

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

BLACK REPUBLICAN PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="12945.93"/>	<input type="text" value="12945.93"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="22983.96"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="88112.50"/>	<input type="text" value="295048.58"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="111096.46"/>	<input type="text" value="307994.51"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="84620.28"/>	<input type="text" value="281518.33"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="26476.18"/>	<input type="text" value="26476.18"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="149734.45"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

BLACK REPUBLICAN PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 09 / 30 / 2014

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).....	23398.60	58997.60
(ii) Unitemized	64449.90	232724.98
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	87848.50	291722.58
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	87848.50	291722.58
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	264.00	3326.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	88112.50	295048.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	88112.50	295048.58

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	65620.28	257518.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	65620.28	257518.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13000.00	18000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	6000.00	6000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	84620.28	281518.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	84620.28	281518.33

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	87848.50	291722.58
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	87848.50	291722.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	65620.28	257518.33
37. Offsets to Operating Expenditures (from Line 15, page 3).....	264.00	3326.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	65356.28	254192.33

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)
BLACK REPUBLICAN PAC

A. MR ROBERT BERNATCHEZ 015
 Full Name (Last, First, Middle Initial)
 Mailing Address 26 MARK CIR
 City RUTLAND State MA Zip Code 01543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2014
Transaction ID : SA11AI.12928
 Amount of Each Receipt this Period
 50.00

B. MR ROBERT BERNATCHEZ 015
 Full Name (Last, First, Middle Initial)
 Mailing Address 26 MARK CIR
 City RUTLAND State MA Zip Code 01543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2014
Transaction ID : SA11AI.12929
 Amount of Each Receipt this Period
 53.00

C. JOHN W BOERSTLER 804
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 792
 City BRECKENRIDGE State CO Zip Code 80424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.12972
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	253.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR JOHN L BRANDT 557
 Full Name (Last, First, Middle Initial)
 Mailing Address 2129 12TH AVE E
 City HIBBING State MN Zip Code 55746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2014
Transaction ID : SA11AI.13007
 Amount of Each Receipt this Period
 100.00

B. GLENN BRAUNER 207
 Full Name (Last, First, Middle Initial)
 Mailing Address 8404 RAMBLER DR
 City ADELPHI State MD Zip Code 20783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2014
Transaction ID : SA11AI.13021
 Amount of Each Receipt this Period
 25.00

C. MR HAROLD G BROWN 670
 Full Name (Last, First, Middle Initial)
 Mailing Address 1336 WALNUT ST
 City KINGMAN State KS Zip Code 67068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2014
Transaction ID : SA11AI.13054
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR HAROLD G BROWN 670
 Full Name (Last, First, Middle Initial)
 Mailing Address 1336 WALNUT ST
 City KINGMAN State KS Zip Code 67068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : SA11AI.13053
 Amount of Each Receipt this Period
 100.00

B. MR JAMES P BYRNES 145
 Full Name (Last, First, Middle Initial)
 Mailing Address 1940 COLE RD
 City NUNDA State NY Zip Code 14517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NUNDA FAMILY PHARMACY Occupation PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2014
Transaction ID : SA11AI.13113
 Amount of Each Receipt this Period
 100.00

C. MS DORTHEA CALLAWAY 598
 Full Name (Last, First, Middle Initial)
 Mailing Address 1111 ANGLERS BEND WAY
 City MISSOULA State MT Zip Code 59802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2014
Transaction ID : SA11AI.13132
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MS DORTHEA CALLAWAY 598		Date of Receipt
Mailing Address 1111 ANGLERS BEND WAY		<input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
MISSOULA	MT	59802
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.13131
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="350.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="325.00"/>	

Full Name (Last, First, Middle Initial) B. MR BUDDIE CARROLL 379		Date of Receipt
Mailing Address 9165 GREY POINTE DR		<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
KNOXVILLE	TN	37922
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.13148
Name of Employer	Occupation	Amount of Each Receipt this Period
FRIEIGHTLINER OF KNOXVILLE INC	BUSINESS OWNER	<input type="text" value="375.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="375.00"/>	

Full Name (Last, First, Middle Initial) C. MRS PETER J CASS 070		Date of Receipt
Mailing Address 25 HIGHPOINT		<input type="text" value="08"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
CEDAR GROVE	NJ	07009
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.13160
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="560.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR JAMES F CAUSLEY 341 JR		Date of Receipt
Mailing Address 3333 GULFSHORE BLVD N #10		<input type="text" value="07"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
NAPLES	FL	34103
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.13170
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1500.00"/>	

Full Name (Last, First, Middle Initial) B. MR JOHN CERVIN 210 JR		Date of Receipt
Mailing Address 815A HILLTOP AVE EXT		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
ABINGDON	MD	21009
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.13173
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="83.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="283.00"/>	

Full Name (Last, First, Middle Initial) C. HARROLL CLEMMER 769		Date of Receipt
Mailing Address 5812 PECAN VALLEY LN		<input type="text" value="07"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
SAN ANGELO	TX	76904
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.13209
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1183.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. JEAN B COE 783
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 WEEPING WILLOW
 City ROCKPORT State TX Zip Code 78382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2014
Transaction ID : SA11AI.13221
 Amount of Each Receipt this Period
 100.00

B. MR BEN COGSWELL 902
 Full Name (Last, First, Middle Initial)
 Mailing Address 575 21ST ST
 City HERMOSA BEACH State CA Zip Code 90254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 233.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2014
Transaction ID : SA11AI.13224
 Amount of Each Receipt this Period
 113.00

C. MS MARY K COLWELL 453
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 MARICOPA CIR
 City ENON State OH Zip Code 45323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2014
Transaction ID : SA11AI.13236
 Amount of Each Receipt this Period
 180.00

SUBTOTAL of Receipts This Page (optional).....▶	393.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 83
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MS MARY K COLWELL 453
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 MARICOPA CIR
 City ENON State OH Zip Code 45323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : SA11AI.13237
 Amount of Each Receipt this Period
 200.00

B. MR DAVID R COOK 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 7725 N FOOTHILL DR S
 City PARADISE VALLEY State AZ Zip Code 85253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2014
Transaction ID : SA11AI.13244
 Amount of Each Receipt this Period
 300.00

C. DR THOMAS J COOPER 636
 Full Name (Last, First, Middle Initial)
 Mailing Address 7353 OLD JACKSON RD
 City FARMINGTON State MO Zip Code 63640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2014
Transaction ID : SA11AI.13245
 Amount of Each Receipt this Period
 100.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MRS GEORGIA L COWARD 770		Date of Receipt
Mailing Address 49 BRIAR HOLLOW LN UNIT 305		M M M / D D D / Y Y Y Y Y Y 07 / 07 / 2014
City	State	Zip Code
HOUSTON	TX	77027
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.13261
C		Amount of Each Receipt this Period
		150.00
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	350.00	

Full Name (Last, First, Middle Initial) B. REV BARTON CRAIG 190		Date of Receipt
Mailing Address 3240 ADAMS CT		M M M / D D D / Y Y Y Y Y Y 07 / 07 / 2014
City	State	Zip Code
BENSALEM	PA	19020
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.13268
C		Amount of Each Receipt this Period
		50.00
Name of Employer	Occupation	
SELF EMPLOYED	CLERGY	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	470.00	

Full Name (Last, First, Middle Initial) C. REV BARTON CRAIG 190		Date of Receipt
Mailing Address 3240 ADAMS CT		M M M / D D D / Y Y Y Y Y Y 08 / 04 / 2014
City	State	Zip Code
BENSALEM	PA	19020
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.13269
C		Amount of Each Receipt this Period
		50.00
Name of Employer	Occupation	
SELF EMPLOYED	CLERGY	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	520.00	

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 OF 83
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR JOHN CRAWFORD 950		Date of Receipt
Mailing Address 20128 CHATEAU DR		<input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
SARATOGA	CA	95070
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.13276
Name of Employer	Occupation	Amount of Each Receipt this Period
INTEL	COMPUTER ARCHITECT	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) B. GARY CROCKER 666		Date of Receipt
Mailing Address 43 SW PEPPER TREE LN		<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
TOPEKA	KS	66611
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.13284
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) C. ROBERT CROSSMAN 339		Date of Receipt
Mailing Address 8201 ARBOR CT		<input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
FORT MYERS	FL	33908
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.13289
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="800.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1300.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 15 OF 83
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MS JANE ANN CURTO 605
Full Name (Last, First, Middle Initial)
Mailing Address 203 BURR RIDGE CLUB DR
City BURR RIDGE State IL Zip Code 60527
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 03 / 2014
Transaction ID : SA11AI.13300
Amount of Each Receipt this Period 200.00

B. MR JOHN D EHRISMANN 922
Full Name (Last, First, Middle Initial)
Mailing Address 7667 ACOMA TRL
City YUCCA VALLEY State CA Zip Code 92284
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 07 / 2014
Transaction ID : SA11AI.13431
Amount of Each Receipt this Period 25.00

C. MR JOHN D EHRISMANN 922
Full Name (Last, First, Middle Initial)
Mailing Address 7667 ACOMA TRL
City YUCCA VALLEY State CA Zip Code 92284
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 30 / 2014
Transaction ID : SA11AI.13432
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 16 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR KARL FAIRCHILD 913
 Full Name (Last, First, Middle Initial)
 Mailing Address 9207 GEYSER AVE
 City NORTHRIDGE State CA Zip Code 91324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11AI.13472
 Amount of Each Receipt this Period
 35.00

B. MRS JANICE FISCHER 191
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 DRUIM MOIR LN
 City PHILADELPHIA State PA Zip Code 19118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2014
Transaction ID : SA11AI.13496
 Amount of Each Receipt this Period
 150.00

C. MR WINSTON FRENZEL 922
 Full Name (Last, First, Middle Initial)
 Mailing Address 41505 CARLOTTA DR APT 620
 City PALM DESERT State CA Zip Code 92211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2014
Transaction ID : SA11AI.13554
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 260.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MRS VIRIGINIA FROELKER 630 JR		Date of Receipt
Mailing Address 4496 BIG CREEK RD		<input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
GERALD	MO	63037
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.13565
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="260.00"/>	<input type="text" value="225.00"/>

Full Name (Last, First, Middle Initial) B. MRS JOAN GALLOWAY 036		Date of Receipt
Mailing Address 12 GALLOWAY LN		<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
WALPOLE	NH	03608
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.13573
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	<input type="text" value="300.00"/>

Full Name (Last, First, Middle Initial) C. MRS BETTY GARDNER 648		Date of Receipt
Mailing Address 1572 GOODIN HOLLOW RD		<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
NOEL	MO	64854
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.13588
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="228.00"/>	<input type="text" value="35.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="560.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MRS BETTY GARDNER 648		Date of Receipt
Mailing Address 1572 GOODIN HOLLOW RD		<input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
NOEL	MO	64854
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.13587
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="70.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="298.00"/>	

Full Name (Last, First, Middle Initial) B. MR BENJAMIN K GIBBS 276		Date of Receipt
Mailing Address 8 SPRINGMOOR DR		<input type="text" value="07"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
RALEIGH	NC	27615
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.13611
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) C. MR WARREN GILBERT 752		Date of Receipt
Mailing Address 5 KINGSGATE CT		<input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
DALLAS	TX	75225
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.13615
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="693.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="180.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MS LISE M GOGA 967
 Full Name (Last, First, Middle Initial)
 Mailing Address 95-1089 PAEMOKU PL
 City MILILANI State HI Zip Code 96789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2014
Transaction ID : SA11AI.13635
 Amount of Each Receipt this Period
 300.00

B. MS LISE M GOGA 967
 Full Name (Last, First, Middle Initial)
 Mailing Address 95-1089 PAEMOKU PL
 City MILILANI State HI Zip Code 96789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2014
Transaction ID : SA11AI.13634
 Amount of Each Receipt this Period
 200.00

C. MS LISE M GOGA 967
 Full Name (Last, First, Middle Initial)
 Mailing Address 95-1089 PAEMOKU PL
 City MILILANI State HI Zip Code 96789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2014
Transaction ID : SA11AI.13636
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MS LISE M GOGA 967
 Full Name (Last, First, Middle Initial)
 Mailing Address 95-1089 PAEMOKU PL
 City MILILANI State HI Zip Code 96789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2014
Transaction ID : SA11AI.13633
 Amount of Each Receipt this Period
 200.00

B. MR PAUL GOODMAN 110
 Full Name (Last, First, Middle Initial)
 Mailing Address 99 S SERVICE RD APT 402
 City NEW HYDE PARK State NY Zip Code 11040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2014
Transaction ID : SA11AI.13641
 Amount of Each Receipt this Period
 100.00

C. MR CHARLES GORDER 921 SR
 Full Name (Last, First, Middle Initial)
 Mailing Address 5526 TOYON RD
 City SAN DIEGO State CA Zip Code 92115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.13648
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR RUSS GRAY 890
 Full Name (Last, First, Middle Initial)
 Mailing Address 2220 VILLAGE WALK DR #3324
 City HENDERSON State NV Zip Code 89052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2014
Transaction ID : SA11Al.13661
 Amount of Each Receipt this Period
 100.00

B. MR ERNEST R GRIFF 499
 Full Name (Last, First, Middle Initial)
 Mailing Address 42703 WILSON MEMORIAL DR
 City CHASSELL State MI Zip Code 49916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11Al.13681
 Amount of Each Receipt this Period
 50.00

C. MS GAYLE GULL 940
 Full Name (Last, First, Middle Initial)
 Mailing Address 3665 ALTAMONT WAY
 City REDWOOD CITY State CA Zip Code 94062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2014
Transaction ID : SA11Al.13699
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 OF 83
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR JOHN HAGGERTY 081
 Full Name (Last, First, Middle Initial)
 Mailing Address 5105 N PARK DR APT 405
 City PENNSAUKEN State NJ Zip Code 08109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FOX ROTHSCHILD LLP Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : SA11AI.13715
 Amount of Each Receipt this Period
 100.00

B. MRS MARJORIE HAILEY 668
 Full Name (Last, First, Middle Initial)
 Mailing Address 720 S NEOSHO ST
 City COUNCIL GROVE State KS Zip Code 66846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2014
Transaction ID : SA11AI.13720
 Amount of Each Receipt this Period
 75.00

C. MR KERN HAMILTON 950
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 BLOSSOM HILL RD UNIT E324
 City LOS GATOS State CA Zip Code 95032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1226.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2014
Transaction ID : SA11AI.13731
 Amount of Each Receipt this Period
 400.00

SUBTOTAL of Receipts This Page (optional).....▶	575.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MS BOBBYE HARRIS 307
 Full Name (Last, First, Middle Initial)
 Mailing Address 135 WINDSOR DR
 City CALHOUN State GA Zip Code 30701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 08 / 05 / 2014
Transaction ID : SA11Al.13760
 Amount of Each Receipt this Period
 100.00

B. MRS JEANETTE HARTJC 635
 Full Name (Last, First, Middle Initial)
 Mailing Address 1606 RANDALL DR
 City KIRKSVILLE State MO Zip Code 63501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 07 / 31 / 2014
Transaction ID : SA11Al.13767
 Amount of Each Receipt this Period
 100.00

C. MS ELLA M HELM 300
 Full Name (Last, First, Middle Initial)
 Mailing Address 3385 HALLMARK DR SE
 City MARIETTA State GA Zip Code 30067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 07 / 07 / 2014
Transaction ID : SA11Al.13805
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR CHARLES HOLTZ 800
Full Name (Last, First, Middle Initial)

Mailing Address 13801 E YALE AVE UNIT 306 # 20

City	State	Zip Code
AURORA	CO	80014

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	06	/	2014

Transaction ID : SA11Al.13851

Amount of Each Receipt this Period

200.00

B. M HOOK 380
Full Name (Last, First, Middle Initial)

Mailing Address 2506 BONICORD RD

City	State	Zip Code
DYERSBURG	TN	38024

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2014

Transaction ID : SA11Al.13853

Amount of Each Receipt this Period

50.00

C. MRS LOIS E HOOVER 590
Full Name (Last, First, Middle Initial)

Mailing Address 511 LEE CREEK RD

City	State	Zip Code
OTTER	MT	59062

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

Name of Employer	Occupation
NONE	HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **358.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2014

Transaction ID : SA11Al.13855

Amount of Each Receipt this Period

170.00

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. THELMA HOUNIHAN 973		Date of Receipt
Mailing Address 2163 NW MAST PL APT B		<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
LINCOLN CITY	OR	97367
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.13872
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="60.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="245.00"/>	

Full Name (Last, First, Middle Initial) B. THELMA HOUNIHAN 973		Date of Receipt
Mailing Address 2163 NW MAST PL APT B		<input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
LINCOLN CITY	OR	97367
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.13871
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="40.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="285.00"/>	

Full Name (Last, First, Middle Initial) C. THELMA HOUNIHAN 973		Date of Receipt
Mailing Address 2163 NW MAST PL APT B		<input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
LINCOLN CITY	OR	97367
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.13873
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="40.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="325.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="140.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR JOSEPH HRADSKY 212		Date of Receipt MM / DD / YYYY 09 / 15 / 2014 Transaction ID : SA11AI.13882
Mailing Address 7810 DANIELS AVE		Amount of Each Receipt this Period 50.00
City PARKVILLE	State MD	Zip Code 21234
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. MISS ELIZABETH JACKSON 630		Date of Receipt MM / DD / YYYY 07 / 03 / 2014 Transaction ID : SA11AI.13925
Mailing Address 724 CLAYTON CORNERS DR		Amount of Each Receipt this Period 100.00
City BALLWIN	State MO	Zip Code 63011
FEC ID number of contributing federal political committee. C		
Name of Employer PFIZER MONSANTO	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. MISS ELIZABETH JACKSON 630		Date of Receipt MM / DD / YYYY 07 / 24 / 2014 Transaction ID : SA11AI.13924
Mailing Address 724 CLAYTON CORNERS DR		Amount of Each Receipt this Period 75.00
City BALLWIN	State MO	Zip Code 63011
FEC ID number of contributing federal political committee. C		
Name of Employer PFIZER MONSANTO	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR KENNETH W JOHNSON 177		Date of Receipt
Mailing Address 2165 STOPPER DR		<input type="text" value="07"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
MONTOURSVILLE	PA	17754
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.13944
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="70.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) B. MR JOSEPH J KEROLA 444		Date of Receipt
Mailing Address 420 RAVINE DR		<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
HUBBARD	OH	44425
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.14007
Name of Employer	Occupation	Amount of Each Receipt this Period
ELITE LEASING INC	PRESIDENT	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. MR JOSEPH J KEROLA 444		Date of Receipt
Mailing Address 420 RAVINE DR		<input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
HUBBARD	OH	44425
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.14006
Name of Employer	Occupation	Amount of Each Receipt this Period
ELITE LEASING INC	PRESIDENT	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="570.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR DAVID H KEYSTON 939		Date of Receipt
Mailing Address PO BOX 7066		<input type="text" value="07"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
CARMEL	CA	93921
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.14016
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. MR H KNAPHEIDE 623 III		Date of Receipt
Mailing Address PO BOX 7140		<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
QUINCY	IL	62305
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.14031
Name of Employer	Occupation	Amount of Each Receipt this Period
KNAPHEIDE MANUFACTURING CO INC	PRESIDENT	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) C. MS MARY G KOEHL 774		Date of Receipt
Mailing Address 1307 MANOR LAKE CT		<input type="text" value="07"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
RICHMOND	TX	77406
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.14049
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="35.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="330.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1285.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MS HELEN KRUSE 660
 Full Name (Last, First, Middle Initial)
 Mailing Address 16110 W 133RD ST APT 338
 City OLATHE State KS Zip Code 66062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 238.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.14074
 Amount of Each Receipt this Period
 100.00

B. MR JAMES E LAIN 926
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1939
 City HUNTINGTON BEACH State CA Zip Code 92647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2014
Transaction ID : SA11AI.14088
 Amount of Each Receipt this Period
 100.00

C. CYNTHIA LALAS 325
 Full Name (Last, First, Middle Initial)
 Mailing Address 13428 VALERIE DR
 City PENSACOLA State FL Zip Code 32507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2014
Transaction ID : SA11AI.14091
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. JEAN M LAMB 836
 Full Name (Last, First, Middle Initial)
 Mailing Address 2814 S ILLINOIS AVE
 City CALDWELL State ID Zip Code 83605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.14092
 Amount of Each Receipt this Period
 100.00

B. MR ROBERT LEAHY 284
 Full Name (Last, First, Middle Initial)
 Mailing Address 622 JASMINE LN SW
 City SUNSET BEACH State NC Zip Code 28468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2014
Transaction ID : SA11AI.14119
 Amount of Each Receipt this Period
 50.00

C. ONA LESTER 300
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 HUMPHRIES RD NW
 City CONYERS State GA Zip Code 30012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.14138
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. ONA LESTER 300
Full Name (Last, First, Middle Initial)
Mailing Address 1101 HUMPHRIES RD NW

City CONYERS	State GA	Zip Code 30012
-----------------	-------------	-------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : SA11Al.14137

Amount of Each Receipt this Period
150.00

B. MS MARJORIE R LINDSEY 933
Full Name (Last, First, Middle Initial)
Mailing Address 10202 DUTCH IRIS DR

City BAKERSFIELD	State CA	Zip Code 93311
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	30	/	2014

Transaction ID : SA11Al.14145

Amount of Each Receipt this Period
100.00

C. MRS PAMELA J MACLEAN 483
Full Name (Last, First, Middle Initial)
Mailing Address 8617 PALOMINO DR

City COMMERCE TOWNSHIP	State MI	Zip Code 48382
---------------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2014

Transaction ID : SA11Al.14188

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional).....▶	285.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 32 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MRS PAMELA J MACLEAN 483
 Full Name (Last, First, Middle Initial)
 Mailing Address 8617 PALOMINO DR
 City State Zip Code
 COMMERCE TOWNSHIP MI 48382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : SA11AI.14189
 Amount of Each Receipt this Period
 25.00

B. DR WILLIAM MALE 465
 Full Name (Last, First, Middle Initial)
 Mailing Address 337 GRACE VILLAGE DR APT 507
 City State Zip Code
 WINONA LAKE IN 46590
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.14199
 Amount of Each Receipt this Period
 100.00

C. ALICE C MARTIN 245
 Full Name (Last, First, Middle Initial)
 Mailing Address 149 SALISBURY CIR
 City State Zip Code
 LYNCHBURG VA 24502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2014
Transaction ID : SA11AI.14223
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 OF 83
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR RICHARD MARX 125		Date of Receipt
Mailing Address PO BOX 440		<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City State Zip Code WAPPINGERS FALLS NY 12590		Transaction ID : SA11AI.14227
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="152.00"/>
Name of Employer SELF EMPLOYED	Occupation INSURANCE AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="605.00"/>	

Full Name (Last, First, Middle Initial) B. RONALD MCCLOSKEY 990		Date of Receipt
Mailing Address 21320 N PERRY RD		<input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code COLBERT WA 99005		Transaction ID : SA11AI.14253
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer MCCLOSKEY CONSTRUCTION INC	Occupation FOUNDER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>	

Full Name (Last, First, Middle Initial) C. MRS OLIVIA MCFADDEN 852		Date of Receipt
Mailing Address 11011 N ZEPHYR DR UNIT 111		<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City State Zip Code FOUNTAIN HILLS AZ 85268		Transaction ID : SA11AI.14267
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="702.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MRS OLIVIA MCFADDEN 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 11011 N ZEPHYR DR UNIT 111

City FOUNTAIN HILLS	State AZ	Zip Code 85268
------------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.14266

Amount of Each Receipt this Period
500.00

B. ROBERT MCIVER 894
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 5147

City INCLINE VILLAGE	State NV	Zip Code 89450
-------------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
258.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2014
Transaction ID : SA11AI.14271

Amount of Each Receipt this Period
157.60

C. MR MARION MILLER 871
 Full Name (Last, First, Middle Initial)
 Mailing Address 3109 TOREADOR DR NE

City ALBUQUERQUE	State NM	Zip Code 87111
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.14356

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....▶	807.60
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 35 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)
A. MR PI MILLER 980

Mailing Address 16112 INGLEWOOD TER NE

City State Zip Code
KENMORE WA 98028

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.14361

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. MRS REGINA MIRE 700

Mailing Address 34 CYCAS

City State Zip Code
KENNER LA 70065

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

Name of Employer Occupation
GULF STREAM SERVICES INC BUSINESS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2014
Transaction ID : SA11AI.14366

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. MS PATRICIA MOLLINO 117

Mailing Address 515 N BAY AVE

City State Zip Code
MASSAPEQUA NY 11758

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2014
Transaction ID : SA11AI.14386

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 365.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MS PATRICIA MOLLINO 117
 Full Name (Last, First, Middle Initial)
 Mailing Address 515 N BAY AVE
 City MASSAPEQUA State NY Zip Code 11758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.14387
 Amount of Each Receipt this Period
 300.00

B. WILLIAM S MULLINS 394
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 TWIN OAKS PL
 City LAUREL State MS Zip Code 39440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.14430
 Amount of Each Receipt this Period
 150.00

C. MRS ELAINE T MURHAMMER 701
 Full Name (Last, First, Middle Initial)
 Mailing Address 4112 JEFFERSON HWY APT 320
 City JEFFERSON State LA Zip Code 70121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2014
Transaction ID : SA11AI.14436
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MRS ELAINE T MURHAMMER 701
 Full Name (Last, First, Middle Initial)
 Mailing Address 4112 JEFFERSON HWY APT 320

City JEFFERSON	State LA	Zip Code 70121
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2014
Transaction ID : SA11AI.14437

Amount of Each Receipt this Period
 50.00

B. MR CLAIR J MURPHY 551
 Full Name (Last, First, Middle Initial)
 Mailing Address 1626 RUTH ST N

City SAINT PAUL	State MN	Zip Code 55119
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2014
Transaction ID : SA11AI.14446

Amount of Each Receipt this Period
 75.00

C. MR CLAIR J MURPHY 551
 Full Name (Last, First, Middle Initial)
 Mailing Address 1626 RUTH ST N

City SAINT PAUL	State MN	Zip Code 55119
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : SA11AI.14445

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. COL JOHN E MURRAY 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 10000 RHINELAND #218
 City SAN ANTONIO State TX Zip Code 78239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US MILITARY Occupation OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2014
Transaction ID : SA11AI.14450
 Amount of Each Receipt this Period
 50.00

B. DR W MICHAEL NESBIT 282
 Full Name (Last, First, Middle Initial)
 Mailing Address 1833 MEADOWOOD LN
 City CHARLOTTE State NC Zip Code 28211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2014
Transaction ID : SA11AI.14480
 Amount of Each Receipt this Period
 50.00

C. JOHN NIKKEL 741
 Full Name (Last, First, Middle Initial)
 Mailing Address 6625 S JAMESTOWN PL
 City TULSA State OK Zip Code 74136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2014
Transaction ID : SA11AI.14491
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. JOSEPH HOWARD NIMO 336
 Full Name (Last, First, Middle Initial)
 Mailing Address 14003 NORTH TOWN CT APT B
 City TAMPA State FL Zip Code 33613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2014
Transaction ID : SA11AI.14494
 Amount of Each Receipt this Period
 200.00

B. MR GERALD H NOSTRAND 809
 Full Name (Last, First, Middle Initial)
 Mailing Address 1437 WYNKOOP DR
 City COLORADO SPRINGS State CO Zip Code 80909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2014
Transaction ID : SA11AI.14503
 Amount of Each Receipt this Period
 750.00

C. MR SHAUN F O'MALLEY 191
 Full Name (Last, First, Middle Initial)
 Mailing Address 8000 SEMINOLE ST
 City PHILADELPHIA State PA Zip Code 19118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2014
Transaction ID : SA11AI.14526
 Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional).....	895.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR JOHN PAGIN 467
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 86
 City HOWE State IN Zip Code 46746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2014
Transaction ID : SA11AI.14549
 Amount of Each Receipt this Period
 300.00

B. MISS EDITH P PALMER 109
 Full Name (Last, First, Middle Initial)
 Mailing Address 282 LAROE RD
 City CHESTER State NY Zip Code 10918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2014
Transaction ID : SA11AI.14555
 Amount of Each Receipt this Period
 750.00

C. MR JAMES PANKONIEN 537
 Full Name (Last, First, Middle Initial)
 Mailing Address 2313 GOLD DR
 City FITCHBURG State WI Zip Code 53711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2014
Transaction ID : SA11AI.14560
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR DAN PAUL 100		Date of Receipt
Mailing Address 103 WAVERLY PL		<input type="text" value="07"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City NEW YORK	State NY	Zip Code 10011
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.14586
Name of Employer FORT HUNTER FIRE CO		Amount of Each Receipt this Period
Occupation HOSPITALITY ADMIN		<input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. MRS DUSKA E POWELL 925		Date of Receipt
Mailing Address 2548 APPLE TREE ST		<input type="text" value="07"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City HEMET	State CA	Zip Code 92545
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.14660
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="75.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="225.00"/>	

Full Name (Last, First, Middle Initial) C. MR JOHN T PRATT 349		Date of Receipt
Mailing Address 1479 SW SHORELINE DR		<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City PALM CITY	State FL	Zip Code 34990
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.14661
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="2000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1275.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 42 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR ROBERT PRUGER 434
 Full Name (Last, First, Middle Initial)
 Mailing Address 1132 CLARK ST
 City BOWLING GREEN State OH Zip Code 43402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE RUDOLPH LIBBE COMPANIES Occupation CFO TREASURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.14670
 Amount of Each Receipt this Period
 150.00

B. MS CLAIRE RAINS 941
 Full Name (Last, First, Middle Initial)
 Mailing Address 420 41ST AVE
 City SAN FRANCISCO State CA Zip Code 94121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2014
Transaction ID : SA11AI.14684
 Amount of Each Receipt this Period
 100.00

C. MS CLAIRE RAINS 941
 Full Name (Last, First, Middle Initial)
 Mailing Address 420 41ST AVE
 City SAN FRANCISCO State CA Zip Code 94121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2014
Transaction ID : SA11AI.14685
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR MICHAEL S REAVEY 760
 Full Name (Last, First, Middle Initial)
 Mailing Address 12301 W ROCKY CREEK RD
 City CROWLEY State TX Zip Code 76036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2014
Transaction ID : SA11AI.14701
 Amount of Each Receipt this Period
 100.00

B. MRS ELENