLANTA GA 30342-4044 | RETIRE | 10-08-1996 | \$200.00 |
| Receipt For _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$450.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| GUY F HILL 3948 AVIATION CIR ATLANTA GA 30336 | HILL AIRCRAFT & LEASING CORP. PRESIDENT | 10-08-1996 | \$500.00 |
| Receipt For _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$1,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| JANICE M. HIX 3007 QUEEN ANNE COURT DUNWOODY GA 30350 | RIVERCREST MORTGAGE MORTGAGE BROKER | 10-08-1996 | \$250.00 |
| Receipt For _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$640.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

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

Page 5 of 23
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| RICHARD M JONES 3411 OLD WAGON ROAD MARIETTA GA 30062 | Occupation | 10-08-1996 | \$100.00 |
| Receipt For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$100.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--------------------------------|--------------------------|------------------------------------|
| CHARLES H. LUMPKIN, JR. 418 BRADLEY STREET CARROLLTON GA 30117 | SELF Occupation ATTORNEY | 10-08-1996 | \$500.00 |
| Receipt For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$605.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| MICHAEL R. MCLEOD ONE MASSACHUSETTS AVENUE, SUITE 8 WASHINGTON DC 20001 | MCLEOD, WATKINSON & MILLER Occupation ATTORNEY | 10-08-1996 | \$500.00 |
| Receipt For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---------------------------------------|--------------------------|------------------------------------|
| THOMAS T. RICHARDS 110 OLD HICKORY TRAIL N CARROLLTON GA 30117 | RICHARDS HOMES Occupation OWNER | 10-08-1996 | \$100.00 |
| Receipt For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---------------------------------|--------------------------|------------------------------------|
| STANLEY J. SELF 18 TWIN LAKE ROAD, SW ROME GA 30165 | SELF Occupation PHYSICIAN | 10-08-1996 | \$250.00 |
| Receipt For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$750.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| WILLIAM J. STOUT, JR. 5395 ROSWELL ROAD, SUITE 200 ATLANTA GA 30342 | BUCKHEAD BROKERS Occupation | 10-08-1996 | \$500.00 |
| Receipt For _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$1,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| WILLIAM W. ADAMS 3825 LAVISTA RD., UNIT U-1 TUCKER GA 30084 | BARR FOR CONGRESS Occupation | 10-09-1996 | \$1,000.00 |
| Receipt For _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$1,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| MARCIA T BELYEU 6446 ELIZABETH DRIVE DOUGLASVILLE GA 30134 | DOUGLAS COUNTY BANK Occupation | 10-09-1996 | \$50.00 |
| Receipt For _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$100.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| 11 G AND REBA BROWN 628 OLD TOWN RD. VILLA RICA GA 30180 | JEAN HOSIERY Occupation | 10-09-1996 | \$100.00 |
| Receipt For _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$1,100.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| GRACE P CORNISH 831 HICKORY DRIVE MARIETTA GA 30064-3607 | Occupation | 10-09-1996 | \$100.00 |
| Receipt For _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$300.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| THOMAS E. EMERSON 980 WESTERSHAM PLACE MARIETTA GA 30064 | SELF-EMPLOYED Occupation PHYSICIAN | 10-09-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$1,050.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-------------------------|--------------------------|------------------------------------|
| TOMMY H. HARALSON 102 MORGAN STREET LAGRANGE GA 30240 | REQUESTED Occupation | 10-09-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$1,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| CHARLIE LANE 112 SUNSET COURT CARROLLTON GA 30117 | REGAL MARKETING Occupation SPEAKER | 10-09-1996 | \$300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$900.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-------------------------|--------------------------|------------------------------------|
| DAVID R. LITTLE 7000 SWEETWATER DRIVE POWDER SPRINGS GA 30073 | REQUESTED Occupation | 10-09-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-----------------------------|--------------------------|------------------------------------|
| A. D. LITTLEJOHN 1220 MT. ALTO ROAD, SW ROME GA 30165 | .. Occupation RETIRED | 10-09-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$250.00 |

SUBTOTAL of Receipts This Page (optional)

"HOUSE" "SECRET" "40" "60"

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| FRANK LOVE, JR. 191 PEACHTREE STREET, 16TH FLOOR ATLANTA GA 30303 | ATTORNEY | 10-09-1996 | \$200.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| ROBERT STONE 119 MAPLE STREET CARROLLTON GA 30117 | SYSTEMS & METHODS | 10-09-1996 | \$500.00 |
| Receipt For: _____ Primary _____ Other | OWNER <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$750.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| GEORGE TASHIE 7669 METCALF ROAD THOMASVILLE GA 31792 | FLOWERS INDUSTRIES | 10-09-1996 | \$50.00 |
| Receipt For: _____ Primary _____ Other | REGIONAL VP <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$175.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| BILLY L ASKEA 4600 SOMERSET ROAD SMYRNA GA 30082 | ASK-KAY ELECTRICAL CONTRS., INC. | 10-10-1996 | \$100.00 |
| Receipt For: _____ Primary _____ Other | OWNER <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| CHET AUSTIN 1326 MARIETTA COUNTRY CLUB DRIVE KENNESAW GA 30152 | TIP TOP POULTRY, INC. | 10-10-1996 | \$100.00 |
| Receipt For: _____ Primary _____ Other | POULTRY PROCESSOR <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$400.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| I. AMAR BELL 21 PENNACLE WAY CARROLLTON GA 30117 | SELF Occupation REAL ESTATE | 10-10-1996 | \$25.00 |
| Receipt For ----- Primary ----- Other | <input checked="" type="checkbox"/> Aggregate Year-to-Date > General | | \$25.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| KENNETH E BORING POST OFFICE BOX 1608 DALTON GA 30722 | HARDWICK HOLDING CO Occupation BANKING | 10-10-1996 | \$500.00 |
| Receipt For ----- Primary ----- Other | <input checked="" type="checkbox"/> Aggregate Year-to-Date > General | | \$1,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| J. LARRY BOSS 611 NORTH AVENUE VILLA RICA GA 30180 | W.G. FAMILY MEDICAL ASSOCIATION Occupation PHYSICIAN | 10-10-1996 | \$100.00 |
| Receipt For ----- Primary ----- Other | <input checked="" type="checkbox"/> Aggregate Year-to-Date > General | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| WILLIAM L CAMP 204 WOODGLEN RD ROME GA 30161 | CAMP OIL Occupation EXECUTIVE | 10-10-1996 | \$500.00 |
| Receipt For ----- Primary ----- Other | <input checked="" type="checkbox"/> Aggregate Year-to-Date > General | | \$1,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| W H FLOWERS P O BOX 1338 THOMASVILLE GA 31799 | FLOWERS INDUSTRIES Occupation EXECUTIVE | 10-10-1996 | \$1,000.00 |
| Receipt For ----- Primary ----- Other | <input checked="" type="checkbox"/> Aggregate Year-to-Date > General | | \$1,750.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| ALPHA FOWLER POST OFFICE BOX 866 DOUGLASVILLE GA 30133 | DOUGLAS FEDERAL BANK Occupation CHAIRMAN / CEO | 10-10-1996 | \$500 (00) |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > | | \$710 (00) |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-----------------------------------|--------------------------|------------------------------------|
| BILLY G HAWKINS 8455 HIGHWAY 92 FAIRBURN GA 30213 | SELF Occupation BUSINESSMAN | 10-10-1996 | \$200 (00) |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > | | \$800 (00) |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---------------------------------|--------------------------|------------------------------------|
| RONALD HESS 326 MCCLAIN ROAD KINGSTON GA 30145 | GA DOT Occupation RETIRED | 10-10-1996 | \$50 (00) |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > | | \$200 (00) |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-------------------------------|--------------------------|------------------------------------|
| T HOWARD JONES 110 EXECUTIVE DRIVE CARROLLTON GA 30117 | SELF Occupation DENTIST | 10-10-1996 | \$200 (00) |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > | | \$200 (00) |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| FRED P LEO 4103 LAKELAND HILLS DRIVE DOUGLASVILLE GA 30134 | FIRST FUNDING, INC Occupation COMMERCIAL FINANCE | 10-10-1996 | \$100 (00) |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > | | \$200 (00) |

SUBTOTAL of Receipts This Page (optional)

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NAME OF COMMITTEE (in Full)
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| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---------------------------------------|--------------------------|------------------------------------|
| ROBERT L. MOULTRIE, SR. 2233 LAKE PARK DRIVE, SUITE 100 SMYRNA GA 30080 | THE FACILITY GROUP, INC Occupation | 10-10-1996 | \$400.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$400.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-----------------------------------|--------------------------|------------------------------------|
| J E MULKEY 63 BARRETT PARKWAY MARIETTA GA 30066 | FIRST ALLIANCE BANK Occupation | 10-10-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$100.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--------------------------------------|--------------------------|------------------------------------|
| CECIL B RAINWATER 9185 HUNTCLIFF TRACE ATLANTA GA 30350-1737 | RAINWATER CONSTRUCTION Occupation | 10-10-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--------------------------------|--------------------------|------------------------------------|
| R II RAY 1237 ANDREW JACKSON COURT DALLAS GA 30132 | NORFOLK SOUTHERN Occupation | 10-10-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| PAUL W SALERNO 6460 PICKETTS CROSSING AC WORTH GA 30101-7717 | COOK & SALERNO ENTERPRISES, INC. Occupation | 10-10-1996 | \$700.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$700.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(1)

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| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|------------------|--------------------------|------------------------------------|
| JAMES C SCOTT 6080 DUE WEST ROAD POWDER SPRINGS GA 30073 | Occupation | 10-10-1996 | \$500.00 |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other Aggregate Year-to-Date > | | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|----------------------------------|--------------------------|------------------------------------|
| E N THOMPSON 113 MERIWEATHER CIRCLE MILLEDGEVILLE GA 31061 | T&S HARDWOODS, INC Occupation | 10-10-1996 | \$700.00 |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other Aggregate Year-to-Date > | FORESTER | | \$700.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|------------------|--------------------------|------------------------------------|
| JACK L. WEHRLE 107 CRESCENT DRIVE CARROLLTON GA 30117 | Occupation | 10-10-1996 | \$202.00 |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other Aggregate Year-to-Date > | RETIRE | | \$202.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|---------------------------------|--------------------------|------------------------------------|
| DAVID H WILLIAMS 1162 BROOKGATE WAY ATLANTA GA 30319 | HUNTON & WILLIAMS Occupation | 10-10-1996 | \$550.00 |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other Aggregate Year-to-Date > | ATTORNEY | | \$550.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|--------------------|--------------------------|------------------------------------|
| BILL AND RAMONA JOHNSON 306 TANNER STREET CARROLLTON GA 30117 | SELF Occupation | 10-12-1996 | \$2,000.00 |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other Aggregate Year-to-Date > | ATTORNEY | | \$2,000.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

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FOR LINE NUMBER 11(a)(1)

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> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| BRAD E. ACHILLES 4120 BENT OAK COURT DOUGLASVILLE GA 30135 | DELTA AIRLINES Occupation PILOT | 10-16-1996 | \$25.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | \$180.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| SHIRLEY ANDREWS 102 EAST HARALSON STREET LAGRANGE GA 30204 | HOME MAKER Occupation HOMEMAKER | 10-16-1996 | \$1,000.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | \$1,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| STEPHEN M. BAXTER 2614 HORSELEG CREEK ROAD, SW ROME GA 30165 | FLOYD ANESTHESIA ASSOCIATES Occupation PHYSICIAN | 10-16-1996 | \$100.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | \$850.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| DWIGHT T. BROWN 3114 WOODRUN TRAIL MARIETTA GA 30062 | COBB EMC Occupation PRESIDENT | 10-16-1996 | \$25.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| LINDA S. BROWN 4045 WOODBRIDGE COURT POWDER SPRINGS GA 30073 | LUCENT TECHNOLOGIES Occupation COMPUTER OPERATOR | 10-16-1996 | \$15.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | \$1,265.00 |

SUBTOTAL of Receipts This Page (optional)

0905 2092 3060

SCHEDULE A ITEMIZED RECEIPTS

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FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full)
> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| WILLIAM J. BRYAN, III POST OFFICE BOX 82411 HAPEVILLE GA 30354 | FULTON COUNTY PUBLIC BLDGS. MAIN Occupation ELECTRICIAN II/BLDG. MECHANIC II | 10-16-1996 | \$30.00 |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other _____ Aggregate Year-to-Date > | | | \$230.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---------------------------|--------------------------|------------------------------------|
| JOHNNY G CRONIC 1385 GREENLAND DRIVE, NE ATLANTA GA 30306 | RETIRED Occupation | 10-16-1996 | \$15.00 |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other _____ Aggregate Year-to-Date > | | | \$140.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| KERRY FRANKS 947 ADAMS ROAD WEST POINT GA 31833 | SELF-EMPLOYED Occupation CONSTRUCTION | 10-16-1996 | \$500.00 |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other _____ Aggregate Year-to-Date > | | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| CARL J. GAMEL 2060 ROCKMART HIGHWAY DALLAS GA 30132 | J B HUNT Occupation TRUCK DRIVER | 10-16-1996 | \$50.00 |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other _____ Aggregate Year-to-Date > | | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------------------------|--------------------------|------------------------------------|
| JOHN M. GRAHAM, III 11 HUNTINGTON ROAD, SW ROME GA 30165 | SELF Occupation ATTORNEY | 10-16-1996 | \$100.00 |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other _____ Aggregate Year-to-Date > | | | \$640.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| TERRY R GRIFFIN P O BOX 404 ROME FL 30162-0404 | Occupation | 10-16-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$240.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|----------------------------------|--------------------------|------------------------------------|
| WILLIAM G GUSTAFSON 737 PRINCETON MILL RUN MARIETTA GA 30068 | SELF Occupation CONSULTANT | 10-16-1996 | \$90.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$215.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| D D HAMMETT 1820 THE EXCHANGE, BUILDING 200 ATLANTA GA 30139 | DON HAMMET REALTY Occupation BROKER, INVESTOR | 10-16-1996 | \$230.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$730.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| WILLIAM P HARBIN 314 EAST FOURTH ST. ROME GA 30161-3202 | HARBIN CLINIC Occupation PHYSICIAN | 10-16-1996 | \$20.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$180.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| BENJAMIN HARRELL 780 RALEIGH COURT MARIETTA GA 30064 | ALLIED SIGNAL, INC. Occupation ENGINEER | 10-16-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$200.00 |

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| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| JIM HARRY 134 WINDRIDGE DRIVE LAGRANGE GA 30240 | SELF-EMPLOYED Occupation | 10-16-1996 | \$140.00 |
| Receipt For: _____ Primary _____ Other | ATTORNEY _____X_____ General Aggregate Year-to-Date > | | \$860.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| E W HERRON 571 KEELER WOODS DR. MARIETTA GA 30064 | RETIRE Occupation | 10-16-1996 | \$30.00 |
| Receipt For: _____ Primary _____ Other | RETIRE _____X_____ General Aggregate Year-to-Date > | | \$430.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| GROVER A. HOBBS 1036 MOUNTVILLE HOGANSVILLE ROAD HOGANSVILLE GA 30230 | RETIRE Occupation | 10-16-1996 | \$20.00 |
| Receipt For: _____ Primary _____ Other | RETIRE _____X_____ General Aggregate Year-to-Date > | | \$140.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| W B HOUZE, JR. 754 LAKEWOOD DRIVE LAGRANGE GA 30240 | INSURANCE Occupation | 10-16-1996 | \$250.00 |
| Receipt For: _____ Primary _____ Other | EXECTUIVE _____X_____ General Aggregate Year-to-Date > | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| WILLIAM W. HUNTLEY 303 SMITH STREET LAGRANGE GA 30240 | Occupation | 10-16-1996 | \$200.00 |
| Receipt For: _____ Primary _____ Other | _____X_____ General Aggregate Year-to-Date > | | \$350.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

| | |
|---|--------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | Page 17 of 23 |
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| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| BILL HUTSON POST OFFICE BOX 648 MARIETTA GA 30060 | COBB COUNTY GOVERNMENT SHERIFF | 10-16-1996 | \$150.00 |
| Receipt For _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$220.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| JOHN W JOHNSON 2201 FIRST STREET LANETT AL 36863 | CHARTER FEDERAL BANK CHAIRMAN | 10-16-1996 | \$1,000.00 |
| Receipt For _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$1,300.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| ROBERT L JOHNSTON 3541 MANSIONS PARKWAY DULUTH GA 30136 | Occupation | 10-16-1996 | \$200.00 |
| Receipt For _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| SAUNDERS JONES, JR. 222 TATUM RIDGE RD, S.W. CARTERSVILLE GA 30120 | SELF PHYSICIAN | 10-16-1996 | \$250.00 |
| Receipt For _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$300.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| WALTER KELLY, JR. 504 CHESTNUT DRIVE MARIETTA GA 30064 | Occupation RETIRED | 10-16-1996 | \$100.00 |
| Receipt For _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$100.00 |

SUBTOTAL of Receipts This Page (optional)

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| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--------------------------|--------------------------|------------------------------------|
| JON F. LARUSSA 3645 MANCHESTER DRIVE LAWRENCEVILLE GA 30244 | UPS DRIVER Occupation | 10-16-1996 | \$200.00 |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > | | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| ELLIOTT A LEWIS 3190 NORTHEAST EXPRESSWAY, SUITE 4 ATLANTA GA 30341 | Occupation | 10-16-1996 | \$250.00 |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > | | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------------------|--------------------------|------------------------------------|
| DIETHARD LINDNER 207 NORTHRIDGE DRIVE LAGRANGE GA 30240-8333 | HUGHES GEORGIA Occupation | 10-16-1996 | \$250.00 |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > | PRESIDENT & GENERAL MANAGER | | \$600.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---------------------------------------|--------------------------|------------------------------------|
| JAMES E MARLER 30 LINDLEY AVENUE MARIETTA GA 30064 | D AND R LEASING COMPANY Occupation | 10-16-1996 | \$100.00 |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > | OWNER | | \$400.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-----------------------------|--------------------------|------------------------------------|
| GUY AND GINNY MILLNER 3640 TUXEDO ROAD ATLANTA GA 30305 | SELF-EMPLOYED Occupation | 10-16-1996 | \$2,000.00 |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > | EXECTUIVE | | \$2,000.00 |

SUBTOTAL of Receipts This Page (optional)

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------------|--------------------------|------------------------------------|
| ED NOBLE POST OFFICE BOX 18651 ATLANTA GA 30326 | SELF Occupation REAL ESTATE | 10-16-1996 | \$30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > | | | \$280.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| JOE REYNOLDS 1956 POWDER SPRINGS ROAD MARIETTA GA 30064 | REYNOLDS-WARREN EQUIPMENT Occupation OWNER | 10-16-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > | | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------------------------|--------------------------|------------------------------------|
| A G ROWE 45 STONINGTON PLACE MARIETTA GA 30068-1770 | SCC, INC Occupation ENGINEER | 10-16-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > | | | \$560.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| GERALD E. SANDERS 1250 VALLEY RESERVE KENNESAW GA 30144 | MARIETTA EYE CLINIC/SELF Occupation PHYSICIAN | 10-16-1996 | \$30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > | | | \$1,815.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| KARL T. SCHWELM 310 LORING COURT MARIETTA GA 30064 | CAREFINDERS, INC. Occupation OWNER | 10-16-1996 | \$15.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > | | | \$515.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

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

Page 20 of 23
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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

NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--------------------------------------|--------------------------|------------------------------------|
| JIM SERRATE POST OFFICE BOX 7254 MARIETTA GA 30065 | JIM SERRATE FOR STATE REPRESENTATIVE | 10-16-1996 | \$200.00 |
| Occupation | | | |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other | Aggregate Year-to-Date > | | \$215.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---------------------------------------|--------------------------|------------------------------------|
| JAMES W. TATE 601 WHITTAKER ROAD LAGRANGE GA 30240 | POLK SHEET METAL | 10-16-1996 | \$140.00 |
| Occupation | | | |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other | PRESIDENT Aggregate Year-to-Date > | | \$240.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--------------------------|--------------------------|------------------------------------|
| LEWIS B. WATFORD 825 CHOWNING COURT MARIETTA GA 30064 | REQUESTED | 10-16-1996 | \$100.00 |
| Occupation | | | |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other | Aggregate Year-to-Date > | | \$600.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---------------------------------------|--------------------------|------------------------------------|
| BERNARD A. WERNER POST OFFICE BOX 939 MARIETTA GA 30061-0939 | KENNESAW FINANCE CO. | 10-16-1996 | \$50.00 |
| Occupation | | | |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other | PRESIDENT Aggregate Year-to-Date > | | \$265.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---------------------------------------|--------------------------|------------------------------------|
| BERNARD A. WERNER POST OFFICE BOX 939 MARIETTA GA 30061-0939 | KENNESAW FINANCE CO. | 10-16-1996 | \$30.00 |
| Occupation | | | |
| Receipt For _____ Primary <input checked="" type="checkbox"/> General _____ Other | PRESIDENT Aggregate Year-to-Date > | | \$265.00 |

SUBTOTAL of Receipts This Page (optional)

43003 3067

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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

NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| BRUCE WIDENER POST OFFICE BOX 88866 ATLANTA GA 30356 | SELF-EMPLOYED Occupation | 10-16-1996 | \$500.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| WILLIAM H. WIGGINS POST OFFICE BOX 28 SANDERSVILLE GA 31082-0028 | Occupation | 10-16-1996 | \$50.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$175.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| LABAN W. WILLIAMS 3459 LICKSKILLET ROAD EPWORTH GA 30541 | Occupation | 10-16-1996 | \$25.00 |
| Receipt For: _____ Primary _____ Other | RETIRED <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$225.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| MARLIN E WILLIAMS 171 DEWEY STREET, LOT B4 TALLAPOOSA GA 30176-1536 | RYDER DEDICATED LOGISTICS Occupation | 10-16-1996 | \$25.00 |
| Receipt For: _____ Primary _____ Other | TRUCK DRIVER <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$260.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| CHARLES C. WILSON 2100 ROSWELL ROAD, SUITE 110 MARIETTA GA 30062 | Occupation | 10-16-1996 | \$200.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > | | \$200.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

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

Page 22 of 23

FOR LINE NUMBER

11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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

NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| LEONA WOLLESEN 680 VILLAGE LANE DRIVE, SW MARIETTA GA 30060 | BLUE CROSS / BLUE SHIELD Occupation | 10-16-1996 | \$30.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other | ACCOUNTANT Aggregate Year-to-Date > | | \$150.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| BARRY MOORE 5654 RIVER OAKS PLACE ATLANTA GA 30327 | KURT SALMON ASSOCIATES Occupation | 10-15-1996 | \$1,000.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other | CONSULTANT Aggregate Year-to-Date > | | \$1,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| M A LUBEL 1998 WINCHELSEA CT., EAST DUNWOODY GA 30350 | THE ADRIAN GROUP, INC. Occupation | 10-15-1996 | \$150.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other | MANAGEMENT Aggregate Year-to-Date > | | \$150.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--------------------------|--------------------------|------------------------------------|
| JOHN F SACKETT 1633 SHADOW CT. DUNWOODY GA 30338-4938 | Occupation | 10-04-1996 | \$250.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other | Aggregate Year-to-Date > | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| JOSEPH J BURCH 38 HUNTINGTON ROAD ROME GA 30165 | ROME RADIOLOGY GROUP Occupation | 10-14-1996 | \$1,000.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other | PHYSICIAN Aggregate Year-to-Date > | | \$1,000.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule (28)
for each category of the
Detailed Summary Page

Page 23 of 23

FOR LINE NUMBER

11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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

NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

TOTAL This Period (last page this line number only)

\$31,503.00

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

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

Page 1 of 1

FOR LINE NUMBER

11(b)

Contributions From Political Party Committees

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

NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

Full Name, Mailing Address and Zip Code

Name of Employer

Date (month, date, year)

Amount of Each Receipt this Period

REPUBLICAN NATIONAL COMMITTEE
 110 FIRST STREET
 WASHINGTON

Occupation

10-16-1996

\$5,000.00

Receipt For

Primary

General

Other

Aggregate Year-to-Date >

\$5,000.00

TOTAL This Period (last page this line number only)

\$5,000.00

SUBTOTAL of Receipts This Page (optional)

SCHEDULE B ITEMIZED DISBURSEMENTS

REFUNDS Individuals/Persons Other Than Political Committees

Use separate schedule for each category of the Detailed Summary Page

FOR LINE NUMBER

20 (a)

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

NAME OF COMMITTEE (in Full) LaGrange GA 30240

> BOB BARR - CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| J. SCOTT ANDREWS 218 EAST YORKTOWN DRIVE LAGRANGE GA 30240 | Refund of excess contribution <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-15-1996 | \$250.00 |
| JACK EASTLAND 152 HAWKINS STORE ROAD KENNESAW GA 30144 | Refund of excess contribution <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-15-1996 | \$1,000.00 |
| RALPH HOWARD, JR. 746 CHEROKEE RD. LAGRANGE GA 30240 | Refund of excess contribution <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-15-1996 | \$250.00 |
| HUBERT R. JOHNSON POST OFFICE BOX 685 MABLETON GA 30059 | Refund of excess contribution <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-15-1996 | \$50.00 |
| JOHN W JOHNSON 2201 FIRST STREET LANETT AL 36863 | Refund of excess contribution <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-15-1996 | \$200.00 |
| EDWIN AND NANCY BES JOHNSTON, JR. 5 RIVER VALLEY CT., S.W. ROME GA 30165 | Refund of excess contribution <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-15-1996 | \$1,000.00 |

SUBTOTAL of Receipts This Page (optional)

20030904 303 3072

SCHEDULE B ITEMIZED DISBURSEMENTS

REFUNDS Individuals/Persons Other Than Political Committees

Use separate schedule (B) for each category of this Detailed Summary Page

FOR LINE NUMBER

20 (e)

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

NAME OF COMMITTEE (in Full) Powder Springs GA 3007

> BOB BARR - CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| DEREK N. JONES 5133 ALDER LANE POWDER SPRINGS GA 30073 | Refund of excess contribution ----- Primary <input checked="" type="checkbox"/> General ----- Other | 10-15-1996 | \$1,000.00 |
| PAUL AND SYBIL JONES 9510 BAKERS BRIDGE ROAD DOUGLASVILLE GA 30134 | Refund of excess contribution ----- Primary <input checked="" type="checkbox"/> General ----- Other | 10-15-1996 | \$1,000.00 |
| PAUL AND SYBIL JONES 9510 BAKERS BRIDGE ROAD DOUGLASVILLE GA 30134 | Refund of excess contribution ----- Primary <input checked="" type="checkbox"/> General ----- Other | 10-15-1996 | \$1,000.00 |
| GORDON R. MCILAN 472 ST ANNE'S ROAD MARIETTA GA 30064 | Refund of excess contribution ----- Primary <input checked="" type="checkbox"/> General ----- Other | 10-15-1996 | \$1,000.00 |
| HARRY AND LISA MCNALLY 97 LANSING DRIVE KENNESAW GA 30144 | Refund of excess contribution ----- Primary <input checked="" type="checkbox"/> General ----- Other | 10-15-1996 | \$1,000.00 |

TOTAL This Period (last page this line number only) \$7,750.00

SUBTOTAL of Receipts This Page (optional)

2007-04-04 10:00:00

BARR

over
15,000.

Period 11/24/98 thru 12/31/98

Scott

| | | | | |
|-------|---|---|----------|---------|
| | Ziad Alamiri | ? | 12/31/98 | \$200. |
| | Robert H. Andersen ^{Arbuckle} | ? | 12/12/98 | \$ 150. |
| | Edna Baker | ? | 12/19/98 | \$ 100. |
| | " " | ? | 12/31/98 | \$ 50. |
| | Hillien Baker | ? | 12/19/98 | \$ 150. |
| Frank | John F. Barnard | ? | 12/19/98 | \$ 100. |
| | William Bishop | ? | 12/12/98 | \$ 100. |
| | Helen Bocchio | ? | 12/19/98 | \$ 100. |
| | Jerry Brunst | ? | 12/31/98 | \$ 100. |
| | Katherine Callahan | ? | 12/12/98 | \$ 100. |
| | Katherine " | ? | 12/30/98 | \$ 90. |
| | Richard Carey | ? | 12/19/98 | \$ 100. |
| | Albert Carr | ? | 12/12/98 | \$ 150. |
| | Greta M. Chevrie | ? | 12/19/98 | \$ 150. |
| | Kent F. Cochran | ? | 12/12/98 | \$ 150. |
| | Frank Concerto | ? | 12/15/98 | \$ 100. |
| | Luella Cope | ? | 12/12/98 | \$ 25. |
| | Norma E Corey | ? | 12/19/98 | \$ 150. |
| | Mary Crosby | ? | 12/28/98 | \$ 50. |
| | " " | ? | 12/31/98 | \$ 100. |
| | Georgia Dennington | ? | 12/31/98 | \$ 50. |
| | Charles Estlinger | ? | 12/31/98 | \$ 200. |
| | John J. Essex | ? | 12/19/98 | \$ 100. |
| | Carol Ewing | ? | 12/19/98 | \$ 150. |
| | Thomas Flabler | ? | 12/31/98 | \$ 100. |

MADE BY "SEE" AND "GO"

: Barr has 2000 Contributors:

L. K. Flinn ? 12/29/98 \$ 70.
Phyllis Golf ? 12/31/98 \$ 50
James S. Grichar ? 12/5/98 \$ 50
" " " ? 12/28/98 \$ 50.
Mary NACKEMAN ? 12/19/98 \$ 50.
MINERVA HALVORSON ? 12/19/98 \$ 100.
Florence L. Headley ? 12/31/98 \$ 200.
Arthur L. Neberger ? 12/31/98 \$ 25.
James E. Hungerpiller ? 12/31/98 \$ 150.
Charles W. Johnson ? 12/31/98 \$ 150.
Lawrence Jordan ? 12/19/98 \$ 150.
Clarice King ? 12/19/98 \$ 150.
Walter h. King ? 12/12/98 \$ 150.
Margaret Kohl ? 12/12/98 \$ 100.
Gertrude M. Kuehn ? 12/12/98 \$ 250.
Florence Lash ? 12/31/98 \$ 100.
Stephen N. Lecoy ? 12/19/98 \$ 100.
James Lovett ? 12/31/98 \$ 100.
Albert Maverick III ? 12/31/98 \$ 50.
David W. Meadow ? 12/31/98 \$ 50.
Adeline Miller ? 12/31/98 \$ 100.
James B. Miller ? 12/19/98 \$ 150.
J. H. Moore ? 12/31/98 \$ 150.
Patricia Nevin ? 12/19/98 \$ 150.
Samuel A. Nigro ? 12/12/98 \$ 150.
Beverly Olson ? 12/5/98 \$ 100.
" " ? 12/19/98 \$ 100.
Charles Otwell ? 12/16/98 \$ 1,000.
Timon Owens ? 12/31/98 \$ 150.

| | | | |
|--------------------------------------|---|----------|---------|
| Harold Pabst | ? | 12/30/98 | \$ 200. |
| MARK Pivovonsky | ? | 12/12/98 | \$ 200. |
| Edgar Ralston | ? | 12/19/98 | \$ 200. |
| William Ray | ? | 12/12/98 | \$ 100. |
| James E. Richards | ? | 12/28/98 | \$ 500. |
| Dorothy Riley | ? | 12/28/98 | \$ 100. |
| " " | ? | 12/31/98 | \$ 100. |
| Mary Rohe | ? | 12/31/98 | \$ 250. |
| Sarah Rollins | ? | 12/19/98 | \$ 75. |
| George Roman | ? | 12/31/98 | \$ 150. |
| Marie Roos | ? | 12/31/98 | \$ 150. |
| Jay R. Seaver | ? | 12/31/98 | \$ 50. |
| Bonnie Shaffer SHAFFER | ? | 12/5/98 | \$ 35. |
| Joseph H. Sheppe | ? | 12/31/98 | \$ 150. |
| George H. Snee | ? | 12/12/98 | \$ 50. |
| Katherine Smythe | ? | 12/12/98 | \$ 500. |
| Robert C. Stibor | ? | 12/19/98 | \$ 200. |
| Sarah Stockman | ? | 12/31/98 | \$ 150. |
| Betty Tannahill | ? | 12/19/98 | \$ 50. |
| Allen Tribble Jr. | ? | 12/12/98 | \$ 150. |
| Mary M. Wallace | ? | 12/19/98 | \$ 150. |
| Steven J. Witt | ? | 12/19/98 | \$ 50. |
| " " " | | 12/28/98 | \$ 60. |

Disbursements:

American Express travel reim 12/3/98 \$261.19
(NOT sufficient)

Bellsouth mobility cellph. 12/21/98 \$78.07
whose phone? \$395.59
\$45.14

BOB BARR reimbursement 12/3/98 \$53.16
what exactly? \$279.42

Delta Airlines Airfare 12/30/98 \$146
for whom?

99.04.393.3077

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

1/26
40p.

1 NAME OF COMMITTEE (in full)

Barr-Congress

ADDRESS (number and street) Check if different than previously reported.
P.O. Box 4323

CITY, STATE and ZIP CODE STATE/DISTRICT
Marietta, GA 30061 GA 7

2. FEC IDENTIFICATION NUMBER
C00300640

3. IS THIS REPORT AN AMENDMENT?
 YES NO

4. TYPE OF REPORT

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

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

SUMMARY

| | Covering Period | COLUMN A This Period | COLUMN B Calendar Year-to-date |
|----|---|-------------------------|-----------------------------------|
| 5 | 11/24/98 through 12/31/98 | | |
| 6 | Net Contributions (other than loans) | | |
| | (a) Total Contributions (other than loans) (from Line 11(e)) | \$111956.35 | \$1100456.51 |
| | (b) Total Contribution Refunds (From Line 20(d)) | \$0.00 | \$530.00 |
| | (c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) | \$111956.35 | \$1099926.51 |
| 7 | Net Operating Expenditures | | |
| | (a) Total Operating Expenditures (from Line 17) | \$93636.74 | \$966398.58 |
| | (b) Total Offsets to Operating Expenditures (from Line 14) | \$1924.89 | \$10086.08 |
| | (c) Net Operating Expenditures (Subtract Line 7(b) from 7(a)) | \$91711.85 | \$956312.50 |
| 8 | Cash on Hand at Close of Reporting Period (from Line 27) | \$211731.58 | |
| 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) | 200445 | |

For further information:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
Charles Black

Signature of Treasurer Date: 1-26-99

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

99 04 393 3078

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

Name of Committee (In full) **Barr-Congress** Report Covering the Period:
From: **11/24/98** To: **12/31/98**

| I. RECEIPTS | Column A Total This Period | Column B Calendar Year-To-Date |
|---|---------------------------------------|---|
| 11 CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (Use Schedule A) | \$23387.44 | |
| (ii) Unitemized | \$66568.91 | |
| (iii) Total of contributions from individual | \$111956.35 | \$950422.48 |
| (b) Political Party Committees | \$0.00 | \$0.00 |
| (c) Other Political Committees (such as PACs) | \$0.00 | \$150034.03 |
| (d) The Candidate | \$0.00 | \$0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d)) | \$111956.35 | \$1100458.51 |
| 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 13(a) and (b)) | \$0.00 | \$0.00 |
| 14 OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | \$1924.89 | \$10088.08 |
| 15 OTHER RECEIPTS (Dividends, Interest, etc.) | \$0.00 | \$2611.05 |
| 15 TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) | \$113881.24 | \$1113153.64 |
| II. DISBURSEMENTS | | |
| 17 OPERATING EXPENDITURES | \$93836.74 | \$968398.58 |
| 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 19(a) and (b)) | \$0.00 | \$0.00 |
| 20 REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | \$0.00 | \$530.00 |
| (b) Political Party Committees | \$0.00 | \$0.00 |
| (c) Other Political Committees (such as PACs) | \$0.00 | \$0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) | \$0.00 | \$530.00 |
| 21 OTHER DISBURSEMENTS | \$0.00 | \$35750.00 |
| 22 TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) | \$93836.74 | \$1002678.58 |

III. CASH SUMMARY

| | |
|--|-------------|
| 23 CASH ON HAND AT BEGINNING OF REPORTING PERIOD | \$191487.08 |
| 24 TOTAL RECEIPTS THIS PERIOD (from Line 16) | \$113881.24 |
| 25 SUBTOTAL (add Line 23 and Line 24) | \$305368.32 |
| 26 TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) | \$93836.74 |
| 27 CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) | \$211731.58 |

99-04-393-3079

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In Full)
Barr-Congress

| | | | |
|---|---|--|---|
| A. Full Name, Mailing Address and Zip Code Ziad Alamiri 5600 N Thomas Road Freeland, MI 48623 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$300.00 | Date (month, day, year) 12/31/98 | Amount of Each Receipt this Period \$200.00 |
| B. Full Name, Mailing Address and Zip Code Robert H. Anderson 4970 N Baggett Road Douglasville, GA 30134 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested None Occupation Information Requested Retired Aggregate Year-to-Date -> \$225.00 | Date (month, day, year) 12/05/98 | Amount of Each Receipt this Period \$50.00 |
| C. Full Name, Mailing Address and Zip Code Scott Arbuckle 13301 Club Hill Dr. Dallas, TX 75248 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$300.00 | Date (month, day, year) 12/12/98 | Amount of Each Receipt this Period \$150.00 |
| D. Full Name, Mailing Address and Zip Code Edna Baker 207 S. Gorman Street Blue Earth, MN 56013 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$300.00 | Date (month, day, year) 12/19/98 | Amount of Each Receipt this Period \$100.00 |
| E. Full Name, Mailing Address and Zip Code Edna Baker 207 S. Gorman Street Blue Earth, MN 56013 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$350.00 | Date (month, day, year) 12/31/98 | Amount of Each Receipt this Period \$50.00 |
| F. Full Name, Mailing Address and Zip Code Lillian A. Baker 812 E 22nd Avenue Kansas City, MO 64116 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$250.00 | Date (month, day, year) 12/19/98 | Amount of Each Receipt this Period \$150.00 |
| G. Full Name, Mailing Address and Zip Code J. C. Barge 440 Laurelwood Drive Tyrone, GA 30290 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested None Occupation Information Requested Retired Aggregate Year-to-Date -> \$270.00 | Date (month, day, year) 12/31/98 | Amount of Each Receipt this Period \$25.00 |

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| SUBTOTAL of Receipts This Page (optional) | \$725.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--------------------------------------|-------------------------|------------------------------------|
| Frank F. Barnard 7770 S Meridian Road Hudson, MI 49247 | Information Requested | 12/19/98 | \$100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> | \$300.00 | |
| B. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Jeannette Biesemeyer 2395 E 47th Court Anchorage, AK 99507 | None | 12/31/98 | \$200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Homemaker | | |
| | Aggregate Year-to-Date -> | \$400.00 | |
| C. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| William Bishop 6915 Washington Avenue Des Moines, IA 50322 | Information Requested | 12/12/98 | \$100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> | \$300.00 | |
| D. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Richard P. Blatner 59 Simme Road Lancaster, NY 14086 | None | 12/12/98 | \$60.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Retired | | |
| | Aggregate Year-to-Date -> | \$210.00 | |
| E. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Helen Bocchio 11717 Guif Boulevard Apt 631 Saint Petersburg, FL 33708 | Best Efforts Satisfied | 12/19/98 | \$100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Best Efforts Satisfied | | |
| | Aggregate Year-to-Date -> | \$210.00 | |
| F. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Everard Book 1149 Brown Street Egglewood, FL 34224 | None | 12/31/98 | \$200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Retired | | |
| | Aggregate Year-to-Date -> | \$650.00 | |
| G. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Heather L. Brisley 316 Yorkshire Drive Cumberland Gap, TN 37724 | Lincoln Memorial University | 12/19/98 | \$100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Professor | | |
| | Aggregate Year-to-Date -> | \$250.00 | |

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| SUBTOTAL of Receipts This Page (optional) | \$860.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In Full)
Barr-Congress

| | | | |
|---|--|-------------------------------------|---|
| A. Full Name, Mailing Address and Zip Code Philip G. Brumder P.O. Box 551 Elm Grove, WI 53122- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer None | Date (month, day, year) 12/22/98 | Amount of Each Receipt this Period \$1000.00 |
| | Occupation Retired | Aggregate Year-to-Date -> \$1000.00 | |
| B. Full Name, Mailing Address and Zip Code Jerry Brunst 2390 Uniontown Road Westminster, MD 21158 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) 12/31/98 | Amount of Each Receipt this Period \$100.00 |
| | Occupation Information Requested | Aggregate Year-to-Date -> \$250.00 | |
| C. Full Name, Mailing Address and Zip Code Muriel D. Burness 1400 Ptarmigan Drive #3 Walnut Creek, CA 94595 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer None | Date (month, day, year) 12/12/98 | Amount of Each Receipt this Period \$50.00 |
| | Occupation Retired | Aggregate Year-to-Date -> \$275.00 | |
| D. Full Name, Mailing Address and Zip Code Katherine Callahan 4100 NW 165th Street Opa Locka, FL 33054 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) 12/12/98 | Amount of Each Receipt this Period \$100.00 |
| | Occupation Information Requested | Aggregate Year-to-Date -> \$200.00 | |
| E. Full Name, Mailing Address and Zip Code Katherine Callahan 4100 NW 165th Street Opa Locka, FL 33054 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) 12/30/98 | Amount of Each Receipt this Period \$90.00 |
| | Occupation Information Requested | Aggregate Year-to-Date -> \$290.00 | |
| F. Full Name, Mailing Address and Zip Code Richard Carey 105 Liverpool Williamsburg, VA 23188 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Best Efforts Satisfied | Date (month, day, year) 12/19/98 | Amount of Each Receipt this Period \$100.00 |
| | Occupation Best Efforts Satisfied | Aggregate Year-to-Date -> \$350.00 | |
| G. Full Name, Mailing Address and Zip Code G. C. Carnes 540 Villa Rica Road Marietta, GA 30064 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer None | Date (month, day, year) 12/31/98 | Amount of Each Receipt this Period \$50.00 |
| | Occupation Retired | Aggregate Year-to-Date -> \$290.00 | |

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| SUBTOTAL of Receipts This Page (optional) | \$1490.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be 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)
Barr-Congress

| | | | |
|--|---|--|---|
| A. Full Name, Mailing Address and Zip Code Albert A. Carr 2821 Bellevue Avenue Augusta, GA 30909 | Name of Employer Information Requested Occupation Information Requested | Date (month, day, year) 12/12/98 | Amount of Each Receipt this Period \$150.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$250.00 | |
| B. Full Name, Mailing Address and Zip Code Greta M. Chevriér 251 Pinewood Lane Rock Hill, SC 29730 | Name of Employer Information Requested Occupation Information Requested | Date (month, day, year) 12/19/98 | Amount of Each Receipt this Period \$150.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$250.00 | |
| C. Full Name, Mailing Address and Zip Code Geneva Clark 1135 Wesleyan Drive Macon, GA 31210- | Name of Employer Information Requested None Occupation Information Requested Retired | Date (month, day, year) 12/28/98 | Amount of Each Receipt this Period \$50.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$250.00 | |
| D. Full Name, Mailing Address and Zip Code Mont E. Cochran 203 Gibson Street Berryville, AR 72615 | Name of Employer Information Requested Occupation Information Requested | Date (month, day, year) 12/12/98 | Amount of Each Receipt this Period \$150.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$250.00 | |
| E. Full Name, Mailing Address and Zip Code Andrew M. Collins 215 Main Street Camilla, GA 31730 | Name of Employer Information Requested Self Occupation Information Requested Farmer | Date (month, day, year) 12/12/98 | Amount of Each Receipt this Period \$50.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$500.00 | |
| F. Full Name, Mailing Address and Zip Code Andrew M. Collins 215 Main Street Camilla, GA 31730 | Name of Employer Information Requested Self Occupation Information Requested Farmer | Date (month, day, year) 12/30/98 | Amount of Each Receipt this Period \$100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$600.00 | |
| G. Full Name, Mailing Address and Zip Code Frank Concerto 266 93rd Street Brooklyn, NY 11209 | Name of Employer Information Requested Occupation Information Requested | Date (month, day, year) 12/05/98 | Amount of Each Receipt this Period \$100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$300.00 | |

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

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 22
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
|--|--|-------------------------|------------------------------------|
| Luella Cope 420 15th Street New Cumberland, PA 17070 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Information Requested | 12/12/98 | \$25.00 |
| Aggregate Year-to-Date -> | | \$219.00 | |
| B. Full Name, Mailing Address and Zip Code | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
| Norma E. Corey P.O. Box 472 Goffstown, NH 03045 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Information Requested | 12/19/98 | \$150.00 |
| Aggregate Year-to-Date -> | | \$350.00 | |
| C. Full Name, Mailing Address and Zip Code | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
| Mary Crosby 1825 Lake Street Apartment B Huntington Beach, CA 92648 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Information Requested | 12/28/98 | \$50.00 |
| Aggregate Year-to-Date -> | | \$125.00 | |
| D. Full Name, Mailing Address and Zip Code | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
| Mary Crosby 1825 Lake Street Apartment B Huntington Beach, CA 92648 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Information Requested | 12/31/98 | \$100.00 |
| Aggregate Year-to-Date -> | | \$225.00 | |
| E. Full Name, Mailing Address and Zip Code | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
| Grace Dalton 2080 Golden Rain Road Apt. Walnut Creek, CA 94595 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | None | 12/29/98 | \$100.00 |
| Aggregate Year-to-Date -> | | \$400.00 | |
| F. Full Name, Mailing Address and Zip Code | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
| Grace Dalton 2080 Golden Rain Road Apt. Walnut Creek, CA 94595 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | None | 12/31/98 | \$25.00 |
| Aggregate Year-to-Date -> | | \$425.00 | |
| G. Full Name, Mailing Address and Zip Code | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
| Phyllis Davenport 3100 Shore Drive No. 1016 Virginia Beach, VA 23451 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | None | 12/28/98 | \$100.00 |
| Aggregate Year-to-Date -> | | \$460.00 | |

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| SUBTOTAL of Receipts This Page (optional) | \$550.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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

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| NAME OF COMMITTEE (In Full) Barr-Congress | | | |
|--|---|---|---|
| A. Full Name, Mailing Address and Zip Code Robert E. Davis 1787 Morgan Valley Road Rockmart, GA 30153- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer None Occupation Retired Aggregate Year-to-Date -> | Date (month, day, year) 12/31/98 \$1250.00 | Amount of Each Receipt this Period \$250.00 |
| B. Full Name, Mailing Address and Zip Code Charles F. De Ganahl 85 Wapoos Trail Chatham, MA 02633 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer None Occupation Retired Aggregate Year-to-Date -> | Date (month, day, year) 12/29/98 \$600.00 | Amount of Each Receipt this Period \$200.00 |
| C. Full Name, Mailing Address and Zip Code Georgia Dennington 8417 S Hillcrest Drive Oklahoma City, OK 73159 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> | Date (month, day, year) 12/31/98 \$250.00 | Amount of Each Receipt this Period \$50.00 |
| D. Full Name, Mailing Address and Zip Code Marcia Duryea 123 Bayview Avenue Amityville, NY 11701 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer NYC Board of Education Occupation Teacher Aggregate Year-to-Date -> | Date (month, day, year) 12/28/98 \$125.00 | Amount of Each Receipt this Period \$100.00 |
| E. Full Name, Mailing Address and Zip Code Marcia Duryea 123 Bayview Avenue Amityville, NY 11701 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer NYC Board of Education Occupation Teacher Aggregate Year-to-Date -> | Date (month, day, year) 12/31/98 \$225.00 | Amount of Each Receipt this Period \$100.00 |
| F. Full Name, Mailing Address and Zip Code James Edwards 3220 Brownsville Road Pittsburgh, PA 15227 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer ERMI Occupation Physician Aggregate Year-to-Date -> | Date (month, day, year) 12/12/98 \$500.00 | Amount of Each Receipt this Period \$250.00 |
| G. Full Name, Mailing Address and Zip Code Wm D. Elfrink 1130 Piedmont Avenue Ne Ansley Above The Park 130 Atlanta, GA 30309 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer None Occupation Retired Aggregate Year-to-Date -> | Date (month, day, year) 12/05/98 \$235.00 | Amount of Each Receipt this Period \$50.00 |

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| SUBTOTAL of Receipts This Page (optional) | \$1000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
|--|--|-------------------------|------------------------------------|
| Charles Eslinger 2111 Firewood Drive Baton Rouge, LA 70816 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Information Requested | 12/31/98 | \$200.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> | \$400.00 | |
| John J. Esser 7001 Chase Avenue Los Angeles, CA 90045 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Information Requested | 12/19/98 | \$100.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> | \$300.00 | |
| Leonard Evans 157 North Salem Road Conyers, GA 30013 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | None | 12/31/98 | \$150.00 |
| | Occupation Retired | | |
| | Aggregate Year-to-Date -> | \$350.00 | |
| Carol Ewing 3528 S Dupont Boulevard Smyrna, DE 19977 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Information Requested | 12/19/98 | \$150.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> | \$250.00 | |
| Donald D. Farley 2684 Beverly Lane Snellville, GA 30278-3268 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | None | 12/22/98 | \$40.00 |
| | Occupation Retired | | |
| | Aggregate Year-to-Date -> | \$240.00 | |
| Garland Favorito 3952 Spalding Hollow Norcross, GA 30092-1976 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Cashmate, Inc. | 12/16/98 | \$250.00 |
| | Occupation Owner | | |
| | Aggregate Year-to-Date -> | \$750.00 | |
| Thomas Flagler 1795 W Wesley Road Nw Atlanta, GA 30327 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Information Requested | 12/31/98 | \$100.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> | \$500.00 | |

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| SUBTOTAL of Receipts This Page (optional) | \$990.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

Barr-Congress

| | | | |
|--|---|---|---|
| A. Full Name, Mailing Address and Zip Code John E. Fletcher 23 Chatuachee Crossing Savannah, GA 31411- | Name of Employer None | Date (month, day, year) 12/28/98 | Amount of Each Receipt this Period \$50.00 |
| | Occupation Retired | Aggregate Year-to-Date -> \$300.00 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| B. Full Name, Mailing Address and Zip Code L. K. Flinn 8015 Sweetwater Drive Douglasville, GA 30135-5951 | Name of Employer Best Efforts Satisfied | Date (month, day, year) 12/29/98 | Amount of Each Receipt this Period \$70.00 |
| | Occupation Best Efforts Satisfied | Aggregate Year-to-Date -> \$210.00 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| C. Full Name, Mailing Address and Zip Code George L. Gannon 880 Gannon Lane Rio Rico, AZ 85648- | Name of Employer None | Date (month, day, year) 12/28/98 | Amount of Each Receipt this Period \$25.00 |
| | Occupation Retired | Aggregate Year-to-Date -> \$240.00 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| D. Full Name, Mailing Address and Zip Code John A. Gill M.D. 132 Landcaster Drive P.O. Box 604 Irvington, VA 22480 | Name of Employer Self | Date (month, day, year) 12/31/98 | Amount of Each Receipt this Period \$300.00 |
| | Occupation Physician | Aggregate Year-to-Date -> \$500.00 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| E. Full Name, Mailing Address and Zip Code Ben Gilmer 167 Peachtree Road Ne Apt Atlanta, GA 30305 | Name of Employer None | Date (month, day, year) 12/19/98 | Amount of Each Receipt this Period \$100.00 |
| | Occupation Retired | Aggregate Year-to-Date -> \$325.00 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| F. Full Name, Mailing Address and Zip Code Phyllis Goff 147 Avenue Del Ora Redwood City, CA 94062 | Name of Employer Information Requested | Date (month, day, year) 12/31/98 | Amount of Each Receipt this Period \$50.00 |
| | Occupation Information Requested | Aggregate Year-to-Date -> \$230.00 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| G. Full Name, Mailing Address and Zip Code Doyce Green 215 Pleasant Valley Road Silver Creek, GA 30173-2130 | Name of Employer Silver Creek Cabinets | Date (month, day, year) 12/28/98 | Amount of Each Receipt this Period \$25.00 |
| | Occupation Owner | Aggregate Year-to-Date -> \$275.00 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |

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| SUBTOTAL of Receipts This Page (optional) | \$620.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 9 OF 22

FOR LINE NUMBER 11(a)(i)

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)

Barr-Congress

| A. Full Name, Mailing Address and Zip Code James S. Grichar 623 W Spring Street Woodstock, VA 22664 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> | Date (month, day, year) 12/05/98 \$200.00 | Amount of Each Receipt this Period \$50.00 |
|---|--|--|---|
| B. Full Name, Mailing Address and Zip Code James S. Grichar 623 W Spring Street Woodstock, VA 22664 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> | Date (month, day, year) 12/28/98 \$250.00 | Amount of Each Receipt this Period \$50.00 |
| C. Full Name, Mailing Address and Zip Code Mary Hackerman 2102 Ella Lee Lane Houston, TX 77027 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> | Date (month, day, year) 12/19/98 \$250.00 | Amount of Each Receipt this Period \$50.00 |
| D. Full Name, Mailing Address and Zip Code Drita Hall 1128 Cortland Drive Westal, NY 13850 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested None Occupation Information Requested Retired Aggregate Year-to-Date -> | Date (month, day, year) 12/19/98 \$340.00 | Amount of Each Receipt this Period \$100.00 |
| E. Full Name, Mailing Address and Zip Code Minerva Halvorson P.O. Box 313 New Meadows, ID 83654 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> | Date (month, day, year) 12/19/98 \$350.00 | Amount of Each Receipt this Period \$100.00 |
| F. Full Name, Mailing Address and Zip Code Don Hammett 1204 Marietta Country Club Drive Kennesaw, GA 30152- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested Don Hammet Realty Occupation Information Requested Broker, Investor Aggregate Year-to-Date -> | Date (month, day, year) 12/22/98 \$2000.00 | Amount of Each Receipt this Period \$1000.00 |
| G. Full Name, Mailing Address and Zip Code Ben Harrell 780 Raleigh Court Marietta, GA 30064 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested Allied Signal, Inc. Occupation Information Requested Engineer Aggregate Year-to-Date -> | Date (month, day, year) 12/31/98 \$450.00 | Amount of Each Receipt this Period \$50.00 |

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| SUBTOTAL of Receipts This Page (optional) | \$1400.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Receipts Page

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--|-------------------------|------------------------------------|
| Florence L. Headley 2020 S Monroe Street Apt. 722 Denver, CO 80210 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Information Requested | 12/31/98 | \$200.00 |
| Aggregate Year-to-Date -> | | \$400.00 | |
| B. Full Name, Mailing Address and Zip Code Arthur L. Herberger 300 Hot Springs Road Apt 35 Santa Barbara, CA 93108 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
| Occupation Information Requested | | 12/31/98 | \$25.00 |
| Aggregate Year-to-Date -> | | \$225.00 | |
| C. Full Name, Mailing Address and Zip Code Darrell Holman 85 Palm Hill Lane Duarte, CA 91010 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
| Occupation Information Requested | | 12/31/98 | \$100.00 |
| Aggregate Year-to-Date -> | | \$750.00 | |
| D. Full Name, Mailing Address and Zip Code Jere C. Hubbard 1 Lazywood Lane Midland, TX 79705 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
| Occupation Information Requested | | 12/31/98 | \$50.00 |
| Aggregate Year-to-Date -> | | \$285.00 | |
| E. Full Name, Mailing Address and Zip Code James E. Hungerpiller 12730 Rockwell Avenue Savannah, GA 31419 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
| Occupation Information Requested | | 12/31/98 | \$150.00 |
| Aggregate Year-to-Date -> | | \$250.00 | |
| F. Full Name, Mailing Address and Zip Code Nellie Irwin P.O. Box 745 Elkin, NC 28621 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
| Occupation Information Requested | | 12/19/98 | \$300.00 |
| Aggregate Year-to-Date -> | | \$650.00 | |
| G. Full Name, Mailing Address and Zip Code Robert Jaeger 1133 S 24th Street Allentown, PA 18103 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
| Occupation Information Requested | | 12/28/98 | \$100.00 |
| Aggregate Year-to-Date -> | | \$300.00 | |

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| SUBTOTAL of Receipts This Page (optional) | \$925.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Barr-Congress

| | | | |
|---|---|---|---|
| <p>A. Full Name, Mailing Address and Zip Code Robert Jaeger 1133 S 24th Street Allentown, PA 18103</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Retired</p> | <p>Date (month, day, year) 12/31/98</p> <p>Aggregate Year-to-Date -> \$400.00</p> | <p>Amount of Each Receipt this Period \$100.00</p> |
| <p>B. Full Name, Mailing Address and Zip Code Charles W. Johnson 3801 Lighthouse Drive Pacine, WI 53402</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> | <p>Date (month, day, year) 12/31/98</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Amount of Each Receipt this Period \$150.00</p> |
| <p>C. Full Name, Mailing Address and Zip Code Charles R. Johnson Jr. 2307 W North Avenue Anderson, SC 29625</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Retired</p> | <p>Date (month, day, year) 12/19/98</p> <p>Aggregate Year-to-Date -> \$400.00</p> | <p>Amount of Each Receipt this Period \$150.00</p> |
| <p>D. Full Name, Mailing Address and Zip Code Richard T. Jones 103 Commercial Avenue Carrollton, GA 30117-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Great American Enterprise</p> <p>Occupation Ceo</p> | <p>Date (month, day, year) 12/16/98</p> <p>Aggregate Year-to-Date -> \$1000.00</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>E. Full Name, Mailing Address and Zip Code Lawrence Jordan 104 Candee Avenue Sayville, NY 11782</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> | <p>Date (month, day, year) 12/19/98</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Amount of Each Receipt this Period \$150.00</p> |
| <p>F. Full Name, Mailing Address and Zip Code Jacqueline Kicos 1828 North K Street Lake Worth, FL 33460-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Retired</p> | <p>Date (month, day, year) 12/28/98</p> <p>Aggregate Year-to-Date -> \$830.00</p> | <p>Amount of Each Receipt this Period \$175.00</p> |
| <p>G. Full Name, Mailing Address and Zip Code Clarice King 1440 Sheridan Road Apt 502 Wilmette, IL 60091</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> | <p>Date (month, day, year) 12/19/98</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Amount of Each Receipt this Period \$150.00</p> |

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| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$1125.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Barr-Congress

| | | | |
|--|---|--|--|
| <p>A. Full Name, Mailing Address and Zip Code Robert King 105 E. University Street Wakahachie, TX 75165</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Tyler Refridgeration</p> <p>Occupation Engineering Manager</p> | <p>Date (month, day, year) 12/28/98</p> <p>Aggregate Year-to-Date -> \$240.00</p> | <p>Amount of Each Receipt this Period \$10.00</p> |
| <p>B. Full Name, Mailing Address and Zip Code Walter L. King 121 County Road 462 Fisgah, AL 35765</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> | <p>Date (month, day, year) 12/12/98</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Amount of Each Receipt this Period \$150.00</p> |
| <p>C. Full Name, Mailing Address and Zip Code Margaret Kohl 140 Wintersville Road Myerstown, PA 17067</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> | <p>Date (month, day, year) 12/12/98</p> <p>Aggregate Year-to-Date -> \$500.00</p> | <p>Amount of Each Receipt this Period \$100.00</p> |
| <p>D. Full Name, Mailing Address and Zip Code Terry Koubek 410 Monaco Drive Indialantic, FL 32903</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Radiology Assoc. of Brevard</p> <p>Occupation Radiologist</p> | <p>Date (month, day, year) 12/12/98</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Amount of Each Receipt this Period \$50.00</p> |
| <p>E. Full Name, Mailing Address and Zip Code Robert Kramer 1150 Cedar Branch Court Marietta, GA 30064-4613</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Besse Forest Products</p> <p>Occupation Export Sales</p> | <p>Date (month, day, year) 12/28/98</p> <p>Aggregate Year-to-Date -> \$300.00</p> | <p>Amount of Each Receipt this Period \$75.00</p> |
| <p>F. Full Name, Mailing Address and Zip Code Gertrude M. Kuehn 319 Buck Avenue Vacaville, CA 95688</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> | <p>Date (month, day, year) 12/12/98</p> <p>Aggregate Year-to-Date -> \$550.00</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>G. Full Name, Mailing Address and Zip Code Sue E. Lake 2216 Acworth Due West Road Kennesaw, GA 30152-3157</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Homemaker</p> | <p>Date (month, day, year) 12/08/98</p> <p>Aggregate Year-to-Date -> \$752.44</p> | <p>Amount of Each Receipt this Period \$102.44 IN-KIND</p> |

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| SUBTOTAL of Receipts This Page (optional) | \$737.44 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--|-------------------------|------------------------------------|
| Florence Lash 1215 Edna Drive Daytona Beach, FL 32119 | Occupation Information Requested | 12/31/98 | \$100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$300.00 | |
| Stephen N. Lecoy 110 Keswick Way Alpharetta, GA 30022 | Occupation Information Requested | 12/19/98 | \$100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$300.00 | |
| Leon A. Leonard 1712 Hodges Circle Mansfield, GA 30055- | Occupation Information Requested | 12/28/98 | \$50.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$650.00 | |
| James R. Lightner 5905 Steuben Court Dallas, TX 75248 | Occupation Information Requested | 12/19/98 | \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$2000.00 | |
| Frank Lindskoog 1818 School Street Moraga, CA 94556 | Occupation Information Requested | 12/19/98 | \$100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$300.00 | |
| Marvin Little P.O. Box 280 Morrow, GA 30260- | Occupation Information Requested | 12/28/98 | \$200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$300.00 | |
| Wesley Loomis 700 John Ringling Boulevar Apt 305 Sarasota, FL 34236 | Occupation Information Requested | 12/19/98 | \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$500.00 | |

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

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--------------------------------------|-------------------------|------------------------------------|
| James Lovett 2911 Kipling Drive Augusta, GA 30909 | Information Requested | 12/31/98 | \$100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> | \$300.00 | |
| Charles H. Lumpkin, Jr. 418 Bradley Street Carrollton, GA 30117-3301 | Self | 12/16/98 | \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Attorney | | |
| | Aggregate Year-to-Date -> | \$250.00 | |
| Vivian Martin 7 Temple Avenue Sw Fort Walton Beach, FL 32548 | None | 12/19/98 | \$300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Retired | | |
| | Aggregate Year-to-Date -> | \$500.00 | |
| Albert Maverick III 2119 Pine Valley Houston, TX 77019 | Best Efforts Satisfied | 12/31/98 | \$50.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Best Efforts Satisfied | | |
| | Aggregate Year-to-Date -> | \$350.00 | |
| Joseph L. McGee 1139 Christacy Way Marietta, GA 30066-2767 | American Shooting Sports Council | 12/16/98 | \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Executive | | |
| | Aggregate Year-to-Date -> | \$1000.00 | |
| David W. Meadow 2116 Elisha Payne Cir S Blairsville, GA 30512 | Information Requested | 12/31/98 | \$50.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> | \$250.00 | |
| Adeline Miller P.O. Box 34 Podeo, NM 88056 | Information Requested | 12/31/98 | \$100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> | \$300.00 | |

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| SUBTOTAL of Receipts This Page (optional) | \$1450.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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| NAME OF COMMITTEE (In Full) Barr-Congress | | | |
|---|--|--|---|
| A. Full Name, Mailing Address and Zip Code Jane B. Miller 11331 Orangeview Road Santa Ana, CA 92705 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) 12/19/98 | Amount of Each Receipt this Period \$150.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> \$250.00 | | |
| B. Full Name, Mailing Address and Zip Code Elizabeth Moody 107 Sea Island Circle Daytona Beach, FL 32114 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer None | Date (month, day, year) 12/19/98 | Amount of Each Receipt this Period \$50.00 |
| | Occupation Retired | | |
| | Aggregate Year-to-Date -> \$300.00 | | |
| C. Full Name, Mailing Address and Zip Code J. H. Moore 40 1h35 N Aph Austin, TX 78701 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) 12/31/98 | Amount of Each Receipt this Period \$150.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> \$250.00 | | |
| D. Full Name, Mailing Address and Zip Code Patricia Nevin P.O. Box 1476 Franklin, NC 28744 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) 12/19/98 | Amount of Each Receipt this Period \$150.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> \$250.00 | | |
| E. Full Name, Mailing Address and Zip Code Samuel A. Nigro 2517 Guilford Road Cleveland, OH 44118 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) 12/12/98 | Amount of Each Receipt this Period \$150.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> \$250.00 | | |
| F. Full Name, Mailing Address and Zip Code Beverly Olson 200 Idle Hour Drive Macon, GA 31210 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) 12/05/98 | Amount of Each Receipt this Period \$100.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> \$350.00 | | |
| G. Full Name, Mailing Address and Zip Code Beverly Olson 200 Idle Hour Drive Macon, GA 31210 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) 12/19/98 | Amount of Each Receipt this Period \$100.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> \$450.00 | | |

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| SUBTOTAL of Receipts This Page (optional) | \$850.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 16 OF 22
FOR LINE NUMBER 11(a)(i).

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| NAME OF COMMITTEE (In Full) Barr-Congress | | | |
|---|--|--|--|
| A. Full Name, Mailing Address and Zip Code Charles Otwell P.O. Box 239 Bremen, GA 30110- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) 12/16/98 | Amount of Each Receipt this Period \$1000.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> \$1000.00 | | |
| B. Full Name, Mailing Address and Zip Code Timon Owens 13651 Espirit Way Irvine, CA 92620 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) 12/31/98 | Amount of Each Receipt this Period \$150.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> \$250.00 | | |
| C. Full Name, Mailing Address and Zip Code Harald Fabst P.O. Box 1388 Carefree, AZ 85377- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) 12/30/98 | Amount of Each Receipt this Period \$200.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> \$325.00 | | |
| D. Full Name, Mailing Address and Zip Code Raymond Page, Jr. 150 Millcreek Terrace Gladwyne, PA 19035- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer None | Date (month, day, year) 12/28/98 | Amount of Each Receipt this Period \$50.00 |
| | Occupation Retired | | |
| | Aggregate Year-to-Date -> \$350.00 | | |
| E. Full Name, Mailing Address and Zip Code Melissa Parker 29 Calhoun Drive Sumter, SC 29150 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer None | Date (month, day, year) 12/12/98 | Amount of Each Receipt this Period \$25.00 |
| | Occupation Homemaker | | |
| | Aggregate Year-to-Date -> \$205.00 | | |
| F. Full Name, Mailing Address and Zip Code Melissa Parker 29 Calhoun Drive Sumter, SC 29150 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer None | Date (month, day, year) 12/28/98 | Amount of Each Receipt this Period \$25.00 |
| | Occupation Homemaker | | |
| | Aggregate Year-to-Date -> \$230.00 | | |
| G. Full Name, Mailing Address and Zip Code Lucien Philips 1945 Forest Green Drive Atlanta, GA 30329 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer None | Date (month, day, year) 12/30/98 | Amount of Each Receipt this Period \$100.00 |
| | Occupation Retired | | |
| | Aggregate Year-to-Date -> \$400.00 | | |

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| SUBTOTAL of Receipts This Page (optional) | \$1550.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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

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

NAME OF COMMITTEE (In Full)

Barr-Congress

| | | | |
|--|---|--|---|
| <p>A. Full Name, Mailing Address and Zip Code Thomas N. Pirkle 608 Lakewood Drive La Grange, GA 30240</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$400.00</p> | <p>Date (month, day, year) 12/31/98</p> | <p>Amount of Each Receipt this Period \$100.00</p> |
| <p>B. Full Name, Mailing Address and Zip Code Mark Pivovonsky 6 Amory Drive Valley Cottage, NY 10989</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Aggregate Year-to-Date -> \$300.00</p> | <p>Date (month, day, year) 12/12/98</p> | <p>Amount of Each Receipt this Period \$200.00</p> |
| <p>C. Full Name, Mailing Address and Zip Code Doris Putzolu 1000 North Point No. 406 San Francisco, CA 94109-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Self</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date -> \$750.00</p> | <p>Date (month, day, year) 12/28/98</p> | <p>Amount of Each Receipt this Period \$100.00</p> |
| <p>D. Full Name, Mailing Address and Zip Code Edgar Ralston 3300 Darby Road Apt 3315 Haverford, PA 19041</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Aggregate Year-to-Date -> \$300.00</p> | <p>Date (month, day, year) 12/19/98</p> | <p>Amount of Each Receipt this Period \$200.00</p> |
| <p>E. Full Name, Mailing Address and Zip Code William Ray 1117 30th St. S Birmingham, AL 35205</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Date (month, day, year) 12/12/98</p> | <p>Amount of Each Receipt this Period \$100.00</p> |
| <p>F. Full Name, Mailing Address and Zip Code James E. Richards 408 Hyde Park Nashville, TN 37215</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Aggregate Year-to-Date -> \$700.00</p> | <p>Date (month, day, year) 12/28/98</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>G. Full Name, Mailing Address and Zip Code Dorothy Riley 86 Lothrop Road Grosse Pointe, MI 48236</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Aggregate Year-to-Date -> \$200.00</p> | <p>Date (month, day, year) 12/28/98</p> | <p>Amount of Each Receipt this Period \$100.00</p> |

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| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$1300.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

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

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

NAME OF COMMITTEE (In Full)

Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--|-------------------------|------------------------------------|
| Dorothy Riley 86 Lothrop Road Grosse Pointe, MI 48236 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Information Requested | 12/31/98 | \$100.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> | | \$300.00 |
| M. R. Rogers 18775 Foss Hill Road Calistoga, CA 94515 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | None | 12/19/98 | \$100.00 |
| | Occupation Retired Rancher | | |
| | Aggregate Year-to-Date -> | | \$400.00 |
| Mary Rohe P.O. Box 109 Hunt, TX 78024 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Information Requested | 12/31/98 | \$250.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> | | \$500.00 |
| Sarah Rollins 65 Ruggles Lane Hilton, MA 02186 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Best Efforts Satisfied | 12/19/98 | \$75.00 |
| | Occupation Best Efforts Satisfied | | |
| | Aggregate Year-to-Date -> | | \$325.00 |
| George Roman 3346 Providence Drive Midland, TX 79707 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Information Requested | 12/31/98 | \$150.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> | | \$250.00 |
| Marie Roos 2725 Colonial Parkway Fort Worth, TX 76109 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Information Requested | 12/31/98 | \$150.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date -> | | \$250.00 |
| Paul W. Salerno 555 Picketts Crossing Acworth, GA 30101-7717 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Cook & Salerno Enterprises, In President | 12/28/98 | \$100.00 |
| | Occupation President | | |
| | Aggregate Year-to-Date -> | | \$600.00 |

SUBTOTAL of Receipts This Page (optional)

\$925.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Primary Page

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

NAME OF COMMITTEE (In Full)
Bair-Congress

| | | | |
|---|---|--|---|
| <p>A. Full Name, Mailing Address and Zip Code Mary Sanders 2332 Wisteria Street Baton Rouge, LA 70806</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$1350.00</p> | <p>Date (month, day, year) 12/12/98</p> | <p>Amount of Each Receipt this Period \$600.00</p> |
| <p>B. Full Name, Mailing Address and Zip Code Mary Sanders 2332 Wisteria Street Baton Rouge, LA 70806</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$1450.00</p> | <p>Date (month, day, year) 12/28/98</p> | <p>Amount of Each Receipt this Period \$100.00</p> |
| <p>C. Full Name, Mailing Address and Zip Code Jay R. Seaver 2010 Blue Mountain Road Longmont, CO 80504</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Date (month, day, year) 12/31/98</p> | <p>Amount of Each Receipt this Period \$50.00</p> |
| <p>D. Full Name, Mailing Address and Zip Code Bonnie Shaffer 3113 May Circle Pio Rancho, NM 87124</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Aggregate Year-to-Date -> \$205.00</p> | <p>Date (month, day, year) 12/05/98</p> | <p>Amount of Each Receipt this Period \$35.00</p> |
| <p>E. Full Name, Mailing Address and Zip Code Joseph H. Sheppe 1521 Powell Court Huntington, WV 25701</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Date (month, day, year) 12/31/98</p> | <p>Amount of Each Receipt this Period \$150.00</p> |
| <p>F. Full Name, Mailing Address and Zip Code George H. Smee 2805 Panch Road South Charleston, WV 25303</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Date (month, day, year) 12/12/98</p> | <p>Amount of Each Receipt this Period \$50.00</p> |
| <p>G. Full Name, Mailing Address and Zip Code Alex W. Smith 1230 Peachtree Street, NE Suite 310 Atlanta, GA 30309-3575</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$300.00</p> | <p>Date (month, day, year) 12/28/98</p> | <p>Amount of Each Receipt this Period \$100.00</p> |

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| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$1085.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | |

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In Full)
Barr-Congress

| | | | |
|---|--|-------------------------------------|---|
| A. Full Name, Mailing Address and Zip Code Theodore Smyth 4234 Cresta Avenue Santa Barbara, CA 93110 | Name of Employer Self | Date (month, day, year) 12/31/98 | Amount of Each Receipt this Period \$100.00 |
| | Occupation Developer | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | \$500.00 |
| B. Full Name, Mailing Address and Zip Code Katherine Smythe 629 Rozelle Street Memphis, TN 38104 | Name of Employer Information Requested | Date (month, day, year) 12/12/98 | Amount of Each Receipt this Period \$500.00 |
| | Occupation Information Requested | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | \$600.00 |
| C. Full Name, Mailing Address and Zip Code Erbert C. Stibor 2016 Thornbury Lane Las Vegas, NV 89134 | Name of Employer Information Requested | Date (month, day, year) 12/19/98 | Amount of Each Receipt this Period \$200.00 |
| | Occupation Information Requested | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | \$400.00 |
| D. Full Name, Mailing Address and Zip Code Sarah Stockman 1041 Matador Drive Se Albuquerque, NM 87123 | Name of Employer Information Requested | Date (month, day, year) 12/31/98 | Amount of Each Receipt this Period \$150.00 |
| | Occupation Information Requested | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | \$250.00 |
| E. Full Name, Mailing Address and Zip Code Mary Sundberg 931 W 31st Avenue Spokane, WA 99203 | Name of Employer None | Date (month, day, year) 12/31/98 | Amount of Each Receipt this Period \$75.00 |
| | Occupation Homemaker | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | \$275.00 |
| F. Full Name, Mailing Address and Zip Code G. Douglas Talbott, MD 1478 Leafview Road Decatur, GA 30033- | Name of Employer Talbot Recovery Campus | Date (month, day, year) 12/22/98 | Amount of Each Receipt this Period \$1000.00 |
| | Occupation Medical Director | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | \$1000.00 |
| G. Full Name, Mailing Address and Zip Code Betty Tannahill 8826 E 63rd Street Tulsa, OK 74133 | Name of Employer Information Requested | Date (month, day, year) 12/19/98 | Amount of Each Receipt this Period \$50.00 |
| | Occupation Information Requested | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | \$205.00 |

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| SUBTOTAL of Receipts This Page (optional) | \$2075.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In Full)
Barr-Congress

| | | | |
|---|--|--|---|
| A. Full Name, Mailing Address and Zip Code Paul Thiele P.O. Box 1056 Sandersville, GA 31082 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Thiele Kaolin Company | Date (month, day, year) 12/31/98 | Amount of Each Receipt this Period \$150.00 |
| | Occupation Executive | Aggregate Year-to-Date -> \$250.00 | |
| B. Full Name, Mailing Address and Zip Code Allen F. Tribble Jr 310 Elliott Street Center, TX 75935 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) 12/12/98 | Amount of Each Receipt this Period \$150.00 |
| | Occupation Information Requested | Aggregate Year-to-Date -> \$250.00 | |
| C. Full Name, Mailing Address and Zip Code Mary J. Valli 6029 Riverside Avenue Riverside, CA 92506 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer None | Date (month, day, year) 12/12/98 | Amount of Each Receipt this Period \$50.00 |
| | Occupation Retired | Aggregate Year-to-Date -> \$400.00 | |
| D. Full Name, Mailing Address and Zip Code Fred J. Visscher 2609 Harvest Drive Conyers, GA 30013- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer None | Date (month, day, year) 12/28/98 | Amount of Each Receipt this Period \$20.00 |
| | Occupation Retired | Aggregate Year-to-Date -> \$365.00 | |
| E. Full Name, Mailing Address and Zip Code Woodrow W. Wagner 200 Glenridge Road Rome, GA 30161 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer The American Lubricants | Date (month, day, year) 12/31/98 | Amount of Each Receipt this Period \$50.00 |
| | Occupation Marketing | Aggregate Year-to-Date -> \$235.00 | |
| F. Full Name, Mailing Address and Zip Code Mary M. Wallace 85 Bates Boulevard Orinda, CA 94563 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Information Requested | Date (month, day, year) 12/19/98 | Amount of Each Receipt this Period \$150.00 |
| | Occupation Information Requested | Aggregate Year-to-Date -> \$250.00 | |
| G. Full Name, Mailing Address and Zip Code Earl West 3107 Metz Drive Midland, TX 79705 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer None | Date (month, day, year) 12/31/98 | Amount of Each Receipt this Period \$50.00 |
| | Occupation Retired | Aggregate Year-to-Date -> \$250.00 | |

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| SUBTOTAL of Receipts This Page (optional) | \$620.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be 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)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Name of Employer Information Requested | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--|-------------------------|------------------------------------|
| Steven J. Witt 8121 Carr Court Arvada, CO 80005 | Occupation Information Requested | 12/19/98 | \$50.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | \$150.00 |
| Steven J. Witt 8121 Carr Court Arvada, CO 80005 | Occupation Information Requested | 12/28/98 | \$60.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | \$210.00 |
| Bradford P. Zimmerman 565 Cooper Road Loganville, GA 30249- | Nalco Chemical Company Occupation Sales | 12/28/98 | \$50.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | \$250.00 |
| | | / / | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | |
| | | / / | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | |
| | | / / | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | |
| | | / / | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | | |

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| SUBTOTAL of Receipts This Page (optional) | \$160.00 |
| TOTAL This Period (last page this line number only) | \$23387.44 |

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|--|-------------------------|------------------------------------|
| Capitol Hill Club 300 First Street, SE Washington, DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Refund of Overpayment Occupation | 12/27/98 | \$924.89 |
| Aggregate Year-to-Date -> | | \$924.89 | |
| B. Full Name, Mailing Address and Zip Code City of Carrollton P.O. Box 1949 Carrollton, GA 30117 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Refund of 1998 Sign Bond Occupation | 12/27/98 | \$500.00 |
| Aggregate Year-to-Date -> | | \$500.00 | |
| C. Full Name, Mailing Address and Zip Code City of Smyrna 2800 King Street Smyrna, GA 30080- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Return of 1998 Sign Bond Occupation | 12/27/98 | \$500.00 |
| Aggregate Year-to-Date -> | | \$500.00 | |
| D. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation | / / | Amount of Each Receipt this Period |
| Aggregate Year-to-Date -> | | | |
| E. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation | / / | Amount of Each Receipt this Period |
| Aggregate Year-to-Date -> | | | |
| F. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation | / / | Amount of Each Receipt this Period |
| Aggregate Year-to-Date -> | | | |
| G. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation | / / | Amount of Each Receipt this Period |
| Aggregate Year-to-Date -> | | | |

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| SUBTOTAL of Receipts This Page (optional) | \$1924.89 |
| TOTAL This Period (last page this line number only) | \$1924.89 |

99.004.203.2102

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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

NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Adrian Barr 4320 Revere Circle Marietta, GA 30062- | Supply Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/21/98 | \$23.40 |
| American Express P.O. Box 630001 Dallas, TX 75363- | Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/03/98 | \$261.19 |
| Andy Bush 1950 Barrett Lakes Blvd. #2028 Kennesaw, GA 30144- | Supply Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/21/98 | \$86.67 |
| Andy Bush 1950 Barrett Lakes Blvd. #2028 Kennesaw, GA 30144- | Reimb. - Telephone Hardware Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/08/98 | \$560.00 |
| Andy Bush 1950 Barrett Lakes Blvd. #2028 Kennesaw, GA 30144- | Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/25/98 | \$53.82 |
| Arico Systems 2853 Nutley Street Fairfax, VA 22031-1328 | Direct Mail Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/10/98 | \$252.04 |
| Atlanta Gas Light Co. Annex 89 Atlanta, GA 30389- | Utilities Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/21/98 | \$79.34 |

SUBTOTAL of Disbursements This Page (optional)

\$1316.46

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Atlanta Gas Light Co. Annex 89 Atlanta, GA 30389- | Utilities Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/01/98 | \$50.71 |
| Bank One Department 1045 Columbus, OH 43271- | December Discover Fees Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/31/98 | \$35.00 |
| Bank One Department 1045 Columbus, OH 43271- | November Analysis Settlement Charge Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/30/98 | \$725.58 |
| Bank One Department 1045 Columbus, OH 43271- | December Analysis Settlement Charge Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/31/98 | \$638.07 |
| Bank One Department 1045 Columbus, OH 43271- | November Discover Fees Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/30/98 | \$28.47 |
| Bank One Department 1045 Columbus, OH 43271- | December MC/Visa Fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/31/98 | \$350.00 |
| Bank One Department 1045 Columbus, OH 43271- | November American Express Fees Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/30/98 | \$49.75 |

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| SUBTOTAL of Disbursements This Page (optional) | \$1877.58 |
| TOTAL This Period (last page this line number only) | |

2025 RELEASE UNDER E.O. 14176

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Bank One Department 1045 Columbus, OH 43271- | November MC/Visa Fees Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/30/98 | \$852.75 |
| B. Full Name, Mailing Address and Zip Code BellSouth P.O. Box 740144 Atlanta, GA 30374-0144 | Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/03/98 | \$53.88 |
| C. Full Name, Mailing Address and Zip Code BellSouth P.O. Box 740144 Atlanta, GA 30374-0144 | Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/01/98 | \$20.19 |
| D. Full Name, Mailing Address and Zip Code BellSouth P.O. Box 740144 Atlanta, GA 30374-0144 | Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/18/98 | \$30.11 |
| E. Full Name, Mailing Address and Zip Code BellSouth P.O. Box 740144 Atlanta, GA 30374-0144 | Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/01/98 | \$975.76 |
| F. Full Name, Mailing Address and Zip Code BellSouth P.O. Box 740144 Atlanta, GA 30374-0144 | Work Order Deposit Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/25/98 | \$255.00 |
| G. Full Name, Mailing Address and Zip Code BellSouth P.O. Box 740144 Atlanta, GA 30374-0144 | Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/21/98 | \$630.91 |

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| SUBTOTAL of Disbursements This Page (optional) | \$2818.60 |
| TOTAL This Period (last page this line number only) | |

99-04-207-7105

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| BellSouth Mobility 5600 Glenridge Drive Suite G-502 Atlanta, GA 30342- | Cellular Telephone <i>whose phone?</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/21/98 | \$78.07 |
| BellSouth Mobility 5600 Glenridge Drive Suite G-502 Atlanta, GA 30342- | Cellular Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/21/98 | \$395.59 |
| BellSouth Mobility 5600 Glenridge Drive Suite G-502 Atlanta, GA 30342- | Cellular Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/01/98 | \$45.14 |
| Bob Barr 631 Concord Road Smyrna, GA 30082 | Meal Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/03/98 | \$53.16 |
| Bob Barr 631 Concord Road Smyrna, GA 30082 | See Below Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/21/98 | \$279.42 |
| Bob Barr 631 Concord Road Smyrna, GA 30082 | Reimb. - House Office Supply Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/21/98 | \$234.00 MEMO |
| Bob Barr 631 Concord Road Smyrna, GA 30082 | Meals Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/21/98 | \$45.42 MEMO |

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| SUBTOTAL of Disbursements This Page (optional) | \$851.38 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 5 OF 14
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Capital Compliance, Inc. P.O. Box 70753 Marietta, GA 30007- | Compliance Consulting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/11/98 | \$3325.00 |
| B. Full Name, Mailing Address and Zip Code Capitol Hill Club 300 First Street, SE Washington, DC 20003- | Purpose of Disbursement Meals Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/10/98 | \$27.71 |
| C. Full Name, Mailing Address and Zip Code Carithers Flowers P.O. Box 6529 Marietta, GA 30065- | Purpose of Disbursement Flowers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/10/98 | \$56.65 |
| D. Full Name, Mailing Address and Zip Code Kobb Galleria Center The Galleria Parkway Atlanta, GA 30339 | Purpose of Disbursement Reception Costs Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/01/98 | \$1408.88 |
| E. Full Name, Mailing Address and Zip Code Delta Airlines Hartsfield Atlanta Airport Atlanta, GA 30320- | Purpose of Disbursement Airfare Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/30/98 | \$146.00 |
| F. Full Name, Mailing Address and Zip Code Derek Barr 4320 Revere Circle Marietta, GA 30062- | Purpose of Disbursement Supply Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/21/98 | \$68.72 |
| G. Full Name, Mailing Address and Zip Code Federal Express P.O. Box 1140 Memphis, TN 38101- | Purpose of Disbursement Overnight Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/10/98 | \$68.50 |

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| SUBTOTAL of Disbursements This Page (optional) | \$5101.46 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use on schedules for each category of the Detailed Summary Page

PAGE 6 OF 14

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Federal Express P.O. Box 1140 Memphis, TN 38101- | Overnight Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/01/98 | \$73.50 |
| Fidelity National Bank P.O. Box 105363 Atlanta, GA 30348-5363 | Gift Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/28/98 | \$377.20 |
| Maralson County Chamber of Commerce 70 Hub Drive Waco, GA 30182- | 1999 Dues Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/10/98 | \$100.00 |
| Robert P. Herriott 2197 Lakeview Parkway Villa Rica, GA 30180-8078 | Christmas Card Postage Reimb. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/17/98 | \$1186.67 |
| InfoCision Management Corporation Attn: Jeff Carter 325 Springside Drive Akron, OH 44333- | Telemarketing Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/15/98 | \$18041.61 |
| InfoCision Management Corporation Attn: Jeff Carter 325 Springside Drive Akron, OH 44333- | Telemarketing Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/09/98 | \$19583.57 |
| Jeri Barr 631 Concord Road, SW Smyrna, GA 30081- | Transportation Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/03/98 | \$17.50 |

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| SUBTOTAL of Disbursements This Page (optional) | \$39380.05 |
| TOTAL This Period (last page this line number only) | |

2013 RELEASE UNDER E.O. 13526

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|--|-------------------------|---|
| Sue E. Lake 2216 Acworth Due West Road Kennesaw, GA 30152-3157 | Nametags & Decorations Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/08/98 | \$102.44 IN KIND |
| Leeta McDougald 21 Crestwood Drive Rome, GA 30165- | Gift Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/10/98 | \$100.00 |
| Leeta McDougald 21 Crestwood Drive Rome, GA 30165- | Lunch Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/01/98 | \$59.24 |
| Lipsett & Associates 407 Lee's Trace Marietta, GA 30064- | Media Consulting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/09/98 | \$1500.00 |
| M.R. Op 40 Powder Springs Street Marietta, GA 30064- | December Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/11/98 | \$495.00 |
| Marathon Communications P. O. Box 675157 Marietta, GA 30061- | Long Distance Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/01/98 | \$20.88 |
| Marietta Power P. O. Box 105384 Atlanta, GA 30348- | Utilities Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/01/98 | \$163.86 |

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| SUBTOTAL of Disbursements This Page (optional) | \$2441.42 |
| TOTAL This Period (last page this line number only) | |

2025 RELEASE UNDER E.O. 14176

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Mr. Matt Brady 1035 Juniper Street Apartment E Atlanta, GA 30309- | Postage Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/10/98 | \$32.00 |
| Mr. Matt Brady 1035 Juniper Street Apartment E Atlanta, GA 30309- | Supply Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/01/98 | \$13.49 |
| Mindspring 1430 West Peachtree Street, NW Suite 400 Atlanta, GA 30309- | Internet Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/21/98 | \$51.95 |
| Mindspring 1430 West Peachtree Street, NW Suite 400 Atlanta, GA 30309- | Web Domain Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/01/98 | \$103.90 |
| Page Net C/O Mellon Bank P.O. Box 530721 Atlanta, GA 30353- | Paging Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/10/98 | \$42.12 |
| Paula's Graphics & Business Services 402-B Newnan Street Carrollton, GA 30117- | Mailing Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/30/98 | \$1493.43 |
| Folk County Chamber of Commerce 604 Goodyear Street Pockmart, GA 30153- | 1999 Dues Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/10/98 | \$115.00 |

SUBTOTAL of Disbursements This Page (optional)

\$1851.89

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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| NAME OF COMMITTEE (In Full) Barr-Congress | | | |
|--|---|--|---|
| <p>A. Full Name, Mailing Address and Zip Code Process Posters, Inc. 1095 Huff Road, NW Atlanta, GA 30318-</p> | <p>Purpose of Disbursement Payment of Debt <i>See schedule D</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Date (month, day, year) 12/02/98</p> | <p>Amount of Each Disbursement This Period \$13044.00</p> |
| <p>B. Full Name, Mailing Address and Zip Code Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354-</p> | <p>Purpose of Disbursement See Below Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Date (month, day, year) 12/30/98</p> | <p>Amount of Each Disbursement This Period \$6489.31</p> |
| <p>C. Full Name, Mailing Address and Zip Code Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354-</p> | <p>Purpose of Disbursement Salary for Andy Bush Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Date (month, day, year) 12/30/98</p> | <p>Amount of Each Disbursement This Period \$2269.75 MEMO</p> |
| <p>D. Full Name, Mailing Address and Zip Code Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354-</p> | <p>Purpose of Disbursement Salary for Derek Barr Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Date (month, day, year) 12/30/98</p> | <p>Amount of Each Disbursement This Period \$92.31 MEMO</p> |
| <p>E. Full Name, Mailing Address and Zip Code Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354-</p> | <p>Purpose of Disbursement Salary for Leeta McDougald Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Date (month, day, year) 12/30/98</p> | <p>Amount of Each Disbursement This Period \$1047.42 MEMO</p> |
| <p>F. Full Name, Mailing Address and Zip Code Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354-</p> | <p>Purpose of Disbursement Unemployment Withholding Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Date (month, day, year) 12/30/98</p> | <p>Amount of Each Disbursement This Period \$3.41 MEMO</p> |
| <p>G. Full Name, Mailing Address and Zip Code Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354-</p> | <p>Purpose of Disbursement State Tax Withholding Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Date (month, day, year) 12/30/98</p> | <p>Amount of Each Disbursement This Period \$305.57 MEMO</p> |

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| <p>SUBTOTAL of Disbursements This Page (optional)</p> | <p>\$19533.31</p> |
| <p>TOTAL This Period (last page this line number only)</p> | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Federal Tax Withholding Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/30/98 | \$2026.20 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Salary for Matt Brady Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/30/98 | \$652.34 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Salary for Adrian Barr Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/30/98 | \$92.31 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | See Below Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/11/98 | \$7660.35 |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Federal Tax Withholding Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/11/98 | \$2084.74 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Salary for Mike Gravley Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/11/98 | \$977.14 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Unemployment Withholding Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/11/98 | \$22.59 MEMO |

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| SUBTOTAL of Disbursements This Page (optional) | \$7660.35 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | State Tax Withholding Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/11/98 | \$329.43 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Salary for Adrian Barr Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/11/98 | \$501.14 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Salary for Leeta McDougald Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/11/98 | \$1047.42 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Salary for Andy Bush Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/11/98 | \$1426.82 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Salary for Matt Brady Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/11/98 | \$769.93 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Salary for Derek Barr Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/11/98 | \$501.14 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | See Below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/24/98 | \$6342.37 |

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| SUBTOTAL of Disbursements This Page (optional) | \$6342.37 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Salary for Matt Brady Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/24/98 | \$710.47 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Salary for Adrian Barr Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/24/98 | \$257.87 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Salary for Andy Bush Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/24/98 | \$1426.81 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Salary for Leeta McDougald Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/24/98 | \$1047.43 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Salary for Mike Gravley Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/24/98 | \$652.34 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Salary for Derek Barr Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/24/98 | \$257.87 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | State Tax Withholding Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/24/98 | \$254.99 MEMO |

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

99-04-395-40-66

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Unemployment Withholding Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/24/98 | \$14.60 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Federal Tax Withholding Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/24/98 | \$1669.99 MEMO |
| Quality Data Processing 100 Hartsfield Centre Parkway Suite 520 Atlanta, GA 30354- | Processing Fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/24/98 | \$50.00 MEMO |
| Pick Shelby 1119 Englside Avenue Mc Lean, VA 22101- | Political Consulting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/10/98 | \$1500.00 |
| Shamrock Printing, Inc. 1211 JVL Industrial Park Drive Marietta, GA 30066- | Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/10/98 | \$251.08 |
| Robert D. Spratlin 240 Cherokee Street, NE Suite 301 Marietta, GA 30060-1612 | Rent - Oct.-Dec. partial; Jan. 1999 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/08/98 | \$750.00 |
| Suntrust Bank 47 Whitlock Avenue Marietta, GA 30064- | November Service Fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 11/30/98 | \$438.68 |

99-04203-315

| | |
|--|-----------|
| SUBTOTAL of Disbursements This Page (optional) | \$2939.76 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|--|-------------------------|---|
| Suntrust Bank 47 Whitlock Avenue Marietta, GA 30064- | December Service Fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/30/98 | \$147.36 |
| B. Full Name, Mailing Address and Zip Code The Flag Company 3094 Loring Road Pennesaw, GA 30152- | Purpose of Disbursement US & GA Flag Purchase Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/30/98 | \$330.54 |
| C. Full Name, Mailing Address and Zip Code US Postmaster Marietta, GA 30067 | Purpose of Disbursement Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/04/98 | \$448.00 |
| D. Full Name, Mailing Address and Zip Code West Georgia Mailing P.O. Box 65 Carrollton, GA 30117- | Purpose of Disbursement Christmas Card Mailing Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 12/17/98 | \$380.46 |
| E. Full Name, Mailing Address and Zip Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | / / | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and Zip Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | / / | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and Zip Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | / / | Amount of Each Disbursement This Period |

| | |
|--|------------|
| SUBTOTAL of Disbursements This Page (optional) | \$1306.36 |
| TOTAL This Period (last page this line number only) | \$93420.99 |

DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedules for each numbered line)

| NAME OF COMMITTEE (In Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|--|---|-----------------------------|---------------------|---|
| Barr-Congress | | | | |
| Full Name, Mailing Address and Zip Code Process Posters, Inc. 1095 Huff Road, NW Atlanta, GA 30318- | \$13044.40 | | \$13,044.40 | ϕ \$13044.40 |
| Nature of Debt (purpose) Printing | | | | |

See page 9 of line 17.

| | |
|---|------------------------------|
| 1) SUBTOTAL This Period This Page (optional) | |
| 2) TOTAL This Period (last page this line number only) | \$13044.40 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | \$13044.40 ϕ |

217E 36E 40 66

\$946.55

BOB BARR

Period 10/1/98 thru 10/14/98

| | | | |
|---------------------|---|----------|---------|
| John Clark | ? | 10/7/98 | \$ 200. |
| Ray Guanter | ? | 10/5/98 | \$ 50. |
| " " | ? | 10/14/98 | \$ 50. |
| M. Virginia Schoepe | ? | 10/12/98 | \$ 250. |
| Edmund Zimmerman | ? | 10/5/98 | \$ 250. |

Disbursements

A Express travel reim 10/1/98
 1. for whom \$146.55
 2. provide proper disclosure

* Capital Compliance is a legitimate

Campaign Consulting Company.

* Hipsett & Assoc.

is an legitimate media consulting company.

FILED OCT 14 1998

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

10/22
17p.

1. NAME OF COMMITTEE (in full) (Summary Page)

| | | |
|--|---|--|
| Barr-Congress | | 2. FEC IDENTIFICATION NUMBER C00300640 |
| ADDRESS (number and street) P.O. Box 4323 | <input type="checkbox"/> Check if different than previously reported. | ELECTION DIVISION |
| CITY, STATE and ZIP CODE Marietta, GA 30061 | STATE/DISTRICT GA 7 | 3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |

4. TYPE OF REPORT

| | |
|---|---|
| <input type="checkbox"/> April 15 Quarterly Report | <input checked="" type="checkbox"/> Twelfth day report preceding <u>General</u> (Type of Election) |
| <input type="checkbox"/> July 15 Quarterly Report | election on <u>11/03/98</u> in the State of <u>GA</u> |
| <input type="checkbox"/> October 15 Quarterly Report | <input type="checkbox"/> Thirtieth day report following the General Election on _____ |
| <input type="checkbox"/> January 31 Year End Report | _____ in the State of _____ |
| <input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) | <input type="checkbox"/> Termination Report |

This report contains activity for

| | | | |
|---|--|---|--|
| <input type="checkbox"/> Primary Election | <input checked="" type="checkbox"/> General Election | <input type="checkbox"/> Special Election | <input type="checkbox"/> Runoff Election |
|---|--|---|--|

SUMMARY

| 5. Covering Period <u>10/01/98</u> through <u>10/14/98</u> | COLUMN A This Period | COLUMN B Calendar Year-to-date |
|--|-------------------------|-----------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)) | \$87128.10 | \$745656.21 |
| (b) Total Contribution Refunds (From Line 20(d)) | \$0.00 | \$530.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) | \$87128.10 | \$745126.21 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | \$18155.05 | \$607951.00 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | \$0.00 | \$8161.19 |
| (c) Net Operating Expenditures (Subtract Line 7(b) from 7(a)) | \$18155.05 | \$599789.81 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | \$230051.79 | |
| 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) | \$13044.40 | |

For further information:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

| | |
|--|-------------------|
| Type or Print Name of Treasurer Charles Black | |
| Signature of Treasurer | Date: 10-14-98 |

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

| | | | | | | | |
|--|--|--|--|--|--|--|--|
| | | | | | | | |
|--|--|--|--|--|--|--|--|

STATE OF GEORGIA

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

| Name of Committee (in full) Barr-Congress | Report Covering the Period: From: 10/01/98 To: 10/14/98 | |
|---|--|-----------------------------------|
| I. RECEIPTS | Column A Total This Period | Column B Calendar Year-To-Date |
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (Use Schedule A) | \$12165.00 | |
| (ii) Unitemized | \$63463.10 | |
| (iii) Total of contributions from individual | \$75628.10 | \$629052.41 |
| (b) Political Party Committees | \$0.00 | \$0.00 |
| (c) Other Political Committees (such as PACs) | \$11500.00 | \$116603.80 |
| (d) The Candidate | \$0.00 | \$0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d)) | \$87128.10 | \$745656.21 |
| 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 13(a) and (b)) | \$0.00 | \$0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | \$0.00 | \$8161.19 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | \$0.00 | \$1958.87 |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) | \$87128.10 | \$755776.27 |
| II. DISBURSEMENTS | | |
| 17. OPERATING EXPENDITURES | \$18155.05 | \$607951.00 |
| 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 19(a) and (b)) | \$0.00 | \$0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | \$0.00 | \$530.00 |
| (b) Political Party Committees | \$0.00 | \$0.00 |
| (c) Other Political Committees (such as PACs) | \$0.00 | \$0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) | \$0.00 | \$530.00 |
| 21. OTHER DISBURSEMENTS | \$2500.00 | \$18250.00 |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) | \$20655.05 | \$626731.00 |
| III. CASH SUMMARY | | |
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | | \$163578.74 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16) | | \$87128.10 |
| 25. SUBTOTAL (add Line 23 and Line 24) | | \$250706.84 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) | | \$20655.05 |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) | | \$230051.79 |

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|----------------------------|-------------------------|------------------------------------|
| William H. Alexander 325 E. 44th Street Savannah, GA 31405- | None | 10/13/98 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Retired | | |
| | Aggregate Year-to-Date -> | \$450.00 | |
| Barbara D. Anderson 2380 Marshall Drive Austell, GA 30001- | Malbon, Inc. | 10/08/98 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Officer | | |
| | Aggregate Year-to-Date -> | \$1500.00 | |
| Gordon T. Austin 819 Dixie Street Carrollton, GA 30117-4415 | Self | 10/14/98 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Oral Surgeon | | |
| | Aggregate Year-to-Date -> | \$1000.00 | |
| Phyllis Beckmann 135 E. Fremont Elmhurst, IL 60126- | None | 10/09/98 | \$25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Retired | | |
| | Aggregate Year-to-Date -> | \$525.00 | |
| Anna Lee Bolton 81 Churchview Estates Farmville, VA 23901- | None | 10/05/98 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Retired | | |
| | Aggregate Year-to-Date -> | \$130.00 | |
| Anna Lee Bolton 81 Churchview Estates Farmville, VA 23901- | None | 10/14/98 | \$80.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Retired | | |
| | Aggregate Year-to-Date -> | \$210.00 | |
| H.G. Brown 628 Old Town Road Villa Rica, GA 30180-1219 | Gene Hosiery | 10/14/98 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Owner | | |
| | Aggregate Year-to-Date -> | \$300.00 | |

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional) | \$1205.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule 5, for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Barr-Congress

| | | | |
|---|---|--|--|
| <p>A. Full Name, Mailing Address and Zip Code Tom Watson Brown 2859 Paces Ferry Road Suite 2150 Atlanta, GA 30339-5701</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Self</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -> \$1100.00</p> | <p>Date (month, day, year) 10/05/98</p> | <p>Amount of Each Receipt this Period \$1000.00</p> |
| <p>B. Full Name, Mailing Address and Zip Code L. E. Camp 2236 S. Van Wert Road Villa Rica, GA 30180-9222</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Quality Tile & Marble Inc.</p> <p>Occupation President</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Date (month, day, year) 10/14/98</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>C. Full Name, Mailing Address and Zip Code John Clark 301 Lock Lane Richmond, VA 23226</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Aggregate Year-to-Date -> \$300.00</p> | <p>Date (month, day, year) 10/07/98</p> | <p>Amount of Each Receipt this Period \$200.00</p> |
| <p>D. Full Name, Mailing Address and Zip Code Clint V. Cox P.O. Box 702280 Tulsa, OK 74170-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Warehouse Market, Inc.</p> <p>Occupation Executive</p> <p>Aggregate Year-to-Date -> \$500.00</p> | <p>Date (month, day, year) 10/13/98</p> | <p>Amount of Each Receipt this Period \$100.00</p> |
| <p>E. Full Name, Mailing Address and Zip Code Norma Dalrymple 9322 San Fernando Way Dallas, TX 75218-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Date (month, day, year) 10/09/98</p> | <p>Amount of Each Receipt this Period \$50.00</p> |
| <p>F. Full Name, Mailing Address and Zip Code Norma Dalrymple 9322 San Fernando Way Dallas, TX 75218-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$285.00</p> | <p>Date (month, day, year) 10/13/98</p> | <p>Amount of Each Receipt this Period \$35.00</p> |
| <p>G. Full Name, Mailing Address and Zip Code Norma Dalrymple 9322 San Fernando Way Dallas, TX 75218-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$385.00</p> | <p>Date (month, day, year) 10/14/98</p> | <p>Amount of Each Receipt this Period \$100.00</p> |

| | |
|---|------------------|
| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$1735.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule A for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Barr-Congress

| | | | |
|--|---|--|---|
| <p>A. Full Name, Mailing Address and Zip Code John Daly 130 Estuary Circle Vero Beach, FL 32963-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Retired</p> | <p>Date (month, day, year) 10/05/98</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>B. Full Name, Mailing Address and Zip Code Charles F. De Ganahl 85 Wapoo Trail Chatham, MA 02633</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Retired</p> | <p>Date (month, day, year) 10/09/98</p> <p>Aggregate Year-to-Date -> \$400.00</p> | <p>Amount of Each Receipt this Period \$200.00</p> |
| <p>C. Full Name, Mailing Address and Zip Code Lloyd George 115 N. Center Street Suite 200 Northville, MI 48167-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Lloyd George & Associates</p> <p>Occupation Executive</p> | <p>Date (month, day, year) 10/05/98</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>D. Full Name, Mailing Address and Zip Code June Goble 8131 Banks Mill Road Douglasville, GA 30135-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Homemaker</p> | <p>Date (month, day, year) 10/01/98</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>E. Full Name, Mailing Address and Zip Code Kay Gunter 2334 Castleridge Court Tucker, GA 30084-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Best Efforts Satisfied</p> <p>Occupation Best Efforts Satisfied</p> | <p>Date (month, day, year) 10/05/98</p> <p>Aggregate Year-to-Date -> \$200.00</p> | <p>Amount of Each Receipt this Period \$50.00</p> |
| <p>F. Full Name, Mailing Address and Zip Code Kay Gunter 2334 Castleridge Court Tucker, GA 30084-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Best Efforts Satisfied</p> <p>Occupation Best Efforts Satisfied</p> | <p>Date (month, day, year) 10/14/98</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Amount of Each Receipt this Period \$50.00</p> |
| <p>G. Full Name, Mailing Address and Zip Code Muriel Heim 109 Sycamore Lane Fairfield, CT 06430</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Homemaker</p> | <p>Date (month, day, year) 10/08/98</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Amount of Each Receipt this Period \$75.00</p> |

SUBTOTAL of Receipts This Page (optional)

\$1125.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|-------------------------|-------------------------------------|------------------------------------|
| Robert P. Hodges 5185 Long Island Drive, NW Atlanta, GA 30327-4907 | None | 10/14/98 | \$150.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Retired | Aggregate Year-to-Date -> \$300.00 | |
| Darrell Holman 85 Palm Hill Lane Duarte, CA 91010 | None | 10/09/98 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Retired | Aggregate Year-to-Date -> \$450.00 | |
| Darrell Holman 85 Palm Hill Lane Duarte, CA 91010 | None | 10/13/98 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Retired | Aggregate Year-to-Date -> \$650.00 | |
| Jere Hubbard 1 Lazywood Lane Midland, TX 79705 | Self | 10/12/98 | \$35.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Oil & Gas | Aggregate Year-to-Date -> \$135.00 | |
| Jere Hubbard 1 Lazywood Lane Midland, TX 79705 | Self | 10/14/98 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Oil & Gas | Aggregate Year-to-Date -> \$235.00 | |
| William M. Huffman, Sr. P.O. Box 148 Rome, GA 30162- | Huffman & Associates | 10/12/98 | \$1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Ceo | Aggregate Year-to-Date -> \$2000.00 | |
| Jacqueline I. Kicos 1828 North K Street Lake Worth, FL 33460- | None | 10/02/98 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Retired | Aggregate Year-to-Date -> \$335.00 | |

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|--|-----------|
| SUBTOTAL of Receipts This Page (optional) | \$1985.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be 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)
Barr-Congress

| | | | |
|--|--|---|--|
| A. Full Name, Mailing Address and Zip Code Robert King 105 E. University Street Waxahachie, TX 75165 | Name of Employer Tyler Refrigeration | Date (month, day, year) 10/13/98 | Amount of Each Receipt this Period \$20.00 |
| | Occupation Engineering Manager | Aggregate Year-to-Date -> \$220.00 | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| B. Full Name, Mailing Address and Zip Code Thomas J. Large P.O. Box 605 Villa Rica, GA 30180-0605 | Name of Employer Plaza Discount Pharmacy | Date (month, day, year) 10/13/98 | Amount of Each Receipt this Period \$250.00 |
| | Occupation Pharmacist | Aggregate Year-to-Date -> \$250.00 | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| C. Full Name, Mailing Address and Zip Code James E. Marler 30 Lindley Avenue, NW Marietta, GA 30064-2184 | Name of Employer D & R Leasing Company | Date (month, day, year) 10/14/98 | Amount of Each Receipt this Period \$150.00 |
| | Occupation Owner | Aggregate Year-to-Date -> \$750.00 | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| D. Full Name, Mailing Address and Zip Code Henry F. McCamish, Jr. 3060 Peachtree Road, NW 19th Floor Atlanta, GA 30305-2234 | Name of Employer The McCamish Group | Date (month, day, year) 10/08/98 | Amount of Each Receipt this Period \$1000.00 |
| | Occupation Ceo | Aggregate Year-to-Date -> \$2000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| E. Full Name, Mailing Address and Zip Code Beatrice McHan 472 Saint Annes Road, NW Marietta, GA 30064- | Name of Employer None | Date (month, day, year) 10/06/98 | Amount of Each Receipt this Period \$100.00 |
| | Occupation Retired | Reatribution from G. McHan | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> \$100.00 | | MEMO |
| F. Full Name, Mailing Address and Zip Code Gordon McHan 472 Saint Annes Road, NW Marietta, GA 30064 | Name of Employer None | Date (month, day, year) 08/15/98 | Amount of Each Receipt this Period \$100.00 |
| | Occupation Retired | Supporting Info from Prev. Period | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> \$1100.00 | | MEMO |
| G. Full Name, Mailing Address and Zip Code Gordon McHan 472 Saint Annes Road, NW Marietta, GA 30064 | Name of Employer None | Date (month, day, year) 10/06/98 | Amount of Each Receipt this Period \$-100.00 |
| | Occupation Retired | Reatribution to Bea McHan | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> \$1000.00 | | MEMO |

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| SUBTOTAL of Receipts This Page (optional) | \$1420.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule A for each category of the Detailed Summary Page

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

NAME OF COMMITTEE (In Full)
Barr-Congress

| | | | |
|--|--|--|---|
| <p>A. Full Name, Mailing Address and Zip Code Hazel Norman 3011 Sheddan Drive Columbia, TN 38401-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$450.00</p> | <p>Date (month, day, year) 10/13/98</p> | <p>Amount of Each Receipt this Period \$200.00</p> |
| <p>B. Full Name, Mailing Address and Zip Code Dennis Peteet, Jr. 808 Lullwater Road, NE Atlanta, GA 30307-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$300.00</p> | <p>Date (month, day, year) 10/07/98</p> | <p>Amount of Each Receipt this Period \$200.00</p> |
| <p>C. Full Name, Mailing Address and Zip Code Lucien Phillips 1945 Forest Green Drive Atlanta, GA 30329</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$300.00</p> | <p>Date (month, day, year) 10/14/98</p> | <p>Amount of Each Receipt this Period \$100.00</p> |
| <p>D. Full Name, Mailing Address and Zip Code Andrew B. Pritchard P. O. Box 898 Madison, GA 30650-0898</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$350.00</p> | <p>Date (month, day, year) 10/14/98</p> | <p>Amount of Each Receipt this Period \$100.00</p> |
| <p>E. Full Name, Mailing Address and Zip Code M. Virginia Schoepe 1620 N. Raymond Avenue Fullerton, CA 92831-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Date (month, day, year) 10/12/98</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>F. Full Name, Mailing Address and Zip Code Baker A. Smith 3360 E. Terrell Branch Court Marietta, GA 30067-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Morris-Anderson & Assoc.</p> <p>Occupation Business Consultant</p> <p>Aggregate Year-to-Date -> \$350.00</p> | <p>Date (month, day, year) 10/14/98</p> | <p>Amount of Each Receipt this Period \$100.00</p> |
| <p>G. Full Name, Mailing Address and Zip Code Vicki Smith 3480 Pine Grove Drive Douglasville, GA 30135-2662</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Self</p> <p>Occupation Insurance</p> <p>Aggregate Year-to-Date -> \$600.00</p> | <p>Date (month, day, year) 10/08/98</p> | <p>Amount of Each Receipt this Period \$100.00</p> |

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| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$1050.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | |

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule A for each category of the Detailed Summary Page

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

NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---------------------------|-------------------------|------------------------------------|
| John W. Spears Jr. 650 Miami Circle, NE Suite 5 Atlanta, GA 30324- | Process Posters, Inc. | 10/12/98 | \$20.00 |
| Occupation Owner | | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$160.00 | |
| John W. Spears Jr. 650 Miami Circle, NE Suite 5 Atlanta, GA 30324- | Process Posters, Inc. | 10/14/98 | \$100.00 |
| Occupation Owner | | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$260.00 | |
| Ralph Stephens 1685 Fernald Point Lane Santa Barbara, CA 93109- | A.E., Inc. | 10/13/98 | \$500.00 |
| Occupation Executive | | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$500.00 | |
| Frank Turberville, Jr. P.O. Box 246 Milton, NC 27305- | None | 10/05/98 | \$50.00 |
| Occupation Retired | | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$170.00 | |
| Frank Turberville, Jr. P.O. Box 246 Milton, NC 27305- | None | 10/14/98 | \$100.00 |
| Occupation Retired | | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$270.00 | |
| Fred J. Visscher 2609 Harvest Drive Conyers, GA 30013- | None | 10/13/98 | \$20.00 |
| Occupation Retired | | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$295.00 | |
| T. K. Wang 7101 Concourse Parkway Douglasville, GA 30134-2566 | Long Valley, Inc. | 10/05/98 | \$1000.00 |
| Occupation Owner | | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date -> | \$1000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | \$1790.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be 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)
Barr-Congress

| | | | |
|--|---|---|---|
| <p>A. Full Name, Mailing Address and Zip Code Craig Weil 3976 Tuxedo Road, NW Atlanta, GA 30342-4047</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Orthopedic & Sports Medicine Occupation Physician</p> <p>Aggregate Year-to-Date -> \$1000.00</p> | <p>Date (month, day, year) 10/14/98</p> | <p>Amount of Each Receipt this Period \$1000.00</p> |
| <p>B. Full Name, Mailing Address and Zip Code Sol West III 8412 Lee Trevino Drive Tucson, AZ 85742-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None Occupation Investor</p> <p>Aggregate Year-to-Date -> \$500.00</p> | <p>Date (month, day, year) 10/09/98</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>C. Full Name, Mailing Address and Zip Code Murdock Williams 530 Flat Rock Road, SW Rome, GA 30161</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer None Occupation Retired</p> <p>Aggregate Year-to-Date -> \$305.00</p> | <p>Date (month, day, year) 10/14/98</p> | <p>Amount of Each Receipt this Period \$305.00</p> |
| <p>D. Full Name, Mailing Address and Zip Code Edmund Zimmerman 630 Milam Street Columbus, TX 78934-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Information Requested Occupation Information Requested</p> <p>Aggregate Year-to-Date -> \$250.00</p> | <p>Date (month, day, year) 10/05/98</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>E. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -></p> | <p>Date (month, day, year) / /</p> | <p>Amount of Each Receipt this Period</p> |
| <p>F. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -></p> | <p>Date (month, day, year) / /</p> | <p>Amount of Each Receipt this Period</p> |
| <p>G. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -></p> | <p>Date (month, day, year) / /</p> | <p>Amount of Each Receipt this Period</p> |

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| SUBTOTAL of Receipts This Page (optional) | \$1855.00 |
| TOTAL This Period (last page this line number only) | \$12165.00 |

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule A for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|-----------------------------------|-------------------------|------------------------------------|
| American Medical PAC Attn: Kevin Walker 1101 Vermont Avenue, NW Washington, DC 20005-3521 | | 10/01/98 | \$5000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | | |
| | Aggregate Year-to-Date -> | | \$9000.00 |
| B. Full Name, Mailing Address and Zip Code BellSouth Telecommunications PAC Attn: Tom M. Alexander 400 Chastain Center Blvd. Kennesaw, GA 30144- | | 10/12/98 | \$4000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | | |
| | Aggregate Year-to-Date -> | | \$6000.00 |
| C. Full Name, Mailing Address and Zip Code Equifax PAC Attn: John A. Ford 1600 Peachtree Street, NW Atlanta, GA 30309 | | 10/02/98 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | | |
| | Aggregate Year-to-Date -> | | \$500.00 |
| D. Full Name, Mailing Address and Zip Code FirstPlus Financial PAC 1600 Victory Drive Dallas, TX 75235- | | 10/09/98 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | | |
| | Aggregate Year-to-Date -> | | \$500.00 |
| E. Full Name, Mailing Address and Zip Code Goodyear Good Government Fund Attn: Tedd Lingo 1144 E. Market Street Akron, OH 44316-1000 | | 10/09/98 | \$1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | | |
| | Aggregate Year-to-Date -> | | \$1500.00 |
| F. Full Name, Mailing Address and Zip Code Nabisco PAC Attn: Henry Sandbach 7 Campus Drive Parsippany, NJ 07054-4407 | | 10/08/98 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | | |
| | Aggregate Year-to-Date -> | | \$1000.00 |
| G. Full Name, Mailing Address and Zip Code RJR Nabisco PAC Attn: John Fish 1455 Pennsylvania Avenue, NW Washington, DC 20004- | | 08/24/98 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | | |
| | Aggregate Year-to-Date -> | | \$500.00 |
| | Supporting Info from Prev. Period | | MEMO |

SUBTOTAL of Receipts This Page (optional)

\$11500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---------------------------|-------------------------|------------------------------------|
| RJR Nabisco PAC Attn: John Fish 1455 Pennsylvania Avenue, NW Washington, DC 20004- | | 10/08/98 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | Redesignation of | |
| | | 8/24/98. | |
| | Aggregate Year-to-Date -> | | \$500.00 MEMO |
| B. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | / / | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | | |
| | Aggregate Year-to-Date -> | | |
| C. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | / / | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | | |
| | Aggregate Year-to-Date -> | | |
| D. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | / / | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | | |
| | Aggregate Year-to-Date -> | | |
| E. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | / / | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | | |
| | Aggregate Year-to-Date -> | | |
| F. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | / / | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | | |
| | Aggregate Year-to-Date -> | | |
| G. Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | / / | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation | | |
| | Aggregate Year-to-Date -> | | |

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| SUBTOTAL of Receipts This Page (optional) | |
| TOTAL This Period (last page this line number only) | \$11500.00 |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

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

NAME OF COMMITTEE (in Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| American Express P.O. Box 630001 Dallas, TX 75363- | Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/01/98 | \$146.55 |
| B&B Designs & Signs 39 Public Square Cartersville, GA 30120 | T-Shirts Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/07/98 | \$34.78 |
| Capital Compliance, Inc. 1810 Annwicks Drive Marietta, GA 30062- | Compliance Consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/02/98 | \$3325.00 |
| City of Smyrna 2800 King Street Smyrna, GA 30080- | 1998 Sign Bond Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/12/98 | \$500.00 |
| Douglas County Planning & Zoning Dept. 6745 Broad Street Douglasville, GA 30134- | 1998 Sign Bond Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/07/98 | \$500.00 |
| In-Focus Productions 3502 Ray Lee Road Villa Rica, GA 30180- | Photographic Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/07/98 | \$256.27 |
| InfoCision Management Corporation Attn: Jeff Carter 325 Springside Drive Akron, OH 44333- | Telemarketing Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/09/98 | \$4773.24 |

SUBTOTAL of Disbursements This Page (optional)

\$9535.84

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Jane Talley Catering P.O. Box 443 Douglasville, GA 30133- | Catering Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/03/98 | \$1200.00 |
| Lipsett & Associates 407 Lee's Trace Marietta, GA 30064- | Media Consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/01/98 | \$1000.00 |
| Office Depot 119 Cobb Parkway North Marietta, GA 30062 | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/03/98 | \$379.68 |
| Paula's Graphics & Business Services 402-B Newnan Street Carrollton, GA 30117- | Printing & Mailing Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/13/98 | \$1289.93 |
| The Tax Office 1005 Turner McCall Blvd. Rome, GA 30161- | Rome GOP HDQT. Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/01/98 | \$500.00 |
| Linda Turner 8608 Ale Lane Villa Rica, GA 30180-3059 | Reimb.-gas, photos, candy, plant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/02/98 | \$282.76 |
| Linda Turner 8608 Ale Lane Villa Rica, GA 30180-3059 | Event Coordination Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/02/98 | \$500.00 |

SUBTOTAL of Disbursements This Page (optional) \$5152.37

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate Schedule B for each category of the Detailed Summary Page

PAGE 3 OF 3

FOR LINE NUMBER 17

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)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| US Postmaster 257 Lawrence Street Marietta, GA 30064- | Bulk Mail Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/12/98 | \$1358.91 |
| B. Full Name, Mailing Address and Zip Code US Postmaster 257 Lawrence Street Marietta, GA 30064- | Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/07/98 | \$960.00 |
| C. Full Name, Mailing Address and Zip Code US Postmaster 257 Lawrence Street Marietta, GA 30064- | Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/01/98 | \$480.00 |
| D. Full Name, Mailing Address and Zip Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | / / | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and Zip Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | / / | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and Zip Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | / / | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and Zip Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | / / | Amount of Each Disbursement This Period |

| | |
|--|------------|
| SUBTOTAL of Disbursements This Page (optional) | \$2798.91 |
| TOTAL This Period (last page this line number only) | \$17487.12 |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate Schedule B for each category of the Detailed Summary Page

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

NAME OF COMMITTEE (In Full)
Barr-Congress

| A. Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|--|-------------------------|---|
| Joe McCormick for Congress 506 N. Slappy Blvd. Albany, GA 31702- | \$1,000 '98 P. Debt; \$1,000 '98 Gen. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/03/98 | \$2000.00 |
| B. Full Name, Mailing Address and Zip Code New Mexicans for Redmond 1640 16th St. Los Alamos, NM 87544- | Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/13/98 | \$500.00 |

| | |
|--|-----------|
| SUBTOTAL of Disbursements This Page (optional) | \$2500.00 |
| TOTAL This Period (last page this line number only) | \$2500.00 |

DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedules
for each numbered line)

| NAME OF COMMITTEE (In Full) Barr-Congress | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|--|---|-----------------------------------|---------------------------|---|
| Full Name, Mailing Address and Zip Code Process Posters, Inc. 1095 Huff Road, NW Atlanta, GA 30318- | \$13044.40 | | | \$13044.40 |
| Nature of Debt (Purpose) Printing | | | | |

99.04.393.313E

| | |
|--|------------|
| 1) SUBTOTAL This Period This Page (optional) | |
| 2) TOTAL This Period (last page this line number only) | \$13044.40 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last Page only) | \$13044.40 |

\$4624.

BARR
Period 7/2/98 thru 9/30/98

Corim - \$374.50

P.O. Box 359 is this a loan?

gap fl. 32201
10/1/98 thru 10/14/98

Corim \$374.50

12/31/93 received -

PAC

Electrical Construction PAC

L addn. missing 9/22/94 \$1,000.

Period 1-1-96 - 3-31-96 Amended

Villa S. Hizer ? 3/26/96 \$500.

NOT sufficient to list small Business owner
& self employed

Robert H. Hogg, III same ? 3/26/96 \$500.

Deek A. Jones Same 1-18/96 \$1,000

Randall F. Rowig same 1/12/96 \$500.

Philip M. Shou Same 3/30/96 \$500.

99.04.393.3136

Cheryl J. Steed

3/5/96

\$250.

same

99.04.393.3437

SCHEDULE A ITEMIZED RECEIPTS

Amended 1-1-96 - 3/31/96

Contributions from Individuals/Persons Other than Political Committees

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

Page 27 of 59
FOR LINE NUMBER 11(a)(1)

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

NAME OF COMMITTEE (In Full)

> BOB BARR - CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| VILLA S. HIZER 10 JEFFERSON DRIVE ROME GA 30185 | SELF-EMPLOYED Occupation SMALL BUSINESS OWNE | 03/26/1996 | \$500.00 |
| Recpt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other | <input type="checkbox"/> General Aggregate Year-to-Date > \$ | \$500.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| ROBERT H. HOGG, III 755 JEFFERSON STREET, NW ATLANTA GA 30377 | SELF-EMPLOYED Occupation SMALL BUSINESS OWNE | 03/26/1996 | \$500.00 |
| Recpt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other | <input type="checkbox"/> General Aggregate Year-to-Date > \$ | \$500.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| ELMER HOGUE 6233 QUEEN'S GAP ROAD BLAIRSVILLE GA 30512 | RETIRE Occupation RETIRE | 03/13/1996 | \$1,000.00 |
| Recpt For: <input type="checkbox"/> Primary <input type="checkbox"/> Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | \$1,000.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| JOHN S. HOLLE 881 PINEY WOODS DRIVE LAGRANGE GA 30240 | FIRST FEDERAL SAVINGS BANK OF LAGRANGE Occupation CHAIRMAN/CEO | 02/12/1996 | \$100.00 |
| Recpt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other | <input type="checkbox"/> General Aggregate Year-to-Date > ? | \$100.00 | |

RECEIVED
JUN 03 1996

SECRETARY OF STATE

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Amended 1-1-96 - 3/31/96

Contributions from Individuals/Persons Other than Political Committees

| | |
|---|--------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | Page 30 of 59 |
| | FOR LINE NUMBER 11(a)(1) |

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NAME OF COMMITTEE (in Full)
 > BOB BARR - CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| HUBERT JOHNSON POST OFFICE BOX 885 MABLETON GA 30059 | JOHNSON DRILLING CO. Occupation CONSTRUCTION | 03/30/1998 | \$50.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other | <input type="checkbox"/> General Aggregate Year-to-Date > \$ | \$450.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| HUBERT JOHNSON POST OFFICE BOX 885 MABLETON GA 30059 | JOHNSON DRILLING CO. Occupation CONSTRUCTION | 02/28/1998 | \$400.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other | <input type="checkbox"/> General Aggregate Year-to-Date > \$ | \$450.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| DEREK N. JONES 5133 ALDER LANE POWDER SPRINGS GA 30073 | SELF-EMPLOYED Occupation SMALL BUSINESS OWNE | 01/18/1998 | \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other | <input type="checkbox"/> General Aggregate Year-to-Date > \$ | \$1,000.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| PAUL JONES 9510 BAKERS BRIDGE ROAD DOUGLASVILLE GA 30134 | PEACH STATE PLASTICS, INC. Occupation PRESIDENT | 01/18/1998 | \$2,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | \$2,000.00 | |

SUBTOTAL of Receipts This Page (optional)

2025 RELEASE UNDER E.O. 14176

SCHEDULE A ITEMIZED RECEIPTS

Amended 1/1/96 - 3/31/96

Contributions from Individuals/Persons Other than Political Committees

| | |
|---|--------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | Page 37 |
| | of 59 |
| | FOR LINE NUMBER 11(a)(1) |

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NAME OF COMMITTEE (In Full)

> BOB BARR - CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| BERNADETTE MCKEON 706 ALLGOOD ROAD MARIETTA GA 30062 | BALLOONS BY BERNADETTE Occupation OWNER | 03/05/1998 | \$500.00 |
| Reclpt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other | <input type="checkbox"/> General Aggregate Year-to-Date > \$ | \$500.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| HAROLD MCNALLY 97 LANSING DRIVE KENNESAW GA 30144 | MCNALLY & ASSOCIATES Occupation OWNER | 03/30/1998 | \$50.00 |
| Reclpt For: <input type="checkbox"/> Primary <input type="checkbox"/> Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | \$1,120.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| HAROLD MCNALLY 97 LANSING DRIVE KENNESAW GA 30144 | MCNALLY & ASSOCIATES Occupation OWNER | 03/30/1998 | \$1,000.00 |
| Reclpt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other | <input type="checkbox"/> General Aggregate Year-to-Date > \$ | \$1,120.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| HAROLD MCNALLY 97 LANSING DRIVE KENNESAW GA 30144 | MCNALLY & ASSOCIATES Occupation OWNER | 03/06/1998 | \$70.00 |
| Reclpt For: <input type="checkbox"/> Primary <input type="checkbox"/> Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | \$1,120.00 | |

SUBTOTAL of Receipts This Page (optional)

09-004-3001

SCHEDULE A ITEMIZED RECEIPTS

Amended 1/1/96 - 3/31/96

Contributions from Individuals/Persons Other than Political Committees

| | |
|--|---|
| Use separate Schedule(s) for each category of the Detailed Summary Page | Page 44 of 59 FOR LINE NUMBER 11(a)(i) |
|--|---|

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NAME OF COMMITTEE (In Full)
 > BOB BARR - CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| DENNIS B. RICHARDS 6790 BENNETT RD. CUMMING GA 30131 | NN BALL & ROLLER Occupation RETIRED | 02/28/1996 | \$200.00 |
| Recpt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other | <input type="checkbox"/> General Aggregate Year-to-Date > \$ | \$400.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| JEFF ROBINSON 4 RIVERMONT DRIVE ROME GA 30161 | SELF-EMPLOYED Occupation PHYSICIAN | 03/21/1996 | \$200.00 |
| Recpt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other | <input type="checkbox"/> General Aggregate Year-to-Date > \$ | \$200.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| R. RANDALL ROLLINS 1060 CREST VALLEY DRIVE NW ATLANTA GA | ROLLINS, INC. Occupation EXECUTIVE | 03/25/1996 | \$1,000.00 |
| Recpt For: <input type="checkbox"/> Primary <input type="checkbox"/> Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | \$1,000.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| RANDALL F. ROMIG 4223 PACES FERRY ROAD ATLANTA GA 30339 | SELF-EMPLOYED Occupation SMALL BUSINESS OWNE | 01/12/1996 | \$500.00 |
| Recpt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other | <input type="checkbox"/> General Aggregate Year-to-Date > \$ | \$500.00 | |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Amended 1/1/96 - 3-31-96

Contributions from Individuals/Persons Other than Political Committees

| | |
|---|--------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | Page 47 |
| | of 59 |
| | FOR LINE NUMBER 11(a)(1) |

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NAME OF COMMITTEE (In Full)
> BOB BARR - CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| WARREN SEWELL, JR. 128 HAMILTON AVENUE BREMEN GA 30110 | BREMEN BOWDON Occupation CEO | 03/11/1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$1,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| PHILIP M. SHOU 3860 HIGHGREEN DRIVE MARIETTA GA 30068 | SELF-EMPLOYED Occupation SMALL BUSINESS OWNE | 03/30/1996 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other | <input type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| T. AUBREY SILVEY 371 HAMP JONES ROAD CARROLLTON GA 30117 | AUBREY SILVEY ENTERPRISES Occupation CHAIRMAN/CEO | 02/28/1996 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| ELMER R. SMITH 2535 WHISPER WIND COURT ROSWELL GA 30076 | INTERACTIVE COLLEGE OF TECHNOLOGY Occupation PRESIDENT | 03/18/1996 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other | <input type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$500.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Amen 1/1/96 - 3/31/96

| | |
|---|--------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | Page 48 of 59 |
| | FOR LINE NUMBER 11(a)(i) |

Contributions from Individuals/Persons Other than Political Committees

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

NAME OF COMMITTEE (In Full)
> BOB BARR - CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------|--------------------------|------------------------------------|
| STEPHEN SMITH 508 LAPORTE STREET ROME GA 30161 | Occupation RETIRED | 03/11/1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | \$1,000.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| CHERYL J. STEED POST OFFICE BOX 789 BOWDON GA 30108 | SELF-EMPLOYED Occupation SMALL BUSINESS OWNE | 03/05/1996 | \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | \$250.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| JO H. STEGALL, JR. POST OFFICE BOX 1228 ROME GA | SELF-EMPLOYED Occupation DENTIST | 03/26/1996 | \$200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | \$200.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--------------------------------------|--------------------------|------------------------------------|
| DANTE STEPHENSEN 3380 PEACHTREE ROAD NE ATLANTA GA 30328 | STEPERSEN Occupation PRESIDENT | 03/25/1996 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | \$500.00 | |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE B ITEMIZED DISBURSEMENTS

TRANSFERS TO OTHER AUTHORIZED COMMITTEES

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

PAGE 1 OF 1

FOR LINE NUMBER 18

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

NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| BARR CONGRESS #4 231 Maxham Road Suite 100 Austell GA 3001 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 01-08-1995 | \$42,509.00 |

TOTAL This Period (last page this line number only) \$42,509.00

Included in report As filed per our copy.

SUBTOTAL of Receipts This Page (optional)

99 00 30 10 66

541E.26E.40.66

\$55,385

BOB BARR

Covering Period 10/17/96 through 11/25/96

Terry Griffin 10-16-96
P.O. Box 404 ? \$100.
Rome, Fl. 30162-0404

William Huntley \$200.
303 Smith St ? 10-16-96
LA Grange GA. 30240

Elliott A. Lewis
3190 Northeast Exp., Suite 4 ? 10-16-96
Atlanta, GA. 30341 \$250.

Guy Millner
3640 Tuxedo Rd. ? 10-16-96 \$2,000.
Ath. GA. 30305 (not provided)

Lewis B. Watford
825 Chowning Court ? 10-16-96 \$100.
Marietta GA 30064

William H. Wiggins
P.O. Box 28 ?
Sandersville GA 31082-0028 10-16-96
? CAN NOT read
to list
amount

DATE: 04.30.96

NOT disclosed

Charles C. Wilson

2100 Roswell Road suite 110 ? 10-16-96 \$200.
Marietta, GA. 30062

Larry D. Pogue

224 Tatum Ridge Rd. ? 10-18-96 \$200.
Cartersville, GA 30120

Reuel E. Hamilton, III

1118 Parkwind way ? 10/23/96 \$250.
Marietta, GA. 30064

Joseph H. Moss

910 Manseilles Dr., NW ? 10/23/96 \$30.
Ath. GA 30327

Alec L. Poitevint, II

P.O. Box, 2001 Twin Lakes Dr. ?
Bainbridge GA. 31717 10/23/96 \$500.

G. Charles Ray

9455 Logan Lane ? 10/23/96 \$200.
Douglasville GA. 30135

John M. Scheels

P.O. Box 4689 ?
Clearwater FL. 34618 10/23/96 \$500.

99.04.393.3147

Tim Clower
7841 Maroney Mill Rd. ? 10/28/96 \$100.
Douglasville GA 30134

Dorsey Dodgen
2605 Holly Springs Rd. ? 10/28/96 \$600.
Marietta GA. 30062

Martin W. Houser
405 W. Summer Ave. ? 10/28/96 \$300.
Spokane, WA 99204

Robert Kramer
1150 Cedar Branch Court ? 10/28/96 \$50.
Marietta, GA. 30064

Tony Morris
765 Park Ave. ? 10/28/96 \$50.
Lindale GA 30147

Larry Pogue
224 Tatum Ridge Rd. ? 10/28/96 \$200.
Cartersville, GA. 30120

Sharon L. Rediker
1545 Sunbow Falls Lane, Apt 101 ? 10/28/96 \$200.
Raleigh NC 27609

Darrielle Turner

8608 Ale Lane ? 10/30/96 \$280.
Villa Rica GA 30180

Michael R. McCravy

3800 Sweet Water Church Rd. ? 10/31/96
Douglasville GA 30134-5557 \$1,000.

Boyce Dooley

8 Green Meadows Dr ? 11/1/96
Trion, GA 30753 \$1,000.

James A. Rowe, Jr.

323 Foggy Bottom dr. ? 10/22/96 \$500.
Carrollton GA 30117

Ronald M. Hendrickson

1122 B N. STAFFORD ST. ? 10/21/96 \$250
Arlington, VA 22201

Arlin R. Ewing

22 Seabreeze Lake Rd. ? 10/30/96 \$200.
Buchanan, GA. 30113

Patricia C NBBard

593 Radio Springs Rd., SW ?
Rome, GA 30165 10/23/96 \$200.

99043034066

Darrelle E. Turner

8608 Aledane

Villa Rica GA 30180

?

10-24-96

\$30.

Judith L. Hughes

4906 S. Bent Pine Ct.

Douglasville, GA 30135

?

10/31/96

\$200.

George M. Stanley, Jr.

525 Miller Rd.

Hogansville, GA 30230-3770

?

11-2-96

\$50.

Chien Tsa Chen

5007 Zebulon Rd.

MACON, GA. 31210-2131

?

10-25-96

\$225

Tony Morris

765 Park Ave.

Lindale, GA. 30147

?

10/29/96

\$50

< individual contributor >
is missing

Metal Erectors

10/30/96 \$1,000.

owner

< individual contributor >
is missing

Austell Box Board

11-16-96

\$500.00

President

0511 06 40 66

Disbursements:

Bill Adams

P.O. Box 215
Dallas GA 30132 Reim 11-1-96 \$4,117.21
(Not sufficient)

Jeff Breedlove

1306 Bayliss dr. Ex-reim-travel \$200.
Alexandria VA 22302 (Not sufficient) 11-15-96

Jeff Breedlove

11-15-96 \$200.

(Not suff.)

Andy Busk

3128 Nectar Dr. Ex-reim-travel \$116.98
Powder Springs, GA 30073 11-7-96

Harold Richardson

3778 Lake dr. Travel Expenses 11-6-96 \$4171.30
SMYRNA, GA. 30080

Bob Henriott

2497 Lakeview Pkwy. Reim \$438.
Villa Rica, GA. 30180 11-1-96

Bob Henriott

11-15-96
Reim \$488.00

99.04.393.3151

Purpose of disbursement

Brad Alexander

1993 J Powers Ferry Rd
Marietta GA 30067

reim 11-1-96 \$399.23

Monty Warner

3825 LAVISTA Rd #4-1
Tucker, GA 30084

Reim 11-7-96 \$120.
(not sufficient)

Gary Peters

P.O. Box 215
Dallas, GA 30132

Exp-reim-travel 11-1-96 \$167.68

(Not properly disclosed)

Pat Adams

1475 Old Summerville Rd, NW
Rome GA 30165

? 10-17-96 \$1,040.

Steve Adams

P.O. Box 624
Carrollton, GA 30117

? 10/29/96 \$1,000.

Ray Anderson

2380 Marshall dr.
Austell GA 30001-2026

? 10-17-96 \$1,000.

Stephen M. Brater

2614 Houseley Creek, Sel., SW
Rome GA 30165

? 10-17-96 \$200.

99.04.393.352

H C Brown
628 Old Toward.
Villa Rica GA 30180

?

10-17-96

\$1,100.

Jerry Bullock
4744 hwy 101
Rockmart GA 30153

?

10-17-96

\$200.

Joseph J Burch
38 Huntington Rd.
Rome GA 30165

?

10-17-96

\$250

H. E. Camp

?



\$50.

William Camp

?

\$250.

THOMAS CANNON

?

\$1,000.

CORINA CHOU

?

\$500.

Robert E. DAVIS

?

10-17-96

\$250.

James Dellinger, Jr.

?



\$500.

JACK DINOS

?

\$1,000.

Boyce Dostler

?

\$1,000.

| | | | |
|-----------------------|---|----------|-----------|
| Chris Edwards | ? | 10-17-96 | \$ 700. |
| Paul Erwin | ? | | \$ 250. |
| Harvey R. Farish | ? | | \$ 1,120. |
| Michael Fleming | ? | | \$ 1,000. |
| J. L. Gray | ? | | \$ 1,000. |
| Barnester L. Harbin | | | \$ 250. |
| R. G. Hill | | | \$ 1,000. |
| R. G. Hill | | | \$ 500. |
| JANICE M. Hix | | | \$ 125. |
| Elmer Hogue | | | \$ 1,000. |
| Anthony Holt | | | \$ 800. |
| Robert Johnson | | | \$ 40. |
| Edwin Johnston, Jr. | | | \$ 1,000. |
| GRANT Lewis | | | \$ 1,000. |
| Peter MANOWN | | | \$ 1,000. |
| JEFF MATTHEWS | | | \$ 500. |
| Joan Mayer | | | \$ 60. |
| Michael McCravy | | | \$ 1,000. |
| Edward H. Metzger III | | | \$ 500. |
| Barry Moore | | | \$ 1,000. |
| James Moseley | | | \$ 500. |
| Ed Noble | | | \$ 250. |
| Anthony PATAK | | | \$ 100. |
| Thomas Patton | | | \$ 1,000. |
| OSCAR Persons | | | \$ 500. |
| Michael Reed | | | \$ 500. |
| Warren Sewell Jr. | | | \$ 1,000. |
| Audrey Silvey | | | \$ 1,000. |

Stephen Smith ?

10-17-96

\$ 2,000.

Eugene Rezzani

\$ 875.

Paul Wilkerson

\$ 291.10

John Williams

\$ 500.

J. Michael Womble

\$ 1,000.

" " "

\$ 1,000

John T. Woods

\$ 1,000

What is PPI

\$ 14,044.40

99-04-393-10-66

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee
(Summary Page)

2/18
97P.

1 NAME OF COMMITTEE (in full)
BOB BARR - CONGRESS

ADDRESS (number and street) Check if different than previously reported
231 MAXIAM RD., SUITE 100

CITY, STATE and ZIP CODE
AUSTELL, GA 30001

STATE/DISTRICT
GA/07

2 FEC IDENTIFICATION NUMBER
C00300640

3 IS THIS REPORT AN AMENDMENT?
 YES NO

4. TYPE OF REPORT

April 15 Quarterly Report Twelfth day report preceding _____ (Type of Election)

July 15 Quarterly Report election for _____ in the State of _____

October 15 Quarterly Report Thirtieth day report following the General Election on

January 31 Year End Report NOV. 5 in the State of GEORGIA

July 31 Mid Year Report (Non-Election Year Only) Fourth day report

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

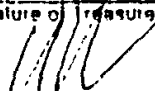
SUMMARY

| 5 | Covering Period | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|-----|--|-------------------------|-----------------------------------|
| | 10/17/96 through 11/25/96 | | |
| 6 | Net Contributions (other than loans) | | |
| (a) | Total Contributions (other than loans) (from Line 11(a)) | 150,583.27 | 753,817.13 |
| (b) | Total Contribution Refunds (from Line 20(d)) | 34,701.10 | 42,951.10 |
| (c) | Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) | 115,882.17 | 710,866.03 |
| 7 | Net Operating Expenditures | | |
| (a) | Total Operating Expenditures (from Line 12) | 351,371.07 | 861,376.43 |
| (b) | Total Offsets to Operating Expenditures (from Line 14) | 68.75 | |
| (c) | Net Operating Expenditures (subtract Line 7(b) from 7(a)) | 351,302.32 | 861,307.74 |
| 8 | Cash on Hand at Close of Reporting Period (from Line 27) | 18,094.45 | |
| 9 | Debits and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule b) | | |
| 10 | Debits and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule b) | 79,709.05 | |

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20543
Toll Free 800 421 9530
Local 202 219 3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
CHARLES C. BLACK

Signature of Treasurer  Date
2/17-97

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. § 137g.

99-04-393-3156

TYPE OR PRINT

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(PAGE 2, FEC FORM 3)

Name of Committee (in full) **BOB BARR - CONGRESS** Report Covering the Period:
From: **10/17/96** To: **11/25/96**

| I. RECEIPTS | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|------------|-------------------------------|-----------------------------------|
| 11 CONTRIBUTIONS (other than loans) FROM: | | | |
| (a) Individuals/Persons Other than Political Committees | | | |
| (i) Itemized (use Schedule A) | 92,291.10 | | |
| (ii) Unitemized | 27,555.15 | | |
| (iii) Total of contributions from individuals | 119,846.25 | 540,738.84 | |
| (b) Political Party Committees | 2,787.02 | 18,371.02 | |
| (c) Other Political Committees (such as PACs) | 27,950.00 | 194,707.27 | |
| (d) The Candidate | | | |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c) and (d)) | 150,583.27 | 603,233.86 | |
| 12 TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | | 36,728.25 |
| 13 LOANS | | | |
| (a) Made or Guaranteed by the Candidate | | | |
| (b) All Other Loans | | | |
| (c) TOTAL LOANS (add 13(a) and (b)) | | | |
| 14 OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, Etc.) | 68.75 | | |
| 15 OTHER RECEIPTS (Dividends, Interest, Etc.) | | | 3,467.43 |
| 16 TOTAL RECEIPTS (add 11(a), 12, 13(c), 14 and 15) | 150,652.02 | 794,081.56 | |

| II. DISBURSEMENTS | | | |
|---|------------|------------|--|
| 17 OPERATING EXPENDITURES | | | |
| | 351,371.07 | 861,376.49 | |
| 18 TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | | |
| | | 47,184.00 | |
| 19 LOAN REPAYMENTS: | | | |
| (a) Of Loans Made or Guaranteed by the Candidate | | | |
| (b) Of All Other Loans | | | |
| (c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) | | | |
| 20 REFUNDS OF CONTRIBUTIONS TO: | | | |
| (a) Individuals/Persons Other than Political Committees | | | |
| (b) Political Party Committees | | | |
| (c) Other Political Committees (such as PACs) | | | |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) | | | |
| | 34,701.10 | 42,451.10 | |
| | | 500.00 | |
| | | 500.00 | |
| 21 OTHER DISBURSEMENTS | | | |
| 22 TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) | 386,072.17 | 951,511.59 | |

| III. CASH SUMMARY | | |
|--|--|---------------|
| 23 CASH ON HAND AT BEGINNING OF REPORTING PERIOD | | \$ 253,514.60 |
| 24 TOTAL RECEIPTS THIS PERIOD (from Line 16) | | \$ 150,652.02 |
| 25 SUBTOTAL (add Line 23 and Line 24) | | \$ 404,166.62 |
| 26 TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) | | \$ 386,072.17 |
| 27 CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) | | \$ 18,094.45 |

of receipts and disbursements
(page 2, FEC FORM 3)

| Name of Committee (In full) | Report Covering the Period | To |
|--|--------------------------------------|--|
| BOB BARR - CONGRESS | From 10/17/95 | To 11/25/95 |
| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Calendar Year to Date |
| 11 CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals (except other than Political Committees) | | |
| (i) Restricted (such as Schedule A) | 32,281.10 | |
| (ii) Unrestricted | 173,845.25 | 240,135.84 |
| (b) Political Party Committees | 2,787.02 | 18,311.02 |
| (c) Other Political Committees (such as PACs) | 27,950.00 | 124,707.27 |
| (d) The Candidate | | |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add (a)(i), (a)(ii), (b), (c) and (d)) | 133,863.37 | 383,154.13 |
| 12 TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | 36,728.25 |
| 13 LOANS: | | |
| (a) Made or to be made by the Candidate | | |
| (b) All Other Loans | | |
| (c) TOTAL LOANS (add (a) and (b)) | | |
| 14 INTEREST TO OTHER VALID EXPENDITURES (such as, but not, limited to) | 68.75 | |
| 15 OTHER RECEIPTS (such as bank interest, etc.) | | 3,467.43 |
| 16 TOTAL RECEIPTS (add (11)(a), (12), (13)(c), (14) and (15)) | 150,652.02 | 391,081.56 |
| II. DISBURSEMENTS | | |
| 17 OPERATING EXPENDITURES | 351,371.07 | 861,376.42 |
| 18 TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | 47,181.00 |
| 19 LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate | | |
| (b) Of All Other Loans | | |
| (c) TOTAL LOAN REPAYMENTS (add (a) and (b)) | | |
| 20 REPURCHASE OF CONTRIBUTIONS TO: | | |
| (a) Individuals (except other than Political Committees) | 24,701.10 | 42,151.10 |
| (b) Political Party Committees | | |
| (c) Other Political Committees (such as PACs) | | 500.00 |
| (d) TOTAL CONTRIBUTION REPURCHASES (add (a), (b) and (c)) | | 500.00 |
| 21 OTHER DISBURSEMENTS | | |
| 22 TOTAL DISBURSEMENTS (add (17), (18), (19)(c), (20)(d) and (21)) | 386,072.17 | 911,511.52 |
| III. CASH SUMMARY | | |
| 23 CASH ON HAND AT BEGINNING OF REPORTING PERIOD | \$ 253,314.60 | |
| 24 TOTAL RECEIPTS THIS PERIOD (from (16)) | \$ 150,652.02 | |
| 25 SUBTOTAL (add (23) and (24)) | \$ 403,966.62 | |
| 26 TOTAL DISBURSEMENTS THIS PERIOD (from (22)) | \$ 386,072.17 | |
| 27 CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract (26) from (25)) | \$ 18,094.45 | |

EST. 363.40.00

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

| | |
|--|--------------------------|
| Use separate schedule for each category of the Detailed Summary Page | Page 1 of 55 |
| | FOR LINE NUMBER 11(a)(1) |

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

NAME OF COMMITTEE (In Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|---|--------------------------|------------------------------------|
| BRAD E. ACHILLES 4120 BENT OAK COURT DOUGLASVILLE GA 30135 | DELTA AIRLINES Occupation PILOT | 10-16-1996 | \$25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | \$205.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|-----------------------------|--------------------------|------------------------------------|
| SHIRLEY ANDREWS 102 EAST HARALSON STREET LAGRANGE GA 30204 | HOMEMAKER Occupation | 10-16-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | \$1,000.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|--|--------------------------|------------------------------------|
| STEPHEN M. BAXTER 2614 HORSELEG CREEK ROAD, SW ROME GA 30165 | FLOYD ANESTHESIA ASSOCIATES Occupation PHYSICIAN | 10-16-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | \$1,300.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|---|--------------------------|------------------------------------|
| DWIGHT T. BROWN 3311 WOODRUN TRAIL MARIETTA GA 30062 | CORB EMC Occupation PRESIDENT | 10-16-1996 | \$25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | \$250.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|--|--------------------------|------------------------------------|
| LINDA S BROWN 4015 WOODBRIDGE COURT POWDER SPRINGS GA 30073 | LUCENT TECHNOLOGIES Occupation COMPUTER OPERATOR | 10-16-1996 | \$15.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | \$1,265.00 | |

SUBTOTAL of Receipts This Page (optional)

ESTERSON 04 25 96

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)
 > BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| WILLIAM J BRYAN, III POST OFFICE BOX 82411 HAPEVILLE GA 30354 | FULTON COUNTY PUBLIC BLDGS. MAIN Occupation ELECTRICIAN II/BLDG MECHANIC II | 10-16-1996 | \$30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$330.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------|--------------------------|------------------------------------|
| JOHNNY G CRONIC 1385 GREENLAND DRIVE, NE ATLANTA GA 30306 | Occupation RETIRED | 10-16-1996 | \$15.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$210.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| KERRY FRANKS 947 ADAMS ROAD WEST POINT GA 31833 | SELF-EMPLOYED Occupation CONSTRUCTION | 10-16-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| CARL J GAMEL 2060 ROCKMART HIGHWAY DALLAS GA 30132 | J B HUNT Occupation TRUCK DRIVER | 10-16-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$300.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--------------------------------|--------------------------|------------------------------------|
| JOHN M GRAHAM, III 11 HUNTINGTON ROAD, SW ROME GA 30165 | SELF Occupation ATTORNEY | 10-16-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$640.00 |

SUBTOTAL of Receipts This Page (optional)

091116000000000000

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|------------------|--------------------------|------------------------------------|
| TERRY R. GRIFFIN P O BOX 404 ROME FL 30162-0404 | Occupation | 10-16-1996 | \$100 00 |

Receipt For: Primary General
 Other Aggregate Year-to-Date > \$ 230 00

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|--------------------|--------------------------|------------------------------------|
| WILLIAM G. GUSTAFSON 737 PRINCETON MILL RUN MARIETTA GA 30068 | SELF Occupation | 10-16-1996 | \$90 00 |

Receipt For: Primary General
 Other Aggregate Year-to-Date > \$ 215 00

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|---------------------------------|--------------------------|------------------------------------|
| D D HAMMETT 1820 THE EXCHANGE, BUILDING 200 ATLANTA GA 30339 | DON HAMMET REALTY Occupation | 10-16-1996 | \$230 00 |

Receipt For: Primary General
 Other Aggregate Year-to-Date > \$ 230 00

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|-----------------------------|--------------------------|------------------------------------|
| WILLIAM P. HARBIN 314 EAST FOURTH ST. ROME GA 30161-3202 | HARBIN CLINIC Occupation | 10-16-1996 | \$20 00 |

Receipt For: Primary General
 Other Aggregate Year-to-Date > \$ 250 00

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|-----------------------------------|--------------------------|------------------------------------|
| BENJAMIN HARRELL 780 RALEIGH COURT MARIETTA GA 30064 | ALLIED SIGNAL, INC. Occupation | 10-16-1996 | \$100 00 |

Receipt For: Primary General
 Other Aggregate Year-to-Date > \$ 250 00

SUBTOTAL of Receipts This Page (optional)

1976-04-04 04:40:56

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

Use separate schedule for each category of the Detailed Summary Page

Page 2 of 55

FOR LINE NUMBER

11(a)(1)

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NAME OF COMMITTEE (In Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| WILLIAM J. BRYAN, III POST OFFICE BOX 82411 HAPEVILLE GA 30354 | FULTON COUNTY PUBLIC BLDGS. MAIN Occupation ELECTRICIAN IV/BLDG. MECHANIC II | 10-16-1996 | \$30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$330.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------------------------|--------------------------|------------------------------------|
| JOHNNY G. CRONIC 1385 GREENLAND DRIVE, NE ATLANTA GA 30306 | RETIRE Occupation RETIRE | 10-16-1996 | \$15.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$210.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| KERRY FRANKS 947 ADAMS ROAD WEST POINT GA 31833 | SELF-EMPLOYED Occupation CONSTRUCTION | 10-16-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| CARL J GAMEL 2060 ROCKMART HIGHWAY DALLAS GA 30132 | J. B HUNT Occupation TRUCK DRIVER | 10-16-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$300.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------------------------|--------------------------|------------------------------------|
| JOHN M. GRAHAM, III 11 HUNTINGTON ROAD, SW ROME GA 30165 | SELF Occupation ATTORNEY | 10-16-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$640.00 |

SUBTOTAL of Receipts This Page (optional)

2025-04-30 3:16:22

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of item. Detailed Summary Page

Page 2 of 55
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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

NAME OF COMMITTEE (In Full)

> BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| WILLIAM J BRYAN, III POST OFFICE BOX 82411 HAPEVILLE GA 30354 | FULTON COUNTY PUBLIC BLDGS. MAIN Occupation ELECTRICIAN IV/BLDG. MECHANIC II | 10-16-1996 | \$30 00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$330 00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------|--------------------------|------------------------------------|
| JOHNNY G CRONIC 1385 GREENLAND DRIVE, NE ATLANTA GA 30306 | RETIRED Occupation | 10-16-1996 | \$15 00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$210 00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| KERRY FRANKS 947 ADAMS ROAD WEST POINT GA 31833 | SELF-EMPLOYED Occupation CONSTRUCTION | 10-16-1996 | \$500 00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$500 00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| CARL J GAMEL 21600 ROCKMART HIGHWAY DALLAS GA 30132 | J B HUNT Occupation TRUCK DRIVER | 10-16-1996 | \$50 00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$100 00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------------------------|--------------------------|------------------------------------|
| JOHN M. GRAHAM, III 11 HUNTINGTON ROAD, SW ROME GA 30165 | SELF Occupation ATTORNEY | 10-16-1996 | \$100 00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$640 00 |

SUBTOTAL of Receipts This Page (optional)

99.04.393.2163

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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

NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| JIM HARRY 114 WINDRIDGE DRIVE LAGRANGE GA 30240 | SELF-EMPLOYED Occupation | 10-16-1996 | \$140.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other | ATTORNEY Aggregate Year-to-Date > \$ | | \$860.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---------------------------------------|--------------------------|------------------------------------|
| E.W HERRON 571 KEELER WOODS DR. MARIETTA GA 30064 | Occupation | 10-16-1996 | \$30.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other | RETIRE Aggregate Year-to-Date > \$ | | \$830.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---------------------------------------|--------------------------|------------------------------------|
| GROVER A. HOBBS 1036 MOUNTVILLE HOGANSVILLE ROAD HOGANSVILLE GA 30230 | Occupation | 10-16-1996 | \$20.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other | RETIRE Aggregate Year-to-Date > \$ | | \$240.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| W.B. HOUZE, JR. 754 LAKEWOOD DRIVE LAGRANGE GA 30240 | INSURANCE Occupation | 10-16-1996 | \$250.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other | EXECTUIVE Aggregate Year-to-Date > \$ | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------|--------------------------|------------------------------------|
| WILLIAM W. HUNTLEY 303 SMITH STREET LAGRANGE GA 30240 | Occupation | 10-16-1996 | \$200.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other | Aggregate Year-to-Date > \$ | | \$400.00 |

SUBTOTAL of Receipts This Page (optional)

1996 "ECS" 11/10 "BB"

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|-----------------------------|------------------------------------|
| JON F. LARUSSA 3645 MANCHESTER DRIVE LAWRENCEVILLE GA 30244 | UPS DRIVER | 10-16-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | Aggregate Year-to-Date > \$ | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|-----------------------------|------------------------------------|
| ELLIOTT A. LEWIS 3190 NORTHEAST EXPRESSWAY, SUITE 4 ATLANTA GA 30341 | | 10-16-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | Aggregate Year-to-Date > \$ | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|-----------------------------|------------------------------------|
| DIETHARD LINDNER 207 NORTHRIDGE DRIVE LAGRANGE GA 30240-8333 | HUGHES GEORGIA | 10-16-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | Aggregate Year-to-Date > \$ | \$700.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-------------------------|-----------------------------|------------------------------------|
| JAMES E. MARLER 30 LINDLEY AVENUE MARIETTA GA 30064 | D AND R LEASING COMPANY | 10-16-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | Aggregate Year-to-Date > \$ | \$600.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|-----------------------------|------------------------------------|
| GUY AND GINNY MILLNER 3640 TUXEDO ROAD ATLANTA GA 30305 | SELF-EMPLOYED | 10-16-1996 | \$2,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | Aggregate Year-to-Date > \$ | \$2,000.00 |

SUBTOTAL of Receipts This Page (optional)

DATE: 03-23-96 10:56

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Page 7 of 55
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|--------------------|--------------------------|------------------------------------|
| ED NOBLE POST OFFICE BOX 18651 ATLANTA GA 30326 | SELF Occupation | 10-16-1996 | \$30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | \$1,510.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|---|--------------------------|------------------------------------|
| JOE REYNOLDS 1956 POWDER SPRINGS ROAD MARIETTA GA 30064 | REYNOLDS-WARREN EQUIPMENT Occupation | 10-16-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | \$225.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|-------------------------|--------------------------|------------------------------------|
| A.G. ROWE 45 STONINGTON PLACE MARIETTA GA 30068-3770 | SCC, INC. Occupation | 10-16-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | \$560.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|--|--------------------------|------------------------------------|
| GERALD E. SANDERS 1250 VALLEY RESERVE KENNESAW GA 30144 | MARIETTA EYE CLINIC/SELF Occupation | 10-16-1996 | \$30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | \$2,015.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|---------------------------------|--------------------------|------------------------------------|
| KARL T. SCHWELM 310 LORING COURT MARIETTA GA 30064 | CAREFINDERS, INC. Occupation | 10-16-1996 | \$15.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | \$515.00 |

SUBTOTAL of Receipts This Page (optional)

DATE FOR "04" "03" "96"

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| JIM SERRATE POST OFFICE BOX 7254 MARIETTA GA 30065 | JIM SERRATE FOR STATE REPRESENTATIVE Occupation | 10-16-1996 | \$200.00 |

Receipt For: Primary General
 Other Aggregate Year-to-Date > \$ 215.00

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------------------------|--------------------------|------------------------------------|
| JAMES W. TATE 601 WHITTAKER ROAD LAGRANGE GA 30240 | POLK SHEET METAL Occupation | 10-16-1996 | \$140.00 |

Receipt For: Primary General
 Other Aggregate Year-to-Date > \$ 240.00

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------|--------------------------|------------------------------------|
| LEWIS B. WATFORD 825 CHOWNING COURT MARIETTA GA 30064 | REQUESTED Occupation | 10-16-1996 | \$100.00 |

Receipt For: Primary General
 Other Aggregate Year-to-Date > \$ 600.00

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---------------------------------------|--------------------------|------------------------------------|
| BERNARD A. WERNER POST OFFICE BOX 939 MARIETTA GA 30061-0939 | KENNESAW FINANCE CO Occupation | 10-16-1996 | \$50.00 |

Receipt For: Primary General
 Other Aggregate Year-to-Date > \$ 165.00

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| BERNARD A. WERNER POST OFFICE BOX 939 MARIETTA GA 30061-0939 | KENNESAW FINANCE CO. Occupation | 10-16-1996 | \$30.00 |

Receipt For: Primary General
 Other Aggregate Year-to-Date > \$ 165.00

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A

ITEMIZED RECEIPTS

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

Page 9 of 55

FOR LINE NUMBER

(1/2/1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)

> BOB BARR FOR CONGRESS C003005A0 GA107

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|---|--------------------------|------------------------------------|
| BRUCE WIDENER POST OFFICE BOX 88866 ATLANTA GA 30356 | SELF-EMPLOYED Occupation LOBBYIST | 10-16-1996 | \$500.00 |
| Reclpt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | \$500.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|------------------|--------------------------|------------------------------------|
| WILLIAM H. WIGGINS POST OFFICE BOX 28 SANDERSVILLE GA 31082-0028 | Occupation | 10-16-1996 | \$225.00 |
| Reclpt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | \$225.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|---------------------------|--------------------------|------------------------------------|
| LABAN W. WILLIAMS 3459 LICKSKILLET ROAD EPWORTH GA 30541 | Occupation RETIRED | 10-16-1996 | \$25.00 |
| Reclpt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | \$25.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|---|--------------------------|------------------------------------|
| MARLIN E. WILLIAMS 171 DEWEY STREET, LOT B4 TALLAPOOSA GA 30176-1336 | RYDER DEDICATED LOGISTICS Occupation TRUCK DRIVER | 10-16-1996 | \$25.00 |
| Reclpt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | \$25.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|------------------|--------------------------|------------------------------------|
| CHARLES C. WILSON 2100 ROSWELL ROAD, SUITE 110 MARIETTA GA 30062 | Occupation | 10-16-1996 | \$200.00 |
| Reclpt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | \$200.00 | |

SUBTOTAL of Receipts This Page (optional)

DATE "09" "10" '96

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

| | |
|--|--------------------------|
| Use separate schedule for each category of the Detailed Summary Page | Page 10 of 55 |
| | FOR LINE NUMBER 11(a)(1) |

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| LEONA WOLLESEN 680 VILLAGE LANE DRIVE, SW MARIETTA GA 30060 | BLUE CROSS / BLUE SHIELD Occupation ACCOUNTANT | 10-16-1996 | \$30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$200.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------|--------------------------|------------------------------------|
| ROBERT H ANDERSON 687 N BAGGETT RD. DOUGLASVILLE GA 30134-1335 | Occupation RETIRED | 10-18-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$375.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-------------------------|--------------------------|------------------------------------|
| ALICE-ALMA C. BLEEKS 170 WICKHAM DRIVE COLUMBUS GA 31907 | Occupation HOMEMAKER | 10-18-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$200.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---------------------------------|--------------------------|------------------------------------|
| JACK EASTLAND 152 HAWKINS STORE ROAD KENNESAW GA 30144 | SELF Occupation SALES | 10-18-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$1,000.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------|--------------------------|------------------------------------|
| W.S. GAREY 1718 BARNESDALE WAY ATLANTA GA 30109-2602 | Occupation RETIRED | 10-18-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$200.00 | |

SUBTOTAL of Receipts This Page (optional)

99-04-393-40-69

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300840 GA/07

DATE "26" "40" "66"

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|--|--------------------------|------------------------------------|
| BEN S. GILMER 2767 PEACHTREE ROAD, N.E., NO. 10 ATLANTA GA 30305 | Occupation RETIRED | 10-18-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | General Aggregate Year-to-Date > \$ | | \$313.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|--|--------------------------|------------------------------------|
| CARL W. HAMPE 3718 VANN NESS STREET WASHINGTON DC 20016 | Occupation ATTORNEY | 10-18-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | General Aggregate Year-to-Date > \$ | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|--|--------------------------|------------------------------------|
| RALPH HOWARD, JR. 746 CHEROKEE RD. LAGRANGE GA 30240 | Occupation PRESIDENT | 10-18-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | General Aggregate Year-to-Date > \$ | | \$1,750.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|--|--------------------------|------------------------------------|
| W.M. HUFFMAN, JR. 10 OAKMONT DRIVE ROME GA 30161-9593 | Occupation CHAIRMAN | 10-18-1996 | \$750.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | General Aggregate Year-to-Date > \$ | | \$750.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|--|--------------------------|------------------------------------|
| EDWIN JOHNSTON, JR. 5 RIVER VALLEY CT., S.W. ROME GA 30165 | Occupation PHYSICIAN | 10-18-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | General Aggregate Year-to-Date > \$ | | \$5,000.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300840 GA07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| PAUL AND SYBIL JONES 9510 BAKERS BRIDGE ROAD DOUGLASVILLE GA 30134 | PEACH STATE PLASTICS, INC. Occupation PRESIDENT | 10-18-1996 | \$2,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | \$6,000.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------|--------------------------|------------------------------------|
| GORDON R. MCHAN 472 ST. ANNE'S ROAD MARIETTA GA 30064 | RETIRED Occupation | 10-18-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | \$3,000.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| HARRY AND LISA MCNALLY 97 LANSING DRIVE KENNESAW GA 30144 | MCNALLY & ASSOCIATES Occupation OWNER | 10-18-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | \$4,120.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| J. C. MILLER 1616 AGNES STREET MARIETTA GA 30060 | MARIETTA INSTRUMENT COMPANY, IN Occupation MACHINIST | 10-18-1996 | \$75.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | \$355.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| J. C. MILLER 1616 AGNES STREET MARIETTA GA 30060 | MARIETTA INSTRUMENT COMPANY, IN Occupation MACHINIST | 10-18-1996 | \$30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | \$355.00 | |

SUBTOTAL of Receipts This Page (optional)

STATE OF GEORGIA

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| LARRY D. POGUE 224 TATUM RIDGE ROAD CATERSVILLE GA 30120 | Occupation | 10-18-1996 | \$200.00 |

Receipt For: Primary General Other
 Aggregate Year-to-Date > \$ 5400.00

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------------------|--------------------------|------------------------------------|
| ROBERT J. SNELLING 756 REEVES LAKE DRIVE MARIETTA GA 30064 | DELTA Occupation PILOT | 10-18-1996 | \$30.00 |

Receipt For: Primary General Other
 Aggregate Year-to-Date > \$ 5730.00

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| N RUSSELL WALDEN 3190 RIDGEWOOD ROAD, NW ATLANTA GA 30327 | RIDGEWOOD PROPERTIES Occupation PRESIDENT | 10-18-1996 | \$200.00 |

Receipt For: Primary General Other
 Aggregate Year-to-Date > \$ 5930.00

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| JOHN B. RICE 2845 HIGHWAY 54, W HOGANSVILLE GA 30230 | RETIRED Occupation STATE EMPLOYEE | 10-19-1996 | \$70.00 |

Receipt For: Primary General Other
 Aggregate Year-to-Date > \$ 6000.00

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| LINDA S. BROWN 4045 WOODBRIDGE COURT POWDER SPRINGS GA 30073 | LUCENT TECHNOLOGIES Occupation COMPUTER OPERATOR | 10-21-1996 | \$100.00 |

Receipt For: Primary General Other
 Aggregate Year-to-Date > \$ 6100.00

SUBTOTAL of Receipts This Page (optional)

DATE "SEP" AND "64"

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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FOR LINE NUMBER
11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00309643 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| CURTIS M. ANDERSON 3020 BEECHWOOD LANE FALLS CHURCH VA. 22042-3751 | NAR ASSN. OF STATE DEPTS. OF AGGC. Occupation ATTORNEY | 10-23-1996 | \$100.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| T.J. BEALL, JR. POST OFFICE BOX 231 WEST POINT GA 31833 | T. I. BEALL COMPANY Occupation OWNER | 10-23-1996 | \$500.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$2,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| F.J. BICKERSTAFF, JR. 2201 19TH STREET COLUMBUS GA 31906 | RETIRED Occupation | 10-23-1996 | \$100.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| ALICE-ALMA C. BLEEKS 170 WICKHAM DRIVE COLUMBUS GA 31907 | HOMEMAKER Occupation | 10-23-1996 | \$50.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| FREDERICK T. BRANDT POST OFFICE BOX 31066 CHARLOTTE GA 28231 | I.A. JONES CONSTRUCTION CO. Occupation CHAIRMAN | 10-23-1996 | \$500.00 |
| Receipt For: _____ Primary _____ Other | <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$500.00 |

SUBTOTAL of Receipts This Page (optional)

99-04-393-100-69

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| GRAHAM COLE 1643 EAST LAKE DRIVE MARIETTA GA 30062 | WARDROBE CARE INC. Occupation DRY CLEANER | 10-23-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$595.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| L. CRAIG DOWDY ONE PEACHTREE CENTER, STE 5300, 303 ATLANTA GA 30308 | LONG ALDRIDGE & NORMAN Occupation ATTORNEY | 10-23-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$1,200.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--------------------|--------------------------|------------------------------------|
| REUEL E. HAMILTON, III 1118 PARKWIND WAY MARIETTA GA 30064 | Occupation | 10-23-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$375.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| N. D. HORTON, JR. P.O. BOX 4468 EATONTON GA 31024 | HORTON HOMES, INC. Occupation PRESIDENT | 10-23-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$1,050.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| DEREK N. JONES 5133 ALDER LANE POWDER SPRINGS GA 30073 | PEACH STATE PLASTICS Occupation VP | 10-23-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$3,000.00 | |

SUBTOTAL of Receipts This Page (optional)

4272 "SOS" MO 66

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

| | |
|--|--------------------------|
| Use separate schedule(s) for each category Detailed Summary Page | Page 16 of 55 |
| | FOR LINE NUMBER 11(a)(1) |

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

NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|---|--------------------------|------------------------------------|
| J. PHILIP KITTEL 8550 HIGHPOINT ROAD DOUGLASVILLE GA 30134-3113 | CARROLL TECHNICAL INSTITUTE Occupation INSTRUCTOR | 10-23-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$550.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|-------------------------------------|--------------------------|------------------------------------|
| LOIS H. LAZARO 6040 RIVER CHASE CIR. N W ATLANTA GA 30328 | NONE Occupation HOUSEWIFE | 10-23-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$680.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|---|--------------------------|------------------------------------|
| ROGER B. LEITHHEAD, JR. 805 KELLERMAN CREEK MARIETTA GA 30068 | CHILDRESS KLEIN PROPERTIES Occupation PARTNER | 10-23-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$500.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|------------------------------------|--------------------------|------------------------------------|
| PETER S. MANOWN 4739 OLDE VILLAGE LANE DUNWOODY GA 30338 | SELF Occupation ATTORNEY | 10-23-1996 | \$2,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$4,000.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|-------------------------------|--------------------------|------------------------------------|
| J. MARK MILLER 197 BLANDENBURG ROAD CARROLLTON GA 30116 | Occupation RETIRED | 10-23-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$100.00 | |

SUBTOTAL of Receipts This Page (optional)

99-04-393-3175

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| JOSEPH H. MOSS 910 MARSEILLES DRIVE, NW ATLANTA GA 30327 | SELF-EMPLOYED Occupation EXECUTIVE | 10-23-1996 | \$30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$120.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------------|--------------------------|------------------------------------|
| ED NOBLE POST OFFICE BOX 18651 ATLANTA GA 30326 | SELF Occupation REAL ESTATE | 10-23-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$1,570.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| LAMAR NOBLE REQUESTED | NOBLE TRUCK STOP Occupation OWNER | 10-23-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| HOLTON R. PARRIS, JR. 1205 HAYES IND. DR. N.E. MARIETTA GA 30062 | EQUITY UTILITY Occupation ENGINEER | 10-23-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| ALEC L. POITEVINT, II POST OFFICE BOX, 2001 TWIN LAKES DR BAINBRIDGE GA 31717 | SELF-EMPLOYED Occupation EXECUTIVE | 10-23-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$500.00 |

SUBTOTAL of Receipts This Page (optional)

971E "393" 40 "66

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

DATE: 04/03/97

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------------------------|--------------------------|------------------------------------|
| E. CARL PRINCE, JR. P.O BOX 662 CARROLLTON GA 30117 | SELF Occupation ATTORNEY | 10-23-1996 | \$100.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$300.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-----------------------|--------------------------|------------------------------------|
| DEWEY L. RANSOM 3393 LEE STREET, SE SMYRNA GA 30080-4437 | Occupation RETIRED | 10-23-1996 | \$25.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| G. CHARLES RAY 9455 LOGAN LANE DOUGLASVILLE GA 30135 | Occupation | 10-23-1996 | \$200.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| PENN W. ROOKER 439 NORTH ST. MARY'S LANE MARIETTA GA 30064 | THE PENNCO CORP. Occupation REAL ESTATE | 10-23-1996 | \$200.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| JOHN M. SCHEELS POST OFFICE BOX 4689 CLEARWATER FL 34618 | Occupation | 10-23-1996 | \$500.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$500.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| MATTHEW J. SCOTTON 5040 HARBOUR RIDGE DRIVE ALPHARETTA GA 30202 | CONSTANT COMMUNICATIONS, INC. Occupation VICE PRESIDENT | 10-23-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$325.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| T. AUBREY SILVEY 371 HAMP JONES ROAD CARROLLTON GA 30117 | AUBREY SILVEY ENTERPRISES Occupation OWNER | 10-23-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$3,250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| ELMER R. SMITH 2535 WHISPER WIND COURT ROSWELL GA 30076 | INTERACTIVE COLLEGE OF TECHNOLOGY Occupation PRESIDENT | 10-23-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$1,100.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| WOODROW W. WAGNER 200 GLENRIDGE ROAD ROME GA 30161-7020 | THE AMERICAN LUBRICANTS Occupation MARKETING | 10-23-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$465.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-------------------------------------|--------------------------|------------------------------------|
| JOHN T. WOODS 1104 MARTHA BERRY BLVD. ROME GA 30161 | SELF Occupation PHYSICIAN | 10-23-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$2,450.00 |

SUBTOTAL of Receipts This Page (optional)

99 "04" 393 "3178

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)
> BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| RAY ANDERSON 2380 MARSHALL DRIVE AUSTELL GA 30001-2026 | MALBON, INC. Occupation GARMENT MFG. | 10-28-1996 | \$45.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$2,045.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| EUGENE R. ARNOLD 4339 TURNBERRY DRIVE HIRAM GA 30141 | SELF Occupation CONSULTANT (CUSTOMER SERVICE) | 10-28-1996 | \$25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$425.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| WALTER BOOMERSHINE 4959 HABERSHAM WALK GAINESVILLE GA 30504 | WINCO, LTD Occupation AUTOMOBILE DEALER | 10-28-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| DEAN BOOTH 3100 CUMBERLAND CIRCLE, SUITE 1500 ATLANTA GA 30339 | SHREEDER, WHEELER & FLYNT Occupation LAWYER | 10-28-1996 | \$30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$1,030.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| DWIGHT T. BROWN 3314 WOODRUN TRAIL MARIETTA GA 30062 | COBB EMC Occupation PRESIDENT | 10-28-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$250.00 |

SUBTOTAL of Receipts This Page (optional)

0215 "56" 40" 66

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

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FOR LINE NUMBER

11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---------------------------------------|-----------------------------|------------------------------------|
| LINDA S. BROWN 4045 WOODBRIDGE COURT POWDER SPRINGS GA 30073 | LUCENT TECHNOLOGIES Occupation | 10-28-1996 | \$100.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | COMPUTER OPERATOR | Aggregate Year-to-Date > \$ | \$1,265.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---------------------------------|-----------------------------|------------------------------------|
| TOM WATSON BROWN 2859 PACES FERRY ROAD ATLANTA GA 30339 | SELF-EMPLOYED Occupation | 10-28-1996 | \$500.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | ATTORNEY | Aggregate Year-to-Date > \$ | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------------|-----------------------------|------------------------------------|
| ALLEN G. BUTLER 4160 D'YOUVILLE TRACE ATLANTA GA 30341 | SELF Occupation | 10-28-1996 | \$100.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | INVESTOR | Aggregate Year-to-Date > \$ | \$325.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|-----------------------------|------------------------------------|
| TIM CLOWER 4841 MARONEY MILL RD. DOUGLASVILLE GA 30134 | Occupation | 10-28-1996 | \$100.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | Aggregate Year-to-Date > \$ | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-----------------------------|-----------------------------|------------------------------------|
| DORSEY DODGEN 2605 HOLLY SPRINGS RD MARIETTA GA 30062 | REQUESTED Occupation | 10-28-1996 | \$600.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | Aggregate Year-to-Date > \$ | \$1,000.00 |

SUBTOTAL of Receipts This Page (optional)

DATE " 56 " 40 " 66

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| PAUL L. ERWIN 5555 CAVE SPRINGS ROAD, SW CAVE SPRING GA 30124-2509 | SELF Occupation PRIMROSE SCHOOL FRANCHISING CO. | 10-28-1996 | \$250.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$2,250.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|----------------------------|--------------------------|------------------------------------|
| EDWIN C. EVANS 500 WESTOVER DRIVE, NW ATLANTA GA 30305-3538 | RETIREED Occupation | 10-28-1996 | \$200.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$525.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| RONALD H. FRANCIS 490 WOOD VALLEY DRIVE MARIETTA GA 30064 | CHARTER BANK & TRUST CO Occupation PRESIDENT & CEO | 10-28-1996 | \$400.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$950.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|----------------------------|--------------------------|------------------------------------|
| CHARLES M. GARNETT 113 MAPLE DRIVE SUMMERVILLE 30747 | RETIREED Occupation | 10-28-1996 | \$50.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$300.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| GREGORY A. GRIFFIN 261 HARDAGE DRIVE MARIETTA GA 30064 | GRIFFIN & O'TOOLE Occupation ATTORNEY | 10-28-1996 | \$30.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$330.00 | |

SUBTOTAL of Receipts This Page (optional)

99 "04" 393 "3181

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

| | |
|--|--------------------------|
| Use separate schedule for each category of the Detailed Summary Page | Page 23 of 55 |
| | FOR LINE NUMBER 11(a)(1) |

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|---------------------------------|--------------------------|------------------------------------|
| GEORGE H. HOLDER, JR. POST OFFICE BOX 32 CEDARTOWN GA 30125 | SELF-EMPLOYED Occupation | 10-28-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ 350.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|------------------|--------------------------|------------------------------------|
| MARTIN W. HOWSER 405 WEST SUMMER AVENUE SPOKANE WA 99204 | Occupation | 10-28-1996 | \$300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ 300.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|--|--------------------------|------------------------------------|
| PATRICK DAVID KEARNS 670 RUSH CHAPEL ROAD ADAIRSVILLE GA 30103 | SOUTHEASTERN PATHOLOGY Occupation | 10-28-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ 550.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|---|--------------------------|------------------------------------|
| CHARLES D. KEOWN 316 BROAD ST. ROME GA 30161-3006 | KEOWN REAL ESTATE CO. Occupation | 10-28-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ 250.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|---|--------------------------|------------------------------------|
| J. PHILIP KITTEL 8550 HIGHPOINT ROAD DOUGLASVILLE GA 30134-3113 | CARROLL TECHNICAL INSTITUTE Occupation | 10-28-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ 550.00 | | | |

SUBTOTAL of Receipts This Page (optional)

REF. SEC. 40.66

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------|--------------------------|------------------------------------|
| ROBERT KRAMER 1150 CEDARBRANCH COURT MARIETTA GA 30064 | SELF-EMPLOYED Occupation | 10-28-1996 | \$50.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ 225.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-------------------------------|--------------------------|------------------------------------|
| CHARLIE LANE 112 SUNSET COURT CARROLLTON GA 30117 | REGAL MARKETING Occupation | 10-28-1996 | \$200.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ 2,400.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--------------------|--------------------------|------------------------------------|
| LOIS H. LAZARO 6040 RIVER CHASE CIR. N.W. ATLANTA GA 30328 | NONE Occupation | 10-28-1996 | \$30.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ 680.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| BRYANT Y. LIU 2197 CANTON ROAD, SUITE 112 MARIETTA GA 30066 | FIRST CONTINENTAL CORPORATION Occupation | 10-28-1996 | \$100.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ 200.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------------------------|--------------------------|------------------------------------|
| JAMES M. MASSENGALE 210 ASHFORD CIRCLE LAGRANGE GA 30240-8800 | MILLIKEN AND COMPANY Occupation | 10-28-1996 | \$70.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ 245.00 | | | |

SUBTOTAL of Receipts This Page (optional)

99.04.393.3103

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)

> BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| DAVID H. MCGINNIS POST OFFICE BOX 970 MARIETTA GA 30061-0970 | CW MATTHEWS CONT. CO., INC. Occupation | 10-28-1996 | \$100.00 |
| Receipt For: _____ Primary _____ Other | MANAGEMENT Aggregate Year-to-Date > \$ | \$200.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------|--------------------------|------------------------------------|
| TONY W. MORRIS 765 PARK AVENUE LINDALE GA 30147 | Occupation | 10-28-1996 | \$50.00 |
| Receipt For: _____ Primary _____ Other | Aggregate Year-to-Date > \$ | \$275.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| ROBERT K. NAGUSZEWSKI 13 REYNOLDS LANE KINGSTON GA 30145 | SELF Occupation | 10-28-1996 | \$50.00 |
| Receipt For: _____ Primary _____ Other | PHYSICIAN Aggregate Year-to-Date > \$ | \$300.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| THOMAS N. PIRKLE 628 LAKEWOOD DRIVE LAGRANGE GA 30240 | Occupation | 10-28-1996 | \$38.00 |
| Receipt For: _____ Primary _____ Other | RETIRED Aggregate Year-to-Date > \$ | \$226.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-----------------------------|--------------------------|------------------------------------|
| LARRY D. POGUE 224 TATUM RIDGE ROAD CATERSVILLE GA 30120 | Occupation | 10-28-1996 | \$200.00 |
| Receipt For: _____ Primary _____ Other | Aggregate Year-to-Date > \$ | \$400.00 | |

SUBTOTAL of Receipts This Page (optional)

104-393-3104

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

Page 28 of 55
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------------|--------------------------|------------------------------------|
| BURNELL REDDING 2381 LEE PLACE VILLA RICA GA 30180 | SELF Occupation | 10-28-1996 | \$100.00 |
| REAL ESTATE | | | |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| SHARON L. REDIKER 1545 SUNBOW FALLS LANE, APT 101 RALEIGH NC 27609 | Occupation | 10-28-1996 | \$200.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| PAUL W. SALERNO 6460 PICKETTS CROSSING ACWORTH GA 30101-7717 | COOK & SALERNO ENTERPRISES, INC. Occupation | 10-28-1996 | \$100.00 |
| PRESIDENT | | | |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$950.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------------|--------------------------|------------------------------------|
| LEWIS SISTRUNK 205 LAKEWOOD DRIVE CARRROLLTON GA 30117 | SELF Occupation | 10-28-1996 | \$200.00 |
| PHYSICIAN | | | |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$300.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| ALEX W. SMITH 1230 PEACHTREE ST. NE, STE. 310 ATLANTA GA 30309-3592 | SMITH, GAMBRELL, & RUSSELL Occupation | 10-28-1996 | \$50.00 |
| PARTNER | | | |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$300.00 |

SUBTOTAL of Receipts This Page (optional)

99 "04" 303 "3185

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

Page 27 of 55
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)
> BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-------------------------------------|--------------------------|------------------------------------|
| STANLEY TATE 405 FOGGY BOTTOM DRIVE CARROLLTON GA 30117 | SOUTHWIRE Occupation ATTORNEY | 10-28-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$650.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|----------------------------------|--------------------------|------------------------------------|
| RICHARD A. TIBBETTS 110 CAMERON POINTE DR LA GRANGE GA 30240 | TROUP EMS Occupation OWNER | 10-28-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$400.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-------------------------------|--------------------------|------------------------------------|
| FRANKLIN D. TIDWELL POST OFFICE BOX 1707 DOUGLASVILLE GA 30133 | SELF Occupation RETIRED | 10-28-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$600.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| WOODROW W. WAGNER 200 GLENRIDGE ROAD ROME GA 30161-7020 | THE AMERICAN LUBRICANTS Occupation MARKETING | 10-28-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$465.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---------------------------------------|--------------------------|------------------------------------|
| W. THOMAS WEATHERS, III 10 EAST PARK SQUARE, 5TH FLOOR MARIETTA GA 30090 | COBB COUNTY Occupation ATTORNEY | 10-28-1996 | \$30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$230.00 | |

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)
> BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|---|--------------------------|------------------------------------|
| CHARLES T. WHITE, JR. 23 DOGWOOD DRIVE CARTERSVILLE GA 30120 | MAYES-SUDDERTH, ETHERIDGE/REQUE Occupation ENGINEER | 10-28-1996 | \$75.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$445.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|---|--------------------------|------------------------------------|
| L.N. THOMPSON 113 MERIWEATHER CIRCLE MILLEDGEVILLE GA 31061 | T&S HARDWOODS, INC. Occupation FORESTER | 10-29-1996 | \$200.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$700.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|--|--------------------------|------------------------------------|
| LEE H. BASKEY 99 LANSING DRIVE KENNESAW GA 30144 | ATLANTIC ASSURANCE Occupation MANAGING PARTNER | 10-30-1996 | \$100.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$325.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|--|--------------------------|------------------------------------|
| HERBERT K. BLACK 340 CHIQUAPIN DRIVE MARIETTA GA 30064 | BLACK REALTY DEVELOPMENT CO. Occupation REAL ESTATE BROKER | 10-30-1996 | \$100.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$300.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|--------------------------------------|--------------------------|------------------------------------|
| GARLAND FAVORITO 3952 SPALDING HOLLOW NORCROSS GA 30092 | CASH MATE Occupation OWNER | 10-30-1996 | \$500.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$500.00 | |

SUBTOTAL of Receipts This Page (optional)

2025 RELEASE UNDER E.O. 14176

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Page 29 of 55
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| W. DAVID KNIGHT 305 OAKHURST LANE MARIETTA GA 30064 | SELF-EMPLOYED Occupation | 10-30-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | REAL ESTATE Aggregate Year-to-Date > \$ | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------|--------------------------|------------------------------------|
| C.A. LADEROUTE 950 BERKSHIRE ROAD, NE ATLANTA GA 30324 | RETIRED Occupation | 10-30-1996 | \$150.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| CHARLES H. LUMPKIN, JR. 418 BRADLEY STREET CARROLLTON GA 30117 | SELF Occupation | 10-30-1996 | \$105.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | ATTORNEY Aggregate Year-to-Date > \$ | | \$1,105.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| SAM ROBERTS POST OFFICE BOX 1917 DOUGLASVILLE GA 30133 | SELF-EMPLOYED Occupation | 10-30-1996 | \$280.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | INSURANCE AGENT Aggregate Year-to-Date > \$ | | \$280.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| STANLEY TATE 405 FOGGY BOTTOM DRIVE CARROLLTON GA 30117 | SOUTHWIRE Occupation | 10-30-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | ATTORNEY Aggregate Year-to-Date > \$ | | \$650.00 |

SUBTOTAL of Receipts This Page (optional)

BARR FOR CONGRESS

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300840 GA/07

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| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| DARRELLE E. TURNER 8608 ALE LANE VILLA RICA GA 30180 | Occupation | 10-30-1996 | \$280.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$360.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|----------------------------|--------------------------|------------------------------------|
| H.G. BROWN 628 OLD TOWN RD. VILLA RICA GA 30180 | JEAN HOSIERY Occupation | 10-31-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$3,300.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--------------------|--------------------------|------------------------------------|
| MICHAEL T. FLEMING 3211 LEMONS RIDGE DRIVE, NW ATLANTA GA 30339 | SELF Occupation | 10-30-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$3,015.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------------------|--------------------------|------------------------------------|
| R. G. HILL 412 GREENVILLE ST. LAGRANGE GA 30240 | R. G. HILL OIL Occupation | 10-29-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$2,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-------------------------|--------------------------|------------------------------------|
| MICHAEL R. MCCRAVY 3800 SWEET WATER CHURCH ROAD DOUGLASVILLE GA 30134-5557 | REQUESTED Occupation | 10-31-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$1,000.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300640 GAJ07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--------------------|--------------------------|------------------------------------|
| ROBERT SPRATLIN 240 CHEROKEE STREET, NE, SUITE 301 MARIETTA GA 30060 | SELF Occupation | 11-01-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$2,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| BILLY L. ASKEA 4600 SOMERSET ROAD SMYRNA GA 30082 | ASK-KAY ELECTRICAL CONTRS., INC. Occupation | 10-24-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--------------------|--------------------------|------------------------------------|
| OSCAR N. PERSONS ONE ATLANTIC CENTER, 1201 WEST PEA ATLANTA GA 30309-3424 | SELF Occupation | 11-04-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$2,250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| T. AUBREY SILVEY 371 HAMP JONES ROAD CARROLLTON GA 30117 | AUBREY SILVEY ENTERPRISES Occupation | 10-29-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$3,250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-------------------------------|--------------------------|------------------------------------|
| J.L. GRAY 616 RICHARDS RD., N.E. WHITE GA 30184 | DELLINGER MGMT. Occupation | 10-28-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$3,000.00 |

SUBTOTAL of Receipts This Page (optional)

DATE "SEE" "40" "66"

SCHEDULE A ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| JEFF R. MATTHEWS 2137 S. VAN WERT RD. VILLA RICA GA 30180 | SELF Occupation | 10-28-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | REAL ESTATE Aggregate Year-to-Date > \$ | | \$2,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| JOAN V. MAYER 814 CANNON RUN MARIETTA GA 30064 | MARIETTA DODGE & JEEP EAGLE Occupation | 10-31-1996 | \$60.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | STORE MANAGER Aggregate Year-to-Date > \$ | | \$1,320.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| PAUL D. WILKERSON 701 ROBERT WAY POWDER SPRINGS GA 30073 | WILKERSON PAPER CO., INC. Occupation | 10-29-1996 | \$291.10 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | PRESIDENT Aggregate Year-to-Date > \$ | | \$1,582.20 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| JAMES R. DELLINGER, JR. P.O. BOX 460 CARTERSVILLE GA 30120 | DELLINGER MANAGEMENT Occupation | 10-28-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | MGMT-CHEMICALS, MINING, REAL ESTATE Aggregate Year-to-Date > \$ | | \$2,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------|--------------------------|------------------------------------|
| STEPHEN SMITH 508 LAPORTE STREET ROME GA 30161 | RETIREED Occupation | 10-23-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$4,000.00 |

SUBTOTAL of Receipts This Page (optional)

1996-04-23 15:31

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Page 33 of 55
FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| BANNERSTER L. HARBIN, JR. 1825 MARTHA BERRY BOULEVARD ROME GA 30165 | HARBIN CLINIC Occupation PHYSICIAN | 10-23-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$1,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| ANTHONY W. HOLT 5503 MOLLIE LANE MABLETON GA 30059 | GLOCK, INC. Occupation MARKETING | 11-05-1996 | \$800.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$2,600.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| JIM HARRY 134 WINDRIDGE DRIVE LAGRANGE GA 30240 | SELF-EMPLOYED Occupation ATTORNEY | 10-31-1996 | \$70.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$860.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| EDWARD H. METZGER III 5365 NORTHWATER WAY DULUTH GA 30136 | SELF Occupation HVAC SALES ENGINEER | 11-03-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$2,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-----------------------------|--------------------------|------------------------------------|
| BOYCE DOOLEY 8 GREEN MEADOWS DRIVE TRION GA 30753 | REQUESTED Occupation | 11-01-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$3,000.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Page 34 of 55

FOR LINE NUMBER

11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---------------------------------|--------------------------|------------------------------------|
| JAMES W. MOSELEY 1104 MARTHA BERRY BOULEVARD ROME GA 30161 | SELF Occupation PHYSICIAN | 11-01-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | \$2,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---------------------------------|--------------------------|------------------------------------|
| GRANT LEWIS 999 TEXAS VALLEY ROAD, NW ROME GA 30165 | SELF Occupation PHYSICIAN | 11-02-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | \$3,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| J. MICHAEL WOMBLE P.O. BOX 55 DALLAS GA 30132 | SOUTH LIFE Occupation OWNER/OPERATOR | 10-24-1996 | \$2,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | \$6,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| HARVEY R. FARISH P. O. BOX 697 CEDAR BLUFF AL 35959-0697 | GARCHES, INC. Occupation OWNER/OPERATOR | 10-23-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | \$3,120.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-------------------------|--------------------------|------------------------------------|
| JOYCE C. SMITH 508 LAPORTE ST. ROME GA 30161-6243 | Occupation HOMEMAKER | 10-23-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | \$1,000.00 |

SUBTOTAL of Receipts This Page (optional)

ELECT 11-01-1996 11:04:00

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)
 > BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---------------------------------|--------------------------|------------------------------------|
| PAT ADAMS 1475 OLD SUMMERVILLE ROAD, NW ROME GA 30165 | SELF Occupation PHYSICIAN | 10-23-1996 | \$1,000.00 |
| Recpt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$3,040.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| EDWIN JOINSTON, JR. 5 RIVER VALLEY CT., S.W. ROME GA 30165 | REDMOND ANESTHESIA Occupation PHYSICIAN | 10-30-1996 | \$1,000.00 |
| Recpt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$5,000.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| THOMAS PATTON 1819 PEACHTREE RD., N.E., STE. 510 ATLANTA GA 30309 | TRITON, INC. Occupation PRESIDENT | 11-01-1996 | \$1,000.00 |
| Recpt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$3,000.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| HAROLD C. PALMER PALMER VILLAGE - BOX 867 DOUGLASVILLE GA 30134 | PALMER CHEMICAL & EQUIPMENT COM Occupation PRESIDENT, CEO | 10-31-1996 | \$1,000.00 |
| Recpt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$2,000.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| PHILLIP R. HAGOOD 611 OREGON DR. MARIETTA GA 30064 | STATEWIDE MORTGAGE COMPANY Occupation VP/REGIONAL MANAGER | 11-02-1996 | \$1,000.00 |
| Recpt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$2,000.00 | |

SUBTOTAL of Receipts This Page (optional)

2025 RELEASE UNDER E.O. 14176

SCHEDULE A ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| JAMES NEY 554 HACKNEY DRIVE MARIETTA GA 30068 | HOLT, NEY, ZATCOFF & WASSERMAN Occupation ATTORNEY | 11-01-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | \$2,000.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| CHARLES E. CLARK P.O. BOX 1244 MARIETTA GA 30061 | SELF-EMPLOYED Occupation ATTORNEY | 10-24-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | \$200.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| JANICE M. HIX 3007 QUEEN ANNE COURT DUNWOODY GA 30350 | RIVERCREST MORTGAGE Occupation MORTGAGE BROKER | 10-24-1996 | \$15.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | \$1,890.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| ROBERT LAMUTT 4667 JEFFERSON TOWNSHIP PL. MARIETTA GA 30066 | SELF-EMPLOYED Occupation REAL ESTATE | 10-24-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | \$500.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| WILLIAM A. SMITH 4856 CLARKE LAKE WAY ACWORTH GA 30102 | WOODSTOCK STORAGE Occupation OWNER | 10-24-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | \$500.00 | |

SUBTOTAL of Receipts This Page (optional)

2025 RELEASE UNDER E.O. 14176

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Page 37 of 55
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)
> BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-----------------------------------|--------------------------|------------------------------------|
| JAMES E. GARNER 3043 POPE ROAD DOUGLASVILLE GA 30135 | GARNER & ASSOCIATES Occupation | 10-28-1996 | \$100.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$400.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--------------------|--------------------------|------------------------------------|
| JAMES HUYNH 6147 QUEEN ANNE CT. NORCROSS GA 30093 | SELF Occupation | 10-28-1996 | \$70.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$1,105.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---------------------------------------|--------------------------|------------------------------------|
| PHILIP C. WAHLBOM 3331 MILLSTREAM LANE MARIETTA GA 30060-6215 | MARATHON COMMUNICATIONS Occupation | 10-28-1996 | \$500.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$2,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-----------------------------|--------------------------|------------------------------------|
| KENNETH R. BERNARD, JR. 9407 LOGAN LANE DOUGLASVILLE GA 30135 | SELF-EMPLOYED Occupation | 10-28-1996 | \$500.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--------------------|--------------------------|------------------------------------|
| KIPPARD BERRY 5083 GRANADA WAY DOUGLASVILLE GA 30135 | SELF Occupation | 10-28-1996 | \$500.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$2,000.00 |

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Page 38 of 55
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------------------------|-----------------------------|------------------------------------|
| ALPHA FOWLER POST OFFICE BOX 866 DOUGLASVILLE GA 30133 | DOUGLAS FEDERAL BANK Occupation | 10-28-1996 | \$210.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | CHAIRMAN / CEO | Aggregate Year-to-Date > \$ | \$1,710.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--------------------|-----------------------------|------------------------------------|
| HARRY H. MCNEEL P.O. BOX 3236 MARIETTA GA 30061 | SELF Occupation | 10-24-1996 | \$30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | GENERAL CONTRACTOR | Aggregate Year-to-Date > \$ | \$230.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---------------------------------|-----------------------------|------------------------------------|
| RANDOLPH P. SUMNER RT. 1 814 BUTTERMILK ROAD CAVE SPRING GA 30124 | THE HARBIN CLINIC Occupation | 11-02-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | PHYSICIAN | Aggregate Year-to-Date > \$ | \$800.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|-----------------------------|------------------------------------|
| JAMES A. ROWE, JR. 323 FOGGY BOTTOM DR. CARROLLTON GA 30117 | Occupation | 10-22-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | Aggregate Year-to-Date > \$ | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|-----------------------------|------------------------------------|
| CAROLE B. MOORE 5654 RIVER OAKS PL. ATLANTA GA 30327 | Occupation | 10-31-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | HOMEMAKER | Aggregate Year-to-Date > \$ | \$1,000.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|--|--------------------------|------------------------------------|
| GAIL MILLER 5642 MARTHA BERRY BOULEVARD ARMUCHEE GA 30105 | S.L. MILLER & SONS LUMBER Occupation OWNER | 11-01-1996 | \$300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$1,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|--|--------------------------|------------------------------------|
| RICHARD H. LOWRANCE 831 CLIFTON ROAD, NE ATLANTA GA 30307 | JEDMED INVESTMENT CO. Occupation VP. SALES | 11-01-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$300.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|---|--------------------------|------------------------------------|
| J. PHILLIP GINGREY 632 N. ST. MARY'S LANE MARIETTA GA 30064 | MARIETTA OB-GYN AFFILIATES Occupation PHYSICIAN | 11-04-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$1,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|---|--------------------------|------------------------------------|
| EUGENE R. ARNOLD 4339 TURNBERRY DRIVE HIRAM GA 30141 | SELF Occupation CONSULTANT (CUSTOMER SERVICE) | 10-29-1996 | \$25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$425.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|---|--------------------------|------------------------------------|
| ERV GOODROE P.O. BOX 1431 PERRY GA 31069 | GEORGIA SUPPLIES ASSOC. Occupation EXECUTIVE DIRECTOR | 10-30-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$500.00 |

SUBTOTAL of Receipts This Page (optional)

BATE "SEE" 110" 66

Use separate schedule for each category of the Detailed Summary Page

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| RONALD M. HENDRICKSON 1122B N. STAFFORD STREET ARLINGTON VA 22201 | Occupation | 10-21-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ 250.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---------------------------|--------------------------|------------------------------------|
| WILSON FREEMAN 77 EAST ANDREWS DRIVE NO. 377 ATLANTA GA 30305 | Occupation RETIRED | 11-02-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ 400.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| DONALD L. CHAPMAN 5253 BROOKE LAKE DRIVE ATLANTA GA 30338 | TUG MFG. CORP. Occupation CEO | 11-04-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ 750.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| JOHN B. RICE 2845 HIGHWAY 54, W HOGANSVILLE GA 30230 | RETIRED Occupation STATE EMPLOYEE | 11-01-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ 425.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| WILLIAM T. THORNTON POST OFFICE BOX 949 DOUGLASVILLE GA 30133 | DOUGLAS COUNTY BANK Occupation CHAIRMAN | 11-05-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ 600.00 | | | |

SUBTOTAL of Receipts This Page (optional)

2025 RELEASE UNDER E.O. 14176

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Page 41 of 55
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| N. D. HORTON, JR. P.O. BOX 4468 EATONTON GA 31024 | HORTON HOMES, INC. Occupation PRESIDENT | 11-04-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$1,050.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-------------------------------|--------------------------|------------------------------------|
| THOMAS D. BALLENGER, JR. 630 AMBER PLACE MARIETTA GA 30060 | Occupation RETIRED | 11-05-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$275.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------------------------|--------------------------|------------------------------------|
| JEROME J. FROELICH, JR. 1349 W. PEACHTREE ST, NW, STE. 1680 ATLANTA GA 30309 | SELF Occupation ATTORNEY | 11-04-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-------------------------------------|--------------------------|------------------------------------|
| ROBERTA S. COOK 3171 COUNTRY CLUB COURT, NW KENNESAW GA 30144-2079 | SELF Occupation HOMEMAKER | 11-04-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$1,300.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| EDWARD W. BREWSTER, JR. 1799 HORSELEG CREEK ROAD, SW ROME GA 30161 | ROME RADIOLOGY GROUP Occupation PHYSICIAN | 11-01-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$1,200.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

| | |
|---|--------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | Page 42 of 55 |
| | FOR LINE NUMBER 11(e)(1) |

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)
 > BOB BARR FOR CONGRESS CD0300840 GA07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|--|--------------------------|------------------------------------|
| WILLIAM L. CAMP 204 WOODGLEN ROAD ROME GA 30161 | CAMP OIL Occupation CHAIRMAN/CEO | 11-04-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | \$1,500.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|--|--------------------------|------------------------------------|
| JOHN H. BENEFIELD 308 HENDERSON STREET CEDARTOWN GA 30125 | CITY OF CEDARTOWN Occupation CEDARTOWN CITY COMMISSIONER | 10-31-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | \$900.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|-------------------------------|--------------------------|------------------------------------|
| W.H. MILLER 203 LUCKIE ST. CARTERSVILLE GA 30120 | Occupation RETIRED | 11-02-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | \$1,600.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|-------------------------------------|--------------------------|------------------------------------|
| SEYMOUR SOLODAR 4390 NORTHSIDE CHASE ATLANTA GA 30327 | SELF Occupation PHYSICIAN | 11-02-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | \$2,000.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|-------------------------------|--------------------------|------------------------------------|
| DWIGHT G. HARLEY, SR. POST OFFICE BOX 69 LINCOLNTON GA 30817 | Occupation RETIRED | 10-30-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | \$200.00 | |

SUBTOTAL of Receipts This Page (optional)

FORM 363-40-66

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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

NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS CDD300640 GAVI

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| WOODROW W. WAGNER 200 GLENRIDGE ROAD ROME GA 30161-7020 | THE AMERICAN LUBRICANTS Occupation | 10-30-1996 | \$50.00 |
| Receipt For: _____ Primary _____ Other | MARKETING Aggregate Year-to-Date > \$ | | \$465.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| J. BRYANT DURHAM P.O. BOX 5595 ROME GA 30162 | JONES, BYINGTON, DURHAM, AND PATR Occupation | 10-30-1996 | \$1,000.00 |
| Receipt For: _____ Primary _____ Other | ATTORNEY Aggregate Year-to-Date > \$ | | \$2,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-----------------------------|--------------------------|------------------------------------|
| ARLIN R. EWING 22 SEABREEZE LAKE RD. BUCHANAN GA 30113 | Occupation | 10-30-1996 | \$200.00 |
| Receipt For: _____ Primary _____ Other | Aggregate Year-to-Date > \$ | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| KENNETH E. BORINO POST OFFICE BOX 1608 DALTON GA 30722 | HARDWICK HOLDING CO. Occupation | 10-23-1996 | \$500.00 |
| Receipt For: _____ Primary _____ Other | BANKING Aggregate Year-to-Date > \$ | | \$1,050.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| JOSEPH J. BURCH 38 HUNTINGTON RD. ROME GA 30165 | SELF-EMPLOYED Occupation | 10-23-1996 | \$1,000.00 |
| Receipt For: _____ Primary _____ Other | PHYSICIAN Aggregate Year-to-Date > \$ | | \$1,000.00 |

SUBTOTAL of Receipts This Page (optional)

2025 FEB 10 00

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---|--------------------------|------------------------------------|
| DONALD M. KEISER P.O. BOX 1314 ROME GA 30134 | TRUST COMPANY BANK Occupation PRESIDENT | 10-22-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$395.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| PATRICIA C. HBBARD 593 RADIO SPRINGS RD., SW ROME GA 30165 | Occupation | 10-23-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$200.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| WILLIAM R. JAY 1191 DORRIS ROAD DOUGLASVILLE GA 30134 | HOME DEPOT, INC. Occupation SYSTEMS ENGINEER | 10-18-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$200.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-----------------------|--------------------------|------------------------------------|
| FRANCES M. DAVIS 2728 HORSELEG CREEK RD. ROME GA 30165 | Occupation RETIRED | 10-22-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$200.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---------------------------------------|--------------------------|------------------------------------|
| JAMES HUYNH 6147 QUEEN ANNE CT. NORCROSS GA 30093 | SELF Occupation REAL ESTATE | 10-25-1996 | \$35.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$1,105.00 | |

SUBTOTAL of Receipts This Page (optional)

FORM 3020-10-96

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| JIM SERRATE POST OFFICE BOX 7254 MARIETTA GA 30065 | JIM SERRATE FOR STATE REPRESENTATIVE Occupation | 10-24-1996 | \$15.00 |

Receipt For: Primary General
 Other Aggregate Year-to-Date > \$ 215.00

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--------------------|--------------------------|------------------------------------|
| DARRELLE E. TURNER 8608 ALE LANE VILLA RICA GA 30180 | Occupation | 10-24-1996 | \$30.00 |

Receipt For: Primary General
 Other Aggregate Year-to-Date > \$ 360.00

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---------------------------------|--------------------------|------------------------------------|
| CHARLES C. CLAY 539 HARDAGE TRACE MARIETTA GA 30064-1976 | SELF-EMPLOYED Occupation | 10-24-1996 | \$300.00 |

Receipt For: Primary General
 Other Aggregate Year-to-Date > \$ 300.00

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| HERBERT K. BLACK 340 CHIQUAPIN DRIVE MARIETTA GA 30064 | BLACK REALTY DEVELOPMENT CO. Occupation | 10-24-1996 | \$30.00 |

Receipt For: Primary General
 Other Aggregate Year-to-Date > \$ 300.00

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| PAUL GOBLE 8965 BRIGHT STAR RD. DOUGLASVILLE GA 30134 | GA HYDRAULIC CYLINDERS, INC. Occupation | 11-04-1996 | \$1,000.00 |

Receipt For: Primary General
 Other Aggregate Year-to-Date > \$ 1,100.00

SUBTOTAL of Receipts This Page (optional)

99 "04" 393 "3204"

SCHEDULE A ITEMIZED RECEIPTS

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

Page 48 of 55
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
> BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------------------------|--------------------------|------------------------------------|
| MARSHALL BANDY, JR. 505 LA FAYETTE ST. RINGGOLD GA 30736 | SELF Occupation ATTORNEY | 11-04-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$2,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| JUDITH L. HUGHES 4906 S. BENT PINE CT. DOUGLASVILLE GA 30135 | Occupation | 10-31-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| JAMES T. WILLOUGHBY 451 CHESTNUT HILL ROAD MARIETTA GA 30064 | WILLOUGHBY & SEWELL DEVELOPMEN Occupation PRESIDENT | 11-01-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$1,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| JERRELL J. JORDAN POST OFFICE BOX 668 DOUGLASVILLE GA 30133-0668 | SIX FLAGS Occupation VP. OPERATIONS | 10-30-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$350.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| JANICE M. HIX 3007 QUEEN ANNE COURT DUNWOODY GA 30350 | RIVERCREST MORTGAGE Occupation MORTGAGE BROKER | 11-01-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$1,890.00 |

SUBTOTAL of Receipts This Page (optional)

FORM 2025 40 55

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|------------------|--------------------------|--------------------------------------|
| ROBLEY D. EVANS 125 SADDLE MOUNTAIN ROAD ROME GA 30161 | Occupation | 11-01-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | RETIREED | Aggregate Year-to-Date > \$ 1,200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|------------------|--------------------------|------------------------------------|
| GEORGE M. STANLEY, JR. 525 MILLER ROAD HOGANSVILLE GA 30230-3770 | Occupation | 11-02-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | RETIREED | Aggregate Year-to-Date > \$ 225.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|------------------|--------------------------|------------------------------------|
| BEN S. GILMER 2767 PEACHTREE ROAD, N.E., NO. 10 ATLANTA GA 30305 | Occupation | 10-30-1996 | \$25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | RETIREED | Aggregate Year-to-Date > \$ 313.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|------------------|--------------------------|------------------------------------|
| CHIEN TOA CHEN 5007 ZEBULON ROAD MACON GA 31210-2131 | Occupation | 10-25-1996 | \$225.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | RETIREED | Aggregate Year-to-Date > \$ 375.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|------------------|--------------------------|------------------------------------|
| ROBERT R. POPE 4947 CHAPEL CROSSING DOUGLASVILLE GA 30135 | Occupation | 10-31-1996 | \$75.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | | RETIREED | Aggregate Year-to-Date > \$ 275.00 |

SUBTOTAL of Receipts This Page (optional)

2025 RELEASE UNDER E.O. 14176

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Page 48 of 55
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)

> BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| MATTIE CARR 8623 LAKE FORREST DR. DOUGLASVILLE GA 30134 | CARR CONSTRUCTION Occupation CO-OWNER | 10-30-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$500.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| ALBERT C. WOODROOF, III P.O. BOX 272 WEST POINT GA 31833 | SPECTRUM STORES Occupation PRESIDENT | 10-31-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$500.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| DON WORLEY 146 NORTH FAIRGROUND ST, NW MARIETTA GA 30060 | WORLEY SCHILLING & RANDALL Occupation INSURANCE AGENT | 10-30-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$250.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| JAMES RHODEN, JR. 1900 THE EXCHANGE, SUITE 500 ATLANTA GA 30339 | FUTREN CORPORATION Occupation OWNER | 11-01-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$1,000.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| LOIS H. LAZARO 6040 RIVER CHASE CIR. N.W. ATLANTA GA 30328 | NONE Occupation HOUSEWIFE | 11-02-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | \$680.00 | |

SUBTOTAL of Receipts This Page (optional)

99.04.393.3207

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---------------------------------|--------------------------|------------------------------------|
| HELEN PAUGH 80 BOYD MOUNTAIN ROAD, NW ADAIRSVILLE GA 30103 | GORDON HEALTH CARE NURSE | 11-02-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$680.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--------------------------------|--------------------------|------------------------------------|
| GEORGE A. BOSWORTH 330 TURNER MCCALL BLVD., SUITE 304 ROME GA 30165-2747 | HARBIN CLINIC PHYSICIAN | 10-20-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$400.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|----------------------------------|--------------------------|------------------------------------|
| DAVID E. GARRETT 94 RIDGEVIEW TRAIL, SE CARTERSVILLE GA 30120-6964 | COBB DOT TRAFFIC ENGINEER | 10-29-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$215.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| TERESA ROSS 3265 CRAWFORD CIR., NE MARIETTA GA 30066 | HOMEMAKER | 10-29-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| TONY W. MORRIS 765 PARK AVENUE LINDALE GA 30147 | | 10-29-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > \$ | | | \$275.00 |

SUBTOTAL of Receipts This Page (optional)

99.04.393.3208

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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

NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|--|--------------------------|------------------------------------|
| JOAN V. MAYER 814 CANNON RUN MARIETTA GA 30064 | MARIETTA DODGE & JEEP EAGLE Occupation STORE MANAGER | 10-30-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | \$1,320.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|--|--------------------------|------------------------------------|
| 100 DANGERFIELD RD. ALEXANDRIA VA 22314 | PRINTING INDUSTRIES OF AMERICA Occupation | 10-21-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | \$500.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|---|--------------------------|------------------------------------|
| 1850 M ST., NW WASHINGTON DC 20036 | BURSON-MARSTELLER PAC Occupation | 10-31-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | \$500.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|---|--------------------------|------------------------------------|
| C. E. VOYLES | VOYLES HONDA Occupation OWNER | 10-29-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | \$1,000.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|--|--------------------------|------------------------------------|
| ROBERT OLIVER 449 SHADOWLAWN RD. MARIETTA GA 30067 | SOUTH STAR BUILDERS Occupation PRESIDENT | 10-27-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$ | | \$3,000.00 | |

SUBTOTAL of Receipts This Page (optional)

2025 RELEASE UNDER E.O. 14176

SCHEDULE A ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)

> BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|-----------------------------|------------------------------------|
| | METAL ERECTORS | | |
| | Occupation | 10-30-1996 | \$1,000.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other | OWNER | Aggregate Year-to-Date > \$ | \$1,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-----------------------|-----------------------------|------------------------------------|
| EUGENE CHOATE 3959 SENTRY CROSSING MARIETTA GA 30068 | ATL. AM LIFE INS. CO. | | |
| | Occupation | 10-23-1996 | \$100.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other | EXECUTIVE | Aggregate Year-to-Date > \$ | \$300.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|-------------------|-----------------------------|------------------------------------|
| WES CLEAVELAND 114 GREENVILLE ST. LAGRANGE GA 30240 | CLEAVELAND MOTORS | | |
| | Occupation | 10-28-1996 | \$50.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other | OWNER | Aggregate Year-to-Date > \$ | \$225.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---------------------------|-----------------------------|------------------------------------|
| DELNO V. MULLINS 3424 NORTH SHARON CHURCH ROAD LOGANVILLE GA 30249 | ARMSTRONG'S LOCK & SUPPLY | | |
| | Occupation | 11-04-1996 | \$1,000.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other | EXECUTIVE | Aggregate Year-to-Date > \$ | \$2,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|-----------------------------|------------------------------------|
| THOMAS G. CANNON 4403 CHATTAHOOCHEE PLANTATION D MARIETTA GA 30067 | CANNON GROUP | | |
| | Occupation | 11-07-1996 | \$1,000.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other | MFG. HOUSING | Aggregate Year-to-Date > \$ | \$3,000.00 |

SUBTOTAL of Receipts This Page (optional)

1996-03-04 10:06

SCHEDULE A ITEMIZED RECEIPTS

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

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
> BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---------------------------|--------------------------|------------------------------------|
| ROBERT E. DAVIS 21 JOHN MADDOX DRIVE ROME GA 30165 | RETIRED Occupation | 11-04-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> Other <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | RETIRED | | \$1,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|---------------------------|--------------------------|------------------------------------|
| C. A. ROUSH, JR. POST OFFICE BOX 307 CARROLLTON GA 30117 | RETIRED Occupation | 11-09-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> Other <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | RETIRED | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| L. E. CAMP 2236 S. VAN WERT ROAD VILLA RICA GA 30180 | QUALITY TILE & MARBLE INC. Occupation | 11-05-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> Other <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | PRESIDENT | | \$1,100.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--|--------------------------|------------------------------------|
| ROBERT H. LEDBETTER, SR. P.O. BOX 151 ROME GA 30161 | R. H. LEDBETTER PROPERTIES, INC. Occupation | 11-01-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> Other <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | PRESIDENT | | \$1,750.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|--------------------------------|--------------------------|------------------------------------|
| EMILY BULLOCK | GOLDEN SOUTH Occupation | 11-15-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> Other <input checked="" type="checkbox"/> General Aggregate Year-to-Date > \$ | CO-OWNER | | \$200.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Page 53 of 55
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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

NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| WANDA P. RACHELS 315 WILDERLAKE CT. ATLANTA GA 30328 | HOMEMAKER | 11-22-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-------------------|--------------------------|------------------------------------|
| | AUSTELL BOX BOARD | 11-16-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| KENN E. GRIFFITH 82 BROW ROAD ROME GA 30165 | PHYSICIAN | 11-18-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | \$2,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| G. MARC WETHERINGTON 504 REDMOND ROAD ROME GA 30165 | PHYSICIAN | 11-24-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | \$1,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| JOHN T. GLOVER 3350 CUMBERLAND CIRCLE, SUITE 2200 ATLANTA GA 30339 | PRESIDENT | 11-25-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | \$2,000.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| ALI CHOUHAN 3974 BANKHEAD HIGHWAY LITHIA SPRINGS GA 30057 | AA ANIMAL HOSPITAL Occupation VETERINARIAN | 11-01-1996 | \$50.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$225.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| A. A. RICHARDSON 2446 SKYLAND TRAIL, NE ATLANTA GA 30319-3735 | RICHARDSON ELECTRONICS Occupation OWNER | 10-26-1996 | \$100.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$270.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| JAMES R. DELLINGER, JR. P.O. BOX 460 CARTERSVILLE GA 30120 | DELLINGER MANAGEMENT Occupation MGMT-CHEMICALS, MINING, REAL ESTATE | 10-28-1996 | \$500.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$2,500.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| CHRIS EDWARDS POST OFFICE BOX 369 SMYRNA GA 30081 | GLOCK, INC. Occupation DIRECTOR OF TRAINING | 10-31-1996 | \$700.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$2,400.00 | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|----------------------------------|--------------------------|------------------------------------|
| ROBERT J. SNELLING 756 REEVES LAKE DRIVE MARIETTA GA 30064 | DELTA Occupation PILOT | 10-28-1996 | \$100.00 |
| Recept For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General Aggregate Year-to-Date > \$ | | \$330.00 | |

SUBTOTAL of Receipts This Page (optional)

FORM 2025-10-06

SCHEDULE A ITEMIZED RECEIPTS

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

Page 55 of 55
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)
> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| JOHN B. WHITE P.O. DRAWER 1734 ATLANTA GA 30301 | COCA-COLA PAC Occupation VP, LEGISLATIVE AFFAIRS | 11-25-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | \$1,000.00 |

TOTAL This Period (last page this line number only) \$91,719.10

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A ITEMIZED RECEIPTS

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

Page 1 of 1
FOR LINE NUMBER 11(b)

Contributions From Political Party Committees

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

NAME OF COMMITTEE (in Full)
> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE 320 FIRST STREET, SE WASHINGTON | Occupation | 10-29-1996 | \$1,000.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other Aggregate Year-to-Date > \$ 1,383.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| SEVENTH DISTRICT REPUBLICAN PARTY 2197 LAKEVIEW PKWY. VILLA RICA | Occupation | 10-30-1996 | \$950.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other Aggregate Year-to-Date > \$ 950.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| THE NATIONAL REPUBLICAN CLUB OF CAPITOL HILL 300 FIRST STREET, SE WASHINGTON | Occupation | 11-08-1996 | \$837.02 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other Aggregate Year-to-Date > \$ 837.02 | | | |

| | |
|---|------------|
| TOTAL This Period (last page this line number only) | \$2,787.02 |
|---|------------|

SUBTOTAL of Receipts This Page (optional)

09-04-93 3215

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of Deferred Summary Page

Contributions from Political Committees

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

NAME OF COMMITTEE (in Full)
> BOB BARR FOR CONGRESS CD0300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|------------------|--------------------------|------------------------------------|
| AIR CONDITIONING CONTRACTORS OF AMERICA 1712 NEW HAMPSHIRE AVENUE WASHINGTON DC 20009 | Occupation | 10-18-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$0.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|------------------|--------------------------|------------------------------------|
| BELLSOUTH PAC SUITE 450, 400 CHASTAIN BOULEVARD KENNESAW GA 30144-5512 | Occupation | 11-04-1996 | \$1,500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$2,500.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|------------------|--------------------------|------------------------------------|
| BURSON-MARSTELLER POLITICAL ACTION CO 1850 M ST., NW WASHINGTON DC 20036 | Occupation | 10-31-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$500.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|------------------|--------------------------|------------------------------------|
| BANKAMERICA CORP. PAC 1401 NEW YORK AVENUE, SUITE 1110 WASHINGTON DC 20005 | Occupation | 10-29-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$2,000.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|--|------------------|--------------------------|------------------------------------|
| VETERINARY MEDICAL ASSOCIATION PAC 1101 VERMONT AVENUE, SUITE 710 WASHINGTON DC 20005 | Occupation | 10-23-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$500.00 | | | |

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A ITEMIZED RECEIPTS

Use separate schedules
(for each category of the
Detailed Summary Page

Contributions from Political Committees

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NAME OF COMMITTEE (In Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| FIRST UNION EMPLOYEES GOOD GOV'T FUND ONE FIRST UNION PLAZA CHARLOTTE NC 28288 | Occupation | 10-31-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$500.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| EMPLOYEES OF NORTHROP GRUMMAN PAC 1234 6TH ST. #204 SANTA MONICA CA 90401 | Occupation | 10-25-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$500.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| FAITH, FAMILY AND FREEDOM PAC POST OFFICE BOX 76766 WASHINGTON DC 20002 | Occupation | 10-31-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$1,000.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| FARM CREDIT PAC 50 F STREET, SUITE 900 WASHINGTON DC 20001 | Occupation | 10-23-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$1,000.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| EQUIFAX PAC 1600 PEACHTREE STREET, NW ATLANTA GA 30309 | Occupation | 10-29-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$250.00 | | | |

SUBTOTAL of Receipts This Page (optional)

47 393 3217

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of Detailed Summary Page

Page 3 of 8
FOR LINE NUMBER 11(c)

Contributions from Political Committees

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NAME OF COMMITTEE (In Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| GEORGIA MARBLE COMPANY PAC 1201 ROBERTS BOULEVARD 100 BUILDING KENNESAW GA 30144 | Occupation | 10-29-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > | | | \$2,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| GENERAL ELECTRIC COMPANY POLITICAL AC 1299 PENNSYLVANIA AVE, NW, SUITE 110 WASHINGTON DC 20004-2407 | Occupation | 10-28-1996 | \$50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > | | | \$50.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| GEORGIA ASSOCIATION OF PETROLEUM PAC 900 N. HAIRSTON RD., SUITE D STONE MOUNTAIN GA 30083 | Occupation | 10-18-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > | | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| INDEPENDENT BANKERS PAC ONE THOMAS CIRCLE, N.W., SUITE 950 WASHINGTON D.C. 20005 | Occupation | 11-20-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > | | | \$2,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| INSTITUTE OF MAKERS OF EXPLOSIVES PAC 1120 19TH STREET, SUITE 310 WASHINGTON DC 20036-3605 | Occupation | 10-18-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > | | | \$2,000.00 |

SUBTOTAL of Receipts This Page (optional)

2025 RELEASE UNDER E.O. 14176

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Political Committees

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NAME OF COMMITTEE (In Full)
 > BOB BARR FOR CONGRESS C00300840 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| INSTITUTE OF MAKERS OF EXPLOSIVES PAC 1120 19TH STREET, SUITE 310 WASHINGTON DC 20036-3605 | Occupation | 11-25-1996 | \$1,500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$2,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| LAW ENFORCEMENT ALLIANCE OF AMERICA 7700 LEESBURG PIKE, STE. 421 FALLS CHURCH VA 22043 | Occupation | 10-31-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$200.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| GOODYEAR GOOD GOVERNMENT FUND PAC 1144 EAST MARKET STREET AKRON OH 44316-0001 | Occupation | 10-29-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| DEALERS ELECTION ACTION COMMITTEE PA 8400 WESTPARK DRIVE MCLEAN VA 22102 | Occupation | 10-29-1996 | \$5,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$6,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| MCGUINNESS & HOLT PAC 400 N. CAPITOL ST., NW, #585 WASHINGTON DC 20001 | Occupation | 10-31-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$1,000.00 |

SUBTOTAL of Receipts This Page (optional)

Contributions from Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| RIVERWOOD EMPLOYEE ACTION PROGRAM 1625 K ST., NW, SUITE 750 WASHINGTON DC 20006 | Occupation | 10-30-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| ACTION COMMITTEE FOR RURAL ELECTRIFIC 4701 WILSON BOULEVARD ARLINGTON VA 22203-1860 | Occupation | 10-29-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$2,500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| UPSPAC 55 GLENLAKE PARKWAY, NE ATLANTA GA 30328 | Occupation | 10-29-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$2,000.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| SOCIETY OF INDEPENDENT OF GASOLINE MA 11911 FREEDOM DR., SUITE 590 RESTON VA 20190-5602 | Occupation | 10-31-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$250.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| SOUTHERN STATES P.B.A. PAC 1517 SOUTHLAKE PKWY. MORROW GA 30260 | Occupation | 10-30-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input checked="" type="checkbox"/> Aggregate Year-to-Date > | | | \$1,000.00 |

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A ITEMIZED RECEIPTS

Contributions from Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| GTE POLITICAL ACTION CLUB 245 PERIMETER CENTER PARKWAY ATLANTA GA 30346 | Occupation | 10-18-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$500.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| MEAD PAC 1667 K STREET, SUITE 420 WASHINGTON DC 20006 | Occupation | 10-23-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$500.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| TRIAL LAWYERS OF AMERICA PAC 1050 11ST STREET WASHINGTON DC 20007 | Occupation | 10-23-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$500.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| UNION CAMP CORPORATION PAC 1600 VALLEY RD. WAYNE NJ 07470 | Occupation | 11-01-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$500.00 | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| SAFARI CLUB INTERNATIONAL PAC 1001 26TH STREET, SUITE 902 WASHINGTON DC 20037 | Occupation | 10-29-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > \$500.00 | | | |

SUBTOTAL of Receipts This Page (optional)

2025 RELEASE UNDER E.O. 14176

SCHEDULE A ITEMIZED RECEIPTS

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

FOR LINE NUMBER

11(c)

Contributions from Political Committees

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NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|------------------|--------------------------|------------------------------------|
| WEST PUBLISHING PAC 610 OPPERMAN DRIVE, POST OFFICE BOX ST. PAUL MN 55164-0526 | Occupation | 10-18-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > | | | \$500.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt This Period |
|---|------------------|--------------------------|------------------------------------|
| REMINGTON ARMS COMPANY PAC 870 REMINGTON DRIVE, POST OFFICE BO MADISON NC 27025-0700 | Occupation | 10-29-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Aggregate Year-to-Date > | | | \$500.00 |

| | |
|---|-------------|
| TOTAL This Period (last page this line number only) | \$27,950.00 |
|---|-------------|

| |
|---|
| SUBTOTAL of Receipts This Page (optional) |
|---|

99.04.393.3223

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

Use separate schedule
for each category of the
Detailed Summary Page

FOR LINE NUMBER

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

NAME OF COMMITTEE (In Full)

> BOB BARR - CONGRESS C00300640 GA/07

AT&T

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|--|--------------------------|---|
| AT&T P O BOX 598010 ORLANDO, FL 32859 | TELEPHONE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other <input type="checkbox"/> General | 11-01-1996 | \$810.02 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| B & B DESIGNS 645 HENDERSON DRIVE, STE 8 CARTERSVILLE GA 30120 | SECURITY FOR V.P. QUAYLE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other <input type="checkbox"/> General | 11-07-1996 | \$72.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|--|--------------------------|---|
| BILL ADAMS P O BOX 215 DALLAS GA 30132 | REIM. <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other <input type="checkbox"/> General | 11-01-1996 | \$4,117.21 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| BILL ADAMS P O BOX 215 DALLAS GA 30132 | SALARY <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other <input type="checkbox"/> General | 11-01-1996 | \$1,000.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| BILL ADAMS P O BOX 215 DALLAS GA 30132 | SALARY <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other <input type="checkbox"/> General | 11-15-1996 | \$2,000.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|--|--------------------------|---|
| COBB GALLERIA MASTERPIE TWO GALLERIA PKWY. ATLANTA, GA 30339 | ROOM RENTAL <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other <input type="checkbox"/> General | 11-05-1996 | \$2,666.06 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement |
|---|-------------------------|
|---|-------------------------|

SUBTOTAL of Receipts This Page (optional)

11-04-1996 10:30 AM

99.04.393.3225

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

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

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

DOUGLAS CO. SENTINEL

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| DOUGLAS CO. SENTINEL 6405 FAIRBURN ROAD DOUGLASVILLE, GA 30133 | ADVERTISING/PRINT ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-08-1996 | \$640.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
|---|-------------------------|--------------------------|---|

| | | | |
|---|---|------------|---------|
| FEDERAL EXPRESS 229 PEACHTREE ST NE ATLANTA, GA 30303 | OVERNIGHT POSTAGE ____ Primary <input checked="" type="checkbox"/> General ____ Other | 10-18-1996 | \$83.00 |
|---|---|------------|---------|

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
|---|-------------------------|--------------------------|---|

| | | | |
|---|---|------------|----------|
| FEDERAL EXPRESS 229 PEACHTREE ST NE ATLANTA, GA 30303 | OVERNIGHT POSTAGE ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-04-1996 | \$141.00 |
|---|---|------------|----------|

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
|---|-------------------------|--------------------------|---|

| | | | |
|---|---|------------|---------|
| FEDERAL EXPRESS 229 PEACHTREE ST NE ATLANTA, GA 30303 | OVERNIGHT POSTAGE ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-07-1996 | \$38.00 |
|---|---|------------|---------|

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
|---|-------------------------|--------------------------|---|

| | | | |
|---|---|------------|---------|
| FEDERAL EXPRESS 229 PEACHTREE ST NE ATLANTA, GA 30303 | OVERNIGHT POSTAGE ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-08-1996 | \$25.50 |
|---|---|------------|---------|

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
|---|-------------------------|--------------------------|---|

| | | | |
|--|--|------------|---------|
| JEFF BREEDLOVE 1306 BAYLISS DR ALEXANDRIA VA 22302 | EXP. REIM. - OFFICE SUPPLIES ____ Primary <input checked="" type="checkbox"/> General ____ Other | 10-18-1996 | \$92.58 |
|--|--|------------|---------|

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement |
|---|-------------------------|
|---|-------------------------|

SUBTOTAL of Receipts This Page (optional)

99 "04" 39 "22" "22" "22" "10" "66"

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

Use separate schedule for each category of disbursement. Detailed Summary Page

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

JEFF BREEDLOVE

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|--|--------------------------|---|
| JEFF BREEDLOVE 1106 BAYLISS DR ALEXANDRIA VA 22302 | SALARY ____ Primary <input checked="" type="checkbox"/> General ____ Other | 10-18-1996 | \$1,200.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|--|--------------------------|---|
| JEFF BREEDLOVE 1106 BAYLISS DR ALEXANDRIA VA 22302 | EXP. REIM. - OFFICE SUPPLIES ____ Primary <input checked="" type="checkbox"/> General ____ Other | 10-23-1996 | \$441.95 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|--|--------------------------|---|
| JEFF BREEDLOVE 1106 BAYLISS DR ALEXANDRIA VA 22302 | EXP. REIM. - OFFICE SUPPLIES ____ Primary <input checked="" type="checkbox"/> General ____ Other | 10-23-1996 | \$57.01 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|--|--------------------------|---|
| JEFF BREEDLOVE 1106 BAYLISS DR ALEXANDRIA VA 22302 | EXP. REIM. - OFFICE SUPPLIES ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-01-1996 | \$26.25 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|--|--------------------------|---|
| JEFF BREEDLOVE 1306 BAYLISS DR ALEXANDRIA VA 22302 | SALARY ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-01-1996 | \$1,200.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| JEFF BREEDLOVE 1306 BAYLISS DR ALEXANDRIA VA 22302 | TELEPHONE ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-01-1996 | \$217.99 |

Full Name, Mailing Address and Zip Code Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

99.04.393.3227

SCHEDULE B ITEMIZED DISBURSEMENTS

OPERATING EXPENDITURES

Use separate schedule for each category of the Detailed Summary Page

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300840 GA/07

JEFF BREEDLOVE

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| JEFF BREEDLOVE 1306 BAYLISS DR ALEXANDRIA VA 22302 | REIM. GAS ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-01-1996 | \$26.50 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|--|--------------------------|---|
| JEFF BREEDLOVE 1306 BAYLISS DR ALEXANDRIA VA 22302 | EXP. REIM. - OFFICE SUPPLIES ____ Primary <input checked="" type="checkbox"/> General ____ Other | 10-18-1996 | \$92.58 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| JEFF BREEDLOVE 1306 BAYLISS DR ALEXANDRIA VA 22302 | EXP. REIM. - TRAVEL ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-15-1996 | \$25.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| JEFF BREEDLOVE 1306 BAYLISS DR ALEXANDRIA VA 22302 | EXP. REIM. - TRAVEL ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-15-1996 | \$200.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| JEFF BREEDLOVE 1306 BAYLISS DR ALEXANDRIA VA 22302 | EXP. REIM. - TRAVEL ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-15-1996 | \$200.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|--|--------------------------|---|
| JEFF BREEDLOVE 1306 BAYLISS DR ALEXANDRIA VA 22302 | SALARY ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-15-1996 | \$3,234.55 |

Full Name, Mailing Address and Zip Code Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

2025 RELEASE UNDER E.O. 14176

SCHEDULE B ITEMIZED DISBURSEMENTS
 OPERATING EXPENDITURES

Use separate schedule for each category of the Detailed Summary Page

Page 5 of 20
 FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

> BOB BARR - CONGRESS C00300640 GA/07

JEFF BREEDLOVE

Date (month, date, year)

Amount of Each Disbursement This Period

JEFF BREEDLOVE

REIM OFFICE SUPPLIES

1306 BAYLISS DR

____ Primary General
 ____ Other

11-18-1996

\$250.00

ALEXANDRIA VA 22302

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

OFFICE DEPOT

OFFICE SUPPLIES

119 COBB PKY N

____ Primary General
 ____ Other

11-04-1996

\$32.70

MARIETTA, GA 30062

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

POSTMASTER

POSTAGE

POSTMASTER

____ Primary General
 ____ Other

10-18-1996

\$10.85

MARIETTA GA 30067

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

POSTMASTER

POSTAGE

POSTMASTER

____ Primary General
 ____ Other

10-23-1996

\$96.00

MARIETTA GA 30067

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

POSTMASTER

POSTAGE

POSTMASTER

____ Primary General
 ____ Other

10-23-1996

\$16.50

MARIETTA GA 30067

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

POSTMASTER

POSTAGE

POSTMASTER

____ Primary General
 ____ Other

10-30-1996

\$320.00

MARIETTA GA 30067

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

99 "04" 303 "3229

SCHEDULE B ITEMIZED DISBURSEMENTS

OPERATING EXPENDITURES

Use separate schedules for each category of Detailed Summary Page

Page 8 of 20
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

> BOB BARR - CONGRESS C00300640 GA/07

BILL ADLER

Date (month, date, year)

Amount of Each Disbursement This Period

BILL ADLER

PHOTOS

1870 THE EXCHANGE

ATLANTA, GA 30339

Primary General
Other

11-07-1996

\$75.00

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

HAROLD RICHARDSON

TRAVEL EXPENSES

3798 LAKE DR

SMYRNA GA 30080

Primary General
Other

11-06-1996

\$1,171.30

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

BOB HERRIOTT

REIM.

2197 LAKEVIEW PKWY.

VILLA RICA, GA 30180

Primary General
Other

11-01-1996

\$438.00

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

BOB HERRIOTT

REIM.

2197 LAKEVIEW PKWY.

VILLA RICA, GA 30180

Primary General
Other

11-15-1996

\$488.00

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

GA POWER

UTILITY

333 PIEDMONT AVE NE

ATLANTA GA 30308

Primary General
Other

11-15-1996

\$148.72

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

MIKE GIBBS

BAND VICTORY NIGHT

Primary General
Other

11-05-1996

\$1,000.00

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

11-04-96 3:33 PM

SCHEDULE B

ITEMIZED DISBURSEMENTS

OPERATING EXPENDITURES

Use separate schedule for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

CAV

Date (month, date, year)

Amount of Each Disbursement This Period

CAV

AUDIO VISUAL EQUIP.

| | | | | |
|---------------|---|---------------|------------|----------|
| _____ Primary | X | _____ General | 11-05-1996 | \$726.82 |
| _____ Other | | | | |

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

STACIE RUMENAP

EXP. REIM. - PHONE, POSTAGE

50 MAGET STREET

| | | | | |
|---------------|---|---------------|------------|---------|
| _____ Primary | X | _____ General | 11-01-1996 | \$69.10 |
| _____ Other | | | | |

MARIETTA GA 30060

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

STACIE RUMENAP

EXP. REIM. - OFFICE SUPPLIES

50 MAGET STREET

| | | | | |
|---------------|---|---------------|------------|----------|
| _____ Primary | X | _____ General | 11-07-1996 | \$127.75 |
| _____ Other | | | | |

MARIETTA GA 30060

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

BOB BARR

FUND RAISERS - FOOD

631 CONCORD ROAD

| | | | | |
|---------------|---|---------------|------------|----------|
| _____ Primary | X | _____ General | 10-18-1996 | \$105.40 |
| _____ Other | | | | |

SMYRNA GA 30082

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

BOB BARR

REIM. TRAVEL

631 CONCORD ROAD

| | | | | |
|---------------|---|---------------|------------|---------|
| _____ Primary | X | _____ General | 11-04-1996 | \$29.02 |
| _____ Other | | | | |

SMYRNA GA 30082

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

BOB BARR

REIM. TRAVEL

631 CONCORD ROAD

| | | | | |
|---------------|---|---------------|------------|---------|
| _____ Primary | X | _____ General | 11-15-1996 | \$74.62 |
| _____ Other | | | | |

SMYRNA GA 30082

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

SEEK FOR 49

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

Use separate sheets for each category of the Detailed Summary Page

Page 10 of 20
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

SCM ASSOCIATES

Date (month, date, year)

Amount of Each Disbursement This Period

SCM ASSOCIATES

MAILINGS

P.O. BOX 240

----- Primary General 10-18-1996
 ----- Other

BOSTON MS 02118

\$4,641.48

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

SCM ASSOCIATES

MAILINGS

P.O. BOX 240

----- Primary General 10-18-1996
 ----- Other

BOSTON MS 02118

\$50.00

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

SPRINT

TELEPHONE

P.O. BOX 101343

----- Primary General 11-04-1996
 ----- Other

ATLANTA, GA 30392-1343

\$113.74

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

SPRINT

TELEPHONE

P.O. BOX 101343

----- Primary General 11-15-1996
 ----- Other

ATLANTA, GA 30392-1343

\$113.74

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

TERRANCE GROUP

POLLING

211 NORTH UNION, SUITE 200

----- Primary General 10-18-1996
 ----- Other

ALEXANDRIA VA 22314

\$6,201.00

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

SHIRLEY GREEN

SECRETARIAL

8208 WINNDALE ROAD

----- Primary General 10-18-1996
 ----- Other

DALLAS GA 30132

\$135.00

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

2025 RELEASE UNDER E.O. 14176

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

Use separate schedules for each category of the Detailed Summary Page

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FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)
> BOB BARR - CONGRESS C00300640 GA/07

SHIRLEY GREEN

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| SHIRLEY GREEN 8208 WINNDALE ROAD DALLAS GA 30132 | SECRETARIAL Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General | 10-25-1996 | \$30.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| SHIRLEY GREEN 8208 WINNDALE ROAD DALLAS GA 30132 | SECRETARIAL Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General | 11-04-1996 | \$45.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| SHIRLEY GREEN 8208 WINNDALE ROAD DALLAS GA 30132 | SECRETARIAL Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General | 11-08-1996 | \$45.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| SHIRLEY GREEN 8208 WINNDALE ROAD DALLAS GA 30132 | SECRETARIAL Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General | 11-15-1996 | \$60.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| SHIRLEY GREEN 8208 WINNDALE ROAD DALLAS GA 30132 | SECRETARIAL Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General | 11-22-1996 | \$60.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|--|--------------------------|---|
| CLARKE STEELE P.O. BOX 215 DALLAS GA 30132 | SALARY Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> General | 11-18-1996 | \$350.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement |
|---|-------------------------|
|---|-------------------------|

SUBTOTAL of Receipts This Page (optional)

4323 "393" 40 "66

SCHEDULE B ITEMIZED DISBURSEMENTS
 OPERATING EXPENDITURES

Use separate schedule for each category of the Detailed Summary Page

Page 12 of 20
 FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

> BOB BARR - CONGRESS C00300640 GA/07

CLARKE STEELE

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|--|--------------------------|---|
| CLARKE STEELE P.O. BOX 215 DALLAS GA 30132 | EXP. REIM. - OFFICE SUPPLIES <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$2100.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| STATE FARM 11350 JOHNS CREEK PKWY. DULUTH, GA 30198-0001 | INSURANCE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-18-1996 | \$328.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| TUTTLE & TUTTLE 12 FORT WILLIAMS PKWY. ALEXANDRIA, VA 22304 | CHRISTMAS CARDS <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 11-07-1996 | \$2,405.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| BRAD ALEXANDER 1923 J POWERS FERRY ROAD MARIETTA GA 30067 | REIM. <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 11-01-1996 | \$399.23 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|--|--------------------------|---|
| STRATEGIC PERCEPTION INC. 2185 BROADVIEW TERRACE HOLLYWOOD CA 90068 | CONSULTING <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 11-18-1996 | \$7,000.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|--|--------------------------|---|
| MONTY WARNER 1825 LAVISTA RD #U-1 TUCKER GA 30084 | SALARY <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 11-01-1996 | \$1,220.00 |

Full Name, Mailing Address and Zip Code Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

99 "04" 393 "3235

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

Use separate schedules for each category of the Detailed Summary Page

Page 13 of 20
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

> BOB BARR - CONGRESS C00300640 GA/07

MONTY WARNER

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| MONTY WARNER 3825 LAVISTA RD #U-1 TUCKER GA 30084 | REIM. ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-07-1996 | \$120.00 |

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|--|--------------------------|---|
| MONTY WARNER 3825 LAVISTA RD #U-1 TUCKER GA 30084 | SALARY ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-18-1996 | \$650.00 |

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| STORAGE TRUST 45 WHITLOCK PLACE MARIETTA, GA 30064 | STORAGE ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-07-1996 | \$244.00 |

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|--|--------------------------|---|
| BEAVERS REALTY 1193 BANKHEAD HWY # 3 MABLETON GA 30059 | RENT ____ Primary <input checked="" type="checkbox"/> General ____ Other | 10-31-1996 | \$1,000.00 |

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| BEAVERS REALTY 1193 BANKHEAD HWY # 3 MABLETON GA 30059 | REPAIRS ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-15-1996 | \$142.00 |

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| GARY PETERS P.O. BOX 215 DALLAS GA 30132 | EXP. REIM. - TRAVEL ____ Primary <input checked="" type="checkbox"/> General ____ Other | 10-18-1996 | \$41.00 |

Full Name, Mailing Address and Zip Code Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

99-04-393-3236

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

Use separate schedule for each category of the Detailed Summary Page

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

GARY PETERS

Date (month, date, year)

Amount of Each Disbursement This Period

GARY PETERS

EXP. REIM. - TRAVEL

P.O. BOX 215

DALLAS GA 30132

----- Primary General
 ----- Other

11-01-1996

\$167.68

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

GARY PETERS

SALARY

P.O. BOX 215

DALLAS GA 30132

----- Primary General
 ----- Other

11-01-1996

\$715.00

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

GARY PETERS

GAS REIM.

P.O. BOX 215

DALLAS GA 30132

----- Primary General
 ----- Other

11-08-1996

\$76.00

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

GARY PETERS

SALARY

P.O. BOX 215

DALLAS GA 30132

----- Primary General
 ----- Other

11-15-1996

\$1,500.00

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

GARY PETERS

REIM.

P.O. BOX 215

DALLAS GA 30132

----- Primary General
 ----- Other

11-19-1996

\$61.28

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

ARTS

PRINTING

2010 MONTREAL RD.

TUCKER, GA 30084

----- Primary General
 ----- Other

11-07-1996

\$319.32

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

43202166 "40" 99

SCHEDULE B ITEMIZED DISBURSEMENTS
 OPERATING EXPENDITURES

Use separate schedule for each category of the Detailed Summary Page

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 FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)
 > BOB BARR - CONGRESS C00300640 GA/07

JMR COMMUNICATION

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|--|--------------------------|---|
| JMR COMMUNICATIONS 76 BAY CREEK RD. LOGANVILLE, GA 30249 | MAILINGS ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-25-1996 | \$725.00 |

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| | | | |
|--|--|------------|------------|
| KRISTINA TWITTY P.O. BOX 215 DALLAS GA 30132 | SALARY ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-01-1996 | \$1,198.40 |
|--|--|------------|------------|

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| | | | |
|--|--|------------|---------|
| KRISTINA TWITTY P.O. BOX 215 DALLAS GA 30132 | REIM. TRAVEL ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-07-1996 | \$22.93 |
|--|--|------------|---------|

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| | | | |
|---|--|------------|----------|
| MIAMI SYSTEMS 10150 ALLIANCE RD. CINCINNATI, OH 45242 | PRINTING ____ Primary <input checked="" type="checkbox"/> General ____ Other | 10-18-1996 | \$165.38 |
|---|--|------------|----------|

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| | | | |
|---|--|------------|------------|
| MIAMI SYSTEMS 10150 ALLIANCE RD. CINCINNATI, OH 45242 | PRINTING ____ Primary <input checked="" type="checkbox"/> General ____ Other | 10-18-1996 | \$2,121.00 |
|---|--|------------|------------|

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| | | | |
|---|--|------------|------------|
| NANCY BOCSKER 1212 NORTH VERNON ST. ARLINGTON, VA 22201 | CONSULTING ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-18-1996 | \$1,782.40 |
|---|--|------------|------------|

Full Name, Mailing Address and Zip Code Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

99.04.397.3230
 09.04.397.40.66

SCHEDULE B ITEMIZED DISBURSEMENTS
 OPERATING EXPENDITURES

Use separate schedule
 for each category of the
 Detailed Summary Page

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 FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)
 > BOB BARR - CONGRESS C00300640 GA/07

HARRIS BROADCAST

Date (month, date, year) Amount of Each Disbursement This Period

HARRIS BROADCASTING

REMOTE BROADCASTS

P.O. BOX 96488
 CHICAGO IL 60693
 _____ Primary General 10-18-1996 \$361.25
 _____ Other

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

MENTER MEDIA SERVICES INC

ADVERTISING

122 KENILWORTH DRIVE #317
 TOWSON MD 21204
 _____ Primary General 10-17-1996 \$76,365.56
 _____ Other

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

MENTER MEDIA SERVICES INC

ADVERTISING

122 KENILWORTH DRIVE #317
 TOWSON MD 21204
 _____ Primary General 10-30-1996 \$12,000.00
 _____ Other

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

MENTER MEDIA SERVICES INC

ADVERTISING

122 KENILWORTH DRIVE #317
 TOWSON MD 21204
 _____ Primary General 10-18-1996 \$307.75
 _____ Other

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

MENTER MEDIA SERVICES INC

ADVERTISING/RADIO

122 KENILWORTH DRIVE #317
 TOWSON MD 21204
 _____ Primary General 10-24-1996 \$161,703.16
 _____ Other

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

MENTER MEDIA SERVICES INC

ADVERTISING/RADIO

122 KENILWORTH DRIVE #317
 TOWSON MD 21204
 _____ Primary General 10-30-1996 \$12,000.00
 _____ Other

Full Name, Mailing Address and Zip Code Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

99.04.393.3239

SCHEDULE B ITEMIZED DISBURSEMENTS

OPERATING EXPENDITURES

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

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

Hall Printing

Date (month, date, year)

Amount of Each Disbursement This Period

HALL PRINTING

PRINTING

470 ROSWELL ST

MARIETTA GA 30060

Primary General
 Other

10-18-1996

\$1,391.25

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

MARIETTA COUNTRY CLUB

FUND RAISERS - ROOM

1400 MARIETTA COUNTRY CLUB DR

KENNESAW GA 30152

Primary General
 Other

10-18-1996

\$500.00

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

TODD ZIMMERMAN

FUND RAISERS - ROOM

Primary General
 Other

10-18-1996

\$720.80

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

MARGRET HALL

CATERING FOR FUND RAISE

Primary General
 Other

10-18-1996

\$253.78

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

MARGRET HALL

CATERING FOR FUND RAISE

Primary General
 Other

10-18-1996

\$228.57

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

MARGRET HALL

CATERING FOR FUND RAISE

Primary General
 Other

10-18-1996

\$228.57

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

PHONE "333" NO "66"

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

Use separate schedule for each category of Disbursement Detailed Summary Page

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

PARKWAY FORD

Date (month, date, year)

Amount of Each Disbursement This Period

PARKWAY FORD

VAN RENTAL

5563 JOE FRANK HARRIS PKY NW

----- Primary General
----- Other

10-22-1996

\$600.00

ADAIRSVILLE GA 30103

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

MAIL-N-COPY

MAILINGS

4410 WADE GREEN RD

----- Primary General
----- Other

10-22-1996

\$650.00

KENNESAW GA 30144

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

HEYWARD SMITH

SALARY

C/O 231 MAXHAM ROAD #100

----- Primary General
----- Other

10-23-1996

\$750.00

AUSTELL GA 30001

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

HEYWARD SMITH

SALARY

C/O 231 MAXHAM ROAD #100

----- Primary General
----- Other

11-01-1996

\$750.00

AUSTELL GA 30001

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

CLAY ROAD TRUE VALUE

ADVERTISING/SIGNS

2401 CLAY RD

----- Primary General
----- Other

10-30-1996

\$266.16

AUSTELL GA 30001

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

ECKERD DRUGS

PHOTOS

6200 MABLETON PKY

----- Primary General
----- Other

11-07-1996

\$134.58

MABLETON GA 30059

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

11/22/96 3:03:40 PM '96

SCHEDULE B ITEMIZED DISBURSEMENTS

Use separate schedule for each category of Detailed Summary Page

OPERATING EXPENDITURES

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

> BOB BARR - CONGRESS C00300640 GA/07

ECKERD DRUGS

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|--|--------------------------|---|
| ECKERD DRUGS 6200 MABLETON PKY MABLETON GA 30059 | PHOTOS ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-07-1996 | \$229.31 |

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| | | | |
|--|--|------------|------------|
| AMERICAN MAILING SYSTEMS 4412 HAMILTON DR DALE CITY VA 22193 | MAILINGS ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-07-1996 | \$2,177.54 |
|--|--|------------|------------|

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| | | | |
|--|---|------------|----------|
| CHARM CARDS 2738 BROAD ST AUSTELL GA 30001 | CHRISTMAS CARDS ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-07-1996 | \$756.00 |
|--|---|------------|----------|

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| | | | |
|---|---|------------|------------|
| JOHNNY'S STEAK & BAR-B-Q 4179 MARIETTA ST POWDER SPRINGS GA 30073 | FOOD AT EVENT ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-07-1996 | \$2,835.00 |
|---|---|------------|------------|

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| | | | |
|--|---|------------|----------|
| JIM MILLER PARK 3630 OAKDALE RD SE MABLETON GA 30059 | ROOM RENTAL ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-07-1996 | \$186.00 |
|--|---|------------|----------|

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period

| | | | |
|------------------|---|------------|----------|
| BILL ATKINS BANK | ENTERTAINMENT ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-07-1996 | \$500.00 |
|------------------|---|------------|----------|

Full Name, Mailing Address and Zip Code Purpose of Disbursement

SUBTOTAL of Receipts This Page (optional)

99.04.393.42

SCHEDULE B ITEMIZED DISBURSEMENTS

OPERATING EXPENDITURES

Use separate schedule for each category of Disbursal
Detailed Summary Page

FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

> BOB BARR - CONGRESS C00300640 GA/07

ALICE'S CATERING SE

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| ALICE'S CATERING SERVICE 4088 EMERALD NORTH DR DECATUR GA 30035 | FOOD AT EVENT ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-07-1996 | \$2,100.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| CARROLL TECHNICAL INSTITUTE 997 S HIGHWAY 16 CARROLLTON GA 30116 | ROOM RENTAL ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-07-1996 | \$1,044.57 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|--|--------------------------|---|
| ANN'S FLORIST 1245 BANKHEAD HWY # 32A MABLETON GA 30059 | FLOWERS AT EVENT ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-07-1996 | \$601.82 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|--|--------------------------|---|
| FRIENDS OF STEVE SHUCKMAN SUZANNE MARVIN | CONTRIBUTION ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-15-1996 | \$500.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| SUZANNE MARVIN | ROOM RENTAL ____ Primary <input checked="" type="checkbox"/> General ____ Other | 11-18-1996 | \$283.13 |

| | |
|---|--------------|
| TOTAL This Period (last page this line number only) | \$349,126.03 |
|---|--------------|

| |
|---|
| SUBTOTAL of Receipts This Page (optional) |
|---|

FORM 303 "40" 66

SCHEDULE B

ITEMIZED DISBURSEMENTS

REFUNDS Individuals/Persons Other Than Political Committees

Use separate schedule for each category of the Detailed Summary Page

FOR LINE NUMBER

20 (a)

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NAME OF COMMITTEE (in Full) Rome GA 30165

> BOB BARR - CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| PAT ADAMS 1475 OLD SUMMERVILLE ROAD, NW ROME GA 30165 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$1,040.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| STEVE ADAMS P O BOX 624 CARROLLTON GA 30117 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-29-1996 | \$1,000.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| RAY ANDERSON 2380 MARSHALL DRIVE AUSTELL GA 30001-2026 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$1,000.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| STEPHEN M. BAXTER 2614 HORSELEG CREEK ROAD, SW ROME GA 30165 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$200.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| H.G. BROWN 628 OLD TOWN RD. VILLA RICA GA 30180 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$1,100.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| JERRY BULLOCK 4744 HIGHWAY 101 ROCKMART GA 30153 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$200.00 |

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|-------------------------|--------------------------|---|
|---|-------------------------|--------------------------|---|

SUBTOTAL of Receipts This Page (optional)

ATTN: "BOB" 10-96

SCHEDULE B ITEMIZED DISBURSEMENTS

REFUNDS Individuals/Persons Other Than Political Committees

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

Page 2 of 9
FOR LINE NUMBER
20 (a)

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NAME OF COMMITTEE (in Full) **Rome GA 30165**
> BOB BARR - CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| JOSEPH J. BURCH 38 HUNTINGTON ROAD ROME GA 30165 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$250.00 |
| L. E. CAMP 2216 S. VAN WERT ROAD VILLA RICA GA 30180 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$50.00 |
| WILLIAM L. CAMP 204 WOODGLEN ROAD ROME GA 30161 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$250.00 |
| THOMAS G. CANNON 4403 CHATTAHOOCHEE PLANTATION D MARIETTA GA 30067 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$1,000.00 |
| CORINA CHOU 5389-C NEW PEACHTREE ROAD CHAMBLEE GA 30341 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-29-1996 | \$500.00 |
| ROBERT E. DAVIS 21 JOHN MADDOX DRIVE ROME GA 30165 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$250.00 |

SUBTOTAL of Receipts This Page (optional)

STATE "SEE" #10 "66

SCHEDULE B ITEMIZED DISBURSEMENTS

REFUNDS Individuals/Persons Other Than Political Committees

Use separate schedule (9)
for each category of the
Detailed Summary Page

Page 3 of 9
FOR LINE NUMBER
20 (a)

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

NAME OF COMMITTEE (in Full) Cartersville GA 30120
> BOB BARR - CONGRESS C00300640 GA/07

Amount of Each
Disbursement This Period

JAMES R. DELLINGER, JR. 10-17-1996 \$500.00
P.O BOX 460
CARTERSVILLE GA 30120
----- Primary X General
----- Other

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period
JACK A. DINOS 10-30-1996 \$1,000.00
COTTAGE 424
SEA ISLAND GA 31561
----- Primary X General
----- Other

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period
BOYCE DOOLEY 10-17-1996 \$1,000.00
8 GREEN MEADOWS DRIVE
TRION GA 30753
----- Primary X General
----- Other

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period
CHRIS EDWARDS 10-17-1996 \$700.00
POST OFFICE BOX 369
SMYRNA GA 30081
----- Primary X General
----- Other

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period
PAUL L. ERWIN 10-17-1996 \$250.00
5555 CAVE SPRINGS ROAD, SW
CAVE SPRING GA 30124-2509
----- Primary X General
----- Other

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year) Amount of Each Disbursement This Period
HARVEY R. FARISH 10-17-1996 \$1,120.00
P. O BOX 697
CEDAR BLUFF AL 35959-0697
----- Primary X General
----- Other

Full Name, Mailing Address and Zip Code Purpose of Disbursement Date (month, date, year)

SUBTOTAL of Receipts This Page (optional)

943E "EGE" 40 "66

SCHEDULE B

ITEMIZED DISBURSEMENTS

REFUNDS Individuals/Persons Other Than Political Committees

Use separate schedule for each category of this Detailed Summary Page

Page 4 of 9

FOR LINE NUMBER

20 (a)

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NAME OF COMMITTEE (In Full) Atlanta GA 30339

> BOB BARR - CONGRESS C00300640 GA/07

4723 "363" 40. 66

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|--|--------------------------|---|
| MICHAEL T. FLEMING 3211 LEMONS RIDGE DRIVE, NW ATLANTA GA 30339 | Primary <input type="checkbox"/> Other <input type="checkbox"/> <u>X</u> General | 10-17-1996 | \$1,000.00 |
| J.L. GRAY 616 RICHARDS RD., N.E. WHITE GA 30184 | Primary <input type="checkbox"/> Other <input type="checkbox"/> <u>X</u> General | 10-17-1996 | \$1,000.00 |
| BANNER L. HARBIN, JR. 1825 MARTHA BERRY BOULEVARD ROME GA 30165 | Primary <input type="checkbox"/> Other <input type="checkbox"/> <u>X</u> General | 10-17-1996 | \$250.00 |
| R. G. HILL 412 GREENVILLE ST. LAGRANGE GA 30240 | Primary <input type="checkbox"/> Other <input type="checkbox"/> <u>X</u> General | 10-28-1996 | \$1,000.00 |
| R. G. HILL 412 GREENVILLE ST. LAGRANGE GA 30240 | Primary <input type="checkbox"/> Other <input type="checkbox"/> <u>X</u> General | 10-17-1996 | \$500.00 |
| JANICE M. HIX 3007 QUEEN ANNE COURT DUNWOODY GA 30350 | Primary <input type="checkbox"/> Other <input type="checkbox"/> <u>X</u> General | 10-17-1996 | \$125.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE B

ITEMIZED DISBURSEMENTS

REFUNDS Individuals/Persons Other Than Political Committees

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

FOR LINE NUMBER

20 (a)

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NAME OF COMMITTEE (In Full) Blairsville GA 30512

> BOB BARR - CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| ELMER HOGUE 6233 QUEEN'S GAP ROAD BLAIRSVILLE GA 30512 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$1,000.00 |
| ANTHONY W. HOLT 5507 MOLLIE LANE MABLETON GA 30059 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$800.00 |
| ROBERT H. JOHNSON 501 LONGVIEW STREET CARROLLTON GA 30117 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$40.00 |
| EDWIN JOHNSTON, JR. 5 RIVER VALLEY CT., S.W. ROME GA 30165 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$1,000.00 |
| GRANT LEWIS 999 TEXAS VALLEY ROAD, NW ROME GA 30165 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$1,000.00 |
| PETER S. MANOWN 4739 OLDE VILLAGE LANE DUNWOODY GA 30338 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$1,000.00 |

SUBTOTAL of Receipts This Page (optional)

09-04-99 3:30 PM

SCHEDULE B ITEMIZED DISBURSEMENTS

REFUNDS Individuals/Persons Other Than Political Committees

Use separate schedule for each category of the Detailed Summary Page

Page 6 of 9

FOR LINE NUMBER

20 (a)

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NAME OF COMMITTEE (in Full) Villa Rica GA 30180

> BOB BARR - CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| JEFF R. MATTHEWS 2137 S. VAN WERT RD. VILLA RICA GA 30180 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$500.00 |
| JOAN V. MAYER 814 CANNON RUN MARIETTA GA 30064 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$60.00 |
| MICHAEL R. MCCRAVY 3800 SWEET WATER CHURCH ROAD DOUGLASVILLE GA 30134-5557 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-28-1996 | \$1,000.00 |
| EDWARD H. METZGER III 5365 NORTHWATER WAY DULUTH GA 30136 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$500.00 |
| BARRY MOORE 5654 RIVER OAKS PLACE ATLANTA GA 30327 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$1,000.00 |
| JAMES W. MOSELEY 1104 MARTHA BERRY BOULEVARD ROME GA 30161 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other | 10-17-1996 | \$500.00 |

SHEET "E" OF "40" OF "66"

SUBTOTAL of Receipts This Page (optional)

SCHEDULE B ITEMIZED DISBURSEMENTS

REFUNDS Individuals/Persons Other Than Political Committees

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

Page 7 of 9
FOR LINE NUMBER 20 (a)

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

NAME OF COMMITTEE (In Full) Atlanta GA 30326
> BOB BARR - CONGRESS C00300640 GA/07

0523 " 333 " 40 " 66

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|---|---|--------------------------|---|
| ED NOBLE POST OFFICE BOX 18651 ATLANTA GA 30326 | Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other <input type="checkbox"/> | 10-17-1996 | \$250.00 |
| ANTHONY PATAK 4107 EWING ROAD AUSTELL GA 30001 | Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other <input type="checkbox"/> | 10-17-1996 | \$100.00 |
| THOMAS PATTON 1819 PEACHTREE RD., N.E., STE. 510 ATLANTA GA 30309 | Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other <input type="checkbox"/> | 10-17-1996 | \$1,000.00 |
| OSCAR N. PERSONS ONE ATLANTIC CENTER, 1201 WEST PEA ATLANTA GA 30309-3424 | Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other <input type="checkbox"/> | 10-17-1996 | \$500.00 |
| MICHAEL REED 115 MAPLE DRIVE CARTERSVILLE GA 30120 | Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other <input type="checkbox"/> | 10-17-1996 | \$500.00 |
| WARREN SEWELL, JR. 126 HAMILTON AVENUE BREMEN GA 30110 | Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other <input type="checkbox"/> | 10-17-1996 | \$1,000.00 |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE B ITEMIZED DISBURSEMENTS

REFUNDS Individuals/Persons Other Than Political Committees

Use separate schedule for each category of Detailed Summary Page

FOR LINE NUMBER

20 (a)

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

NAME OF COMMITTEE (in Full) Carrollton GA 30117

> BOB BARR - CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Purpose of Disbursement | Date (month, date, year) | Amount of Each Disbursement This Period |
|--|---|--------------------------|---|
| T. AUBREY SILVEY 371 HAMP JONES ROAD CARROLLTON GA 30117 | Primary _____ Other _____ <input checked="" type="checkbox"/> General | 10-17-1996 | \$1,000.00 |
| STEPHEN SMITH 508 LAPORTE STREET ROME GA 30161 | Primary _____ Other _____ <input checked="" type="checkbox"/> General | 10-17-1996 | \$2,000.00 |
| EUGENE VEZZANI 511 MULBERRY ROAD WINDER GA 30680 | Primary _____ Other _____ <input checked="" type="checkbox"/> General | 10-28-1996 | \$875.00 |
| PAUL D. WILKERSON 701 ROBERT WAY POWDER SPRINGS GA 30073 | Primary _____ Other _____ <input checked="" type="checkbox"/> General | 10-17-1996 | \$291.10 |
| JOHN A. WILLIAMS 3350 CUMBERLAND CIR., SUITE 2200 ATLANTA GA 30339 | Primary _____ Other _____ <input checked="" type="checkbox"/> General | 10-30-1996 | \$500.00 |
| J. MICHAEL WOMBLE P.O. BOX 55 DALLAS GA 30132 | Primary _____ Other _____ <input checked="" type="checkbox"/> General | 10-17-1996 | \$1,000.00 |

SUBTOTAL of Receipts This Page (optional)

99-04-303-3254

SCHEDULE B ITEMIZED DISBURSEMENTS

REFUNDS Individuals/Persons Other Than Political Committees

Use separate schedules for each category of the Detailed Summary Page

FOR LINE NUMBER

20 (a)

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

NAME OF COMMITTEE (in Full) Dallas GA 30132

> BOB BARR - CONGRESS C00300640 GA/07

Amount of Each Disbursement This Period

J. MICHAEL WOMBLE

10-17-1996

\$1,000.00

P.O. BOX 55

Primary General

DALLAS GA 30132

Other

Full Name, Mailing Address and Zip Code

Purpose of Disbursement

Date (month, date, year)

Amount of Each Disbursement This Period

JOHN T. WOODS

10-17-1996

\$1,000.00

1104 MARTHA BERRY BLVD.

Primary General

ROME GA 30161

Other

TOTAL This Period (last page this line number only)

\$34,701.10

SUBTOTAL of Receipts This Page (optional)

99.04.393.352

| > BOB BARR - CONGRESS C00300640 GA/07 | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|--|--------------------------------|---------------------|---|
| Full Name, Mailing Address and Zip BILL ADAMS P.O. BOX 215 DALLAS GA 30132 | \$0.00 | \$17,117.21 | \$7,117.21 | \$10,000.00 |
| Nature of Debt (purpose) CONSULTING FUND | | | | |
| Full Name, Mailing Address and Zip JEFF BREEDLOVE 1306 BAYLISS DR ALEXANDRIA VA 22302 | \$0.00 | \$19,266.41 | \$9,266.41 | \$10,000.00 |
| Nature of Debt (purpose) SALARY | | | | |
| Full Name, Mailing Address and Zip RICK SHELBY 7700 LEESBURGH PIKE SUITE 307 FALLS CHURCH, VA 22043 | \$0.00 | \$13,000.00 | \$3,000.00 | \$10,000.00 |
| Nature of Debt (purpose) CONSULTING | | | | |
| Full Name, Mailing Address and Zip INTERNAL REVENUE SERVICE SERVICE CENTER ATLANTA GA 39901 | \$0.00 | \$15,054.00 | \$0.00 | \$15,054.00 |
| Nature of Debt (purpose) PAYROLL TAXES | | | | |
| Full Name, Mailing Address and Zip SCM ASSOCIATES P.O. BOX 240 BOSTON MS 02118 | \$0.00 | \$11,293.29 | \$4,691.48 | \$6,601.81 |
| Nature of Debt (purpose) PRINTING | | | | |
| Full Name, Mailing Address and Zip STRATEGIC PERCEPTION INC. 2185 BROADVIEW TERRACE HOLLYWOOD CA 90068 | \$0.00 | \$17,000.00 | \$7,000.00 | \$10,000.00 |
| Nature of Debt (purpose) CONSULTING ADVERTISING | | | | |
| Full Name, Mailing Address and Zip MIAMI SYSTEMS 10150 ALLIANCE RD. CINCINNATI, OH 45242 | \$0.00 | \$4,186.97 | \$2,286.38 | \$1,900.59 |
| Nature of Debt (purpose) PRINTING | | | | |
| Full Name, Mailing Address and Zip ASAP PRINTING 224 S 38TH STREET LINCOLN NE 68510 | \$0.00 | \$2,108.25 | \$0.00 | \$2,108.25 |

2025 RELEASE UNDER E.O. 14176

DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule for each numbered line.)

| > BOB BARR - CONGRESS C00300640 GA/07 Nature of Debt (purpose) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|--|--|--------------------------------|---------------------|---|
| PRINTING | | | | |
| Full Name, Mailing Address and Zip PPI 1095 HUFF RD NW ATLANTA GA 30368 | \$0.00 | \$14,044.40 | \$0.00 | \$14,044.40 |
| Nature of Debt (purpose) | ADVERTISING/SIGNS | | | |
| (1) SUBTOTALS This Period This Page (optional) | | | | |
| (2) TOTALS This Period (last page in this line only) | | | | \$79,709.05 |
| (3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| (4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | | | \$79,709.05 |

1095 HUFF RD NW
 ATLANTA GA 30368
 PPI

SEE "SEE" TO

9015.

BOB BARR

Covering Period 10/17/96 through 11/25/96

10-7-96
{ Holland + Knight-PAC }
Wash. DC

Guy and Ginny Millner
3640 Tuxedo Rd.
Ath. GA. 30305

Executive
* (is NOT Sufficient)

10/16/96

\$2,000.

Shirley Andrews
102 E. Haralson St.
La Grange, GA. 30204

?

10/16/96

\$1,000.

Kerry Franks
947 Adams Rd.
West Point GA 31833

?

10/16/96 \$500.

Bruce Widener
RD Box 88866
Ath. GA. 30356

?

10/16/96 \$500.

W.B. Houze, Jr.
754 Lakewood Dr.
La Grange, GA. 30240

?

10-16-96 \$250.

99 "04" 393 "3256

| | | | |
|--------------------|---|----------|--------|
| Elliott A. Lewis | ? | 10-16-96 | \$250. |
| Robert L. Johnston | ? | 10-16-96 | \$200. |
| Gon F. Larussa | ? | 10-16-96 | \$200. |
| Charles C. Wilson | ? | 10-16-96 | \$200. |
| William Huntley | ? | 10-16-96 | \$200. |
| Jim Harry | ? | 10-16-96 | \$140. |
| Terry R. Griffin | ? | 10-16-96 | \$100. |
| William H. Wiggins | ? | 10-16-96 | \$50. |
| James C. Scott | ? | 10-10-96 | \$500. |
| William H. Camp | ? | 10-10-96 | \$500. |
| Nicholas A. DALBA | ? | 10-8-96 | \$100. |
| Richard M. Jones | ? | 10-8-96 | \$100. |
| Robert H. Richie | ? | 10-7-96 | \$250. |
| Ramona Johnson | ? | 10-7-96 | \$100. |

L933 "E63" 10" 66

Evelyn Thompson ? 10-7-96 \$100.

~~Robert H. Ritchie~~ ? ~~10-7-96~~ ~~\$250.~~
614 Alabama Ave.
Bremen, Ga. 30110

~~Ronnie Johnson~~
William[#] Wiggins ? 10-7-96 \$25.

James Matthew Davis ? 10-5-96 \$500.

Jack Kirby ? 10-5-96 \$250.

Scott A. Ferguson ? 10-5-96 \$100.

Paul E. Tomaszewski ? 10-5-96 \$100.

William G. Moore (Not suff.!) 10-7-96 \$250.

3113 Farmington Dr, NW listed housewife → ! I don't think
Ath. Ga. 30339-4706 housewife → ! I don't think
So!

Lewis B. Watford ? 10-16-96 \$100.
825 Chowning Court
Marietta, Ga. 30064

Tommy Naralson ? 10-16-96 \$100.

David R. Little ? 10-9-96 \$250.

Jimmy G. Sanders

? 10-7-96 \$100.

Billy Hawkins

8455 Hwy 92

Fairburn, GA. 30213

?

< Businessman is NOT sufficient >
Disclosure

6525 503 10 66

For An Authorized Committee
(Summary Page)

12/5

33p.

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
BOB BARR - CONGRESS

ADDRESS (number and street) Check if different than previously reported.
231 MAXHAM RD., SUITE 100

CITY, STATE and ZIP CODE
AUSTELL, GA 30001

STATE/DISTRICT
GA/07

2. FEC IDENTIFICATION NUMBER
C00300640

3. IS THIS REPORT AN AMENDMENT?
 YES NO

4. TYPE OF REPORT

April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid-Year Report (Non-election Year Only)

Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

Thirtieth day report following the General Election on
11/5/96 in the State of GEORGIA

Termination Report

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

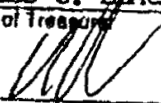
SUMMARY

| 5. Covering Period | COLUMN A | COLUMN B |
|--|-------------|-----------------------|
| 10/17/96 through 11/25/96 | This Period | Calendar Year-to-Date |
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(a)) | 154,190.77 | 757,424.63 |
| (b) Total Contribution Refunds (from Line 20(d)) | 37,576.10 | 38,076.10 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) | 116,614.67 | 719,348.53 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 313,646.29 | 827,084.48 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | | |
| (c) Net Operating Expenditures (subtract Line 7(b) from 7(a)) | 313,646.29 | 827,084.48 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | 53,050.21 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | | |
| 10. Debts and Obligations Owed BY the Committee TO BE ADDED BY AMENDMENT (Itemize all on Schedule C and/or Schedule D) | | |

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
CHARLES C. BLACK

Signature of Treasurer 

Date
12-5-96

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

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

99,04,393,3260

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(PAGE 2, FEC FORM 3)

| Name of Committee (in full) BOB BARR - CONGRESS | Report Covering the Period: | |
|---|-------------------------------|-----------------------------------|
| | From: 10/17/96 | To: 11/25/96 |
| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Calendar Year-To-Date |
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A) TO BE ADDED | | |
| (ii) Unitemized BY | | |
| (iii) Total of contributions from individuals AMENDMENT | | 423,407.59 |
| (b) Political Party Committees | | 15,584.00 |
| (c) Other Political Committees (such as PACs) | | 164,242.27 |
| (d) The Candidate | | |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d)) | 154,190.77 | 757,424.63 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | 36,728.25 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate | | |
| (b) All Other Loans | | |
| (c) TOTAL LOANS (add 13(a) and (b)) | | |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | | |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | | 3,467.43 |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) | 154,190.77 | 797,620.31 |
| II. DISBURSEMENTS | | |
| 17. OPERATING EXPENDITURES | 313,646.29 | 827,084.48 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | 47,184.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate | | |
| (b) Of All Other Loans | | |
| (c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) | | |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other than Political Committees | 37,576.10 | 37,576.10 |
| (b) Political Party Committees | | |
| (c) Other Political Committees (such as PACs) | | 500.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) | | 500.00 |
| 21. OTHER DISBURSEMENTS | | |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) | 351,222.39 | 920,094.58 |
| III. CASH SUMMARY | | |
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | \$ | 250,081.83 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16) | \$ | 154,190.77 |
| 25. SUBTOTAL (add Line 23 and Line 24) | \$ | 404,272.60 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) | \$ | 351,222.39 |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) | \$ | 53,050.21 |

FEB 1998

SCHEDULE A ITEMIZED RECEIPTS

| | |
|---|-----------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | Page 1 of 8 |
| | FOR LINE NUMBER 11(c) |

Contributions from Political Committees

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

NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Medical Association of Georgia/American Medical P 938 Peachtree Street, NE Atlanta GA 30309 | Occupation | 10-16-1996 | \$5,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| AICPA 1455 Pennsylvania Avenue, NW Washington DC 20004-1081 | Occupation | 10-16-1996 | \$2,500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| GA AGC PAC Post Office Box 492349 Atlanta GA 30349-9338 | Occupation | 10-16-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| American Council of Life Insurance 1001 Pennsylvania Avenue Washington DC 20004-2599 | Occupation | 10-16-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| National Utility Contractors PAC 4301 Fairfax Drive, #360 Arlington VA 22203 | Occupation | 10-16-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

SUBTOTAL of Receipts This Page (optional)

2025 RELEASE UNDER E.O. 14176

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

Page 2 of 8
FOR LINE NUMBER 11(c)

Contributions from Political Committees

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

NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| MetLife PAC 1620 L Street, Suite 800 Washington DC 20036 | Occupation | 10-16-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| American Collectors Association PAC 4040 West 70th Street Minneapolis MN 55435 | Occupation | 10-16-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| COMPAC/America's Community Bankers 900 Nineteenth Street, NW, Suite 400 Washington DC 20006 | Occupation | 10-16-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Investment Management PAC 1401 H Street, NW Washington DC 20005 | Occupation | 10-16-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Surgeons Association of Rome 310 West 6th St. Rome GA 30165 | Occupation | 10-16-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

SUBTOTAL of Receipts This Page (optional)

49222 306 40 60

Contributions from Political Committees

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

NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Conservative Victory Fund 104 North Carolina Avenue, SE, Capitol Hill Washington DC 20003 | Occupation | 10-16-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Georgia Association of Realtors 3200 Presidential Drive Atlanta GA 30340-3981 | Occupation | 10-15-1996 | \$3,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Bayer PAC 1101 Pennsylvania Avenue, NW, Suite 515 Washington DC 20004 | Occupation | 10-15-1996 | \$2,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Hibernia People For Good Gov't 313 Carondelet Controller Department New Orleans LA 70130 | Occupation | 10-15-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Forest Farmers PAC Post Office Box 95385 Atlanta GA 30347-0385 | Occupation | 10-15-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

SUBTOTAL of Receipts This Page (optional)

10/16/96 10:30 AM

SCHEDULE A ITEMIZED RECEIPTS

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

Page 4 of 8
FOR LINE NUMBER 11(c)

Contributions from Political Committees

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

NAME OF COMMITTEE (in Full)
> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| UPSPAC 55 Glenlake Parkway, NE Atlanta GA 30328 | Occupation | 10-15-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| RJR Nabisco PAC 1455 Pennsylvania Avenue, N.W., Suite 525 Washington D.C. 20004 | Occupation | 10-15-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Flowers Industries, Inc. Post Office Box 1338 Thomasville GA 31799 | Occupation | 10-10-1996 | \$5,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| American Dental PAC 1111 14th Street, Suite 1100 Washington DC 20005 | Occupation | 10-10-1996 | \$1,500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| National Electrical Contractors Assoc PAC 576 Trabert Avenue Atlanta GA 30309 | Occupation | 10-10-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

SUBTOTAL of Receipts This Page (optional)

SOURCE CODE 10 66

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

Page 5 of 8
FOR LINE NUMBER 11(c)

Contributions from Political Committees

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

NAME OF COMMITTEE (in Full)
> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| National Assoc. of Independent Insurers 444 North Capitol Street, Suite 801 Washington DC 20001 | Occupation | 10-10-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Gold Kist PAC for Farmers, Inc. P.O. Box 2210 Atlanta GA 30301-2210 | Occupation | 10-10-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| ESOP PAC 1726 M Street, Suite 501 Washington DC 20036 | Occupation | 10-10-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Coca-Cola Enterprises PAC Post Office Box 723040 Atlanta GA 31139 | Occupation | 10-09-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| SMAC PAC Post Office Box 221230 Chantilly VA 22022 | Occupation | 10-07-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

SUBTOTAL of Receipts This Page (optional)

2025 RELEASE UNDER E.O. 14176

SCHEDULE A ITEMIZED RECEIPTS

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

Page 6 of 8
FOR LINE NUMBER 11(c)

Contributions from Political Committees

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

NAME OF COMMITTEE (in Full)
> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Team Ameritech PAC 1401 H Street, Post Office Box 27768 Washington DC 20038 | Occupation | 10-07-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Borg-Warner Security PAC 1023 Fifteenth St., N.W., Suite 700 Washington DC 20005 | Occupation | 10-07-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Texas-Southwestern Cattle Raisers Assoc 1301 West Seventh Street Fort Worth TX 76102 | Occupation | 10-07-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Barnett Bank Federal PAC 50 North Laura Street Jacksonville FL 32202 | Occupation | 10-07-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Holland & Knight PAC 2100 Pennsylvania Avenue, Suite 400 Washington DC 20037 | Occupation | 10-07-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

SUBTOTAL of Receipts This Page (optional)

SEE PAGE 10 OF 10

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

Page 7 of 8
FOR LINE NUMBER 11(c)

Contributions from Political Committees

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NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| TRSA of America PAC 1130 East Beach Boulevard, Suite B Hallendale FL 33009 | Occupation | 10-07-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Independent Bankers PAC One Thomas Circle, N.W., Suite 950 Washington D.C. 20005 | Occupation | 10-07-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| King & Spalding Nonpartisan Committee for Good G 160 Rumson Rd., NE Atlanta GA 30305-3112 | Occupation | 10-07-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| National Confectioners Assoc. PAC 7900 Westpark Drive, Suite A-320 McLean VA 22102 | Occupation | 10-07-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Gold Kist Political Action For Farmers Post Office Box 2210 Atlanta GA 30301 | Occupation | 10-05-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

SUBTOTAL of Receipts This Page (optional)

69252 303E 110 66

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Political Committees

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

NAME OF COMMITTEE (In Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Peanut Shellers Association PAC Post Office Box 70157 Albany GA 31708 | Occupation | 10-05-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Georgia Power Federal PAC 333 Piedmont Avenue Atlanta GA 30308 | Occupation | 10-05-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| The Loose Group 3165 Brandy Station Atlanta GA 30339 | Occupation | 10-01-1996 | \$5,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| | |
|---|-------------|
| TOTAL This Period (last page this line number only) | \$42,000.00 |
|---|-------------|

| |
|---|
| SUBTOTAL of Receipts This Page (optional) |
|---|

990439E3270

SCHEDULE A ITEMIZED RECEIPTS

| | |
|---|-----------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | Page 1 of |
| | FOR LINE NUMBER 11(b) |

Contributions From Political Party Committees

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

NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Republican National Committee 310 First Street Washington DC 20003 | Occupation | 10-16-1996 | \$5,000.00 |
| Receipt For: _____ Primary <input checked="" type="checkbox"/> General _____ Other Aggregate Year-to-Date > \$ | | | |

TOTAL This Period (last page this line number only) \$5,000.00

SUBTOTAL of Receipts This Page (optional)

99-04-321

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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

NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-------------------------|--------------------------|------------------------------------|
| Guy and Ginny Millner 3640 Tuxedo Road Atlanta GA 30305 | Executive Occupation | 10-16-1996 | \$2,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Shirley Andrews 102 East Haralson Street LaGrange GA 30204 | Occupation | 10-16-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Kerry Franks 947 Adams Road West Point GA 31833 | Occupation | 10-16-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Bruce Widener Post Office Box 88866 Atlanta GA 30356 | Occupation | 10-16-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| W.B. Houze, Jr. 754 Lakewood Drive LaGrange GA 30240 | Occupation | 10-16-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

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

Page 2 of 22
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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

NAME OF COMMITTEE (in Full)

> BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date: (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|---------------------------|------------------------------------|
| Elliott A. Lewis 3190 Northeast Expressway, Suite 410 Atlanta GA 30341 | Occupation | 10-16-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Robert L. Johnston 3541 Mansions Parkway Duluth GA 30136 | Occupation | 10-16-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Jon F. Larussa 3645 Manchester Drive Lawrenceville GA 30244 | UPS Driver | 10-16-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Charles C. Wilson 2100 Roswell Road, Suite 110 Marietta GA 30062 | Occupation | 10-16-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| William W. Huntley 303 Smith Street LaGrange GA 30240 | Occupation | 10-16-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| Jim Harry 134 Windridge Drive LaGrange GA 30240 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | Occupation | 10-16-1996 | \$140.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Terry R. Griffin P.O. Box 404 Rome FL 30162-0404 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | Occupation | 10-16-1996 | \$100.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| William H. Wiggins Post Office Box 28 Sandersville GA 31082-0028 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | Occupation | 10-16-1996 | \$50.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| E W. Herron 571 Keeler Woods Dr. Marietta GA 30064 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Retired Aggregate Year-to-Date > \$ | Occupation | 10-16-1996 | \$30.00 |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|--|------------------|--------------------------|------------------------------------|
| Laban W. Williams 3459 Lickskillet Road Epworth GA 30541 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Retired Aggregate Year-to-Date > \$ | Occupation | 10-16-1996 | \$25.00 |

SUBTOTAL of Receipts This Page (optional)

9904302327

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| James C. Scott 6080 Duc West Road Powder Springs GA 30073 | Occupation | 10-10-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| William L. Camp 204 Woodglen Rd. Rome GA 30161 | Occupation | 10-10-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Jack L. Wehrle 107 Crescent Drive Carrollton GA 30117 | Retired | 10-10-1996 | \$38.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| A D. Littlejohn 1220 Mt. Alto Road, SW Rome GA 30165 | Retired | 10-09-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Frank Love, Jr. 191 Peachtree Street, 16th Floor Atlanta GA 30303 | Attorney | 10-09-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

SUBTOTAL of Receipts This Page (optional)

5223 "363" 40 66

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Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (In Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------|--------------------------|------------------------------------|
| Grace P. Cornish 831 Hickory Drive Marietta GA 30064-3607 | Occupation Retired | 10-09-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------|--------------------------|------------------------------------|
| Anne Eldridge 3886 Northside Drive, NW Atlanta GA 30342-4044 | Occupation Retired | 10-08-1996 | \$200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------|--------------------------|------------------------------------|
| Nicholas A. Dalba 490 Waterford Drive Catersville GA 30120 | Occupation Retired | 10-08-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------|--------------------------|------------------------------------|
| Richard M. Jones 3411 Old Wagon Road Marietta GA 30062 | Occupation Retired | 10-08-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-----------------------------|--------------------------|------------------------------------|
| Robert Hoskins, Jr. 2485 Cajun Drive Marietta GA 30066 | Occupation Retired | 10-07-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other <input type="checkbox"/> Other | Aggregate Year-to-Date > \$ | | |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

Page 6 of 22
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|-------------------------|--------------------------|------------------------------------|
| Ralph E. Fleck 354 West Club Drive Carrollton GA 30117 | Occupation Physician | 10-07-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Robert H. Richie 614 Alabama Avenue Bremen GA 30110 | Occupation | 10-07-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Ramona Johnson 108 West Club Drive Carrollton GA 30117 | Occupation | 10-07-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Evelyn Thompson Post Office Box 1216 Carrollton GA 30117 | Occupation | 10-07-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| William H. Wiggins Post Office Box 28 Sandersville GA 31082-0028 | Occupation | 10-07-1996 | \$25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

SUBTOTAL of Receipts This Page (optional)

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| James Matthew Davis 9983 Ephesus Church Road Villa Rica GA 30180 | Occupation | 10-05-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Jack Kirby 203 Lakeshore Drive LnGrange GA 30240 | Occupation | 10-05-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Scott A. Ferguson 1450 Bobo Road Dallas GA 30132 | Occupation | 10-05-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|------------------|--------------------------|------------------------------------|
| Paul E. Tomaszewski 2217 Roswell Road, Suite B-2 Marietta GA 30062 | Occupation | 10-05-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| Benjamin Harrell 780 Raleigh Court Marietta GA 30064 | Allied Signal, Inc. Occupation Engineer | 10-16-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

SUBTOTAL of Receipts This Page (optional)

04 393 3270

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons Other than Political Committees

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NAME OF COMMITTEE (in Full)
 > BOB BARR FOR CONGRESS C00300640 GA/07

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| James D. Massie 3307 Circle Hill Road Alexandria VA 22305 | Alpine Group (Requested) Occupation | 10-07-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| Billy L. Askea 4600 Somerset Road Smyrna GA 30082 | Ask-Kay Electrical Contrs., Inc. Occupation Owner | 10-10-1996 | \$100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| William W. Adams 3825 LaVista Rd., Unit U-1 Tucker GA 30084 | Barr For Congress Occupation Finance Director | 10-09-1996 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|--|--------------------------|------------------------------------|
| Buck Swindle 105 Somerset Place, Suite A Carrollton GA 30116 | BSA American Activewear Occupation President/Owner | 10-05-1996 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

| Full Name, Mailing Address and Zip Code | Name of Employer | Date (month, date, year) | Amount of Each Receipt this Period |
|---|---|--------------------------|------------------------------------|
| William J. Stout, Jr. 5395 Roswell Road, Suite 200 Atlanta GA 30342 | Buckhead Brokers Occupation President | 10-08-1996 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other Aggregate Year-to-Date > \$ | | | |

SUBTOTAL of Receipts This Page (optional)

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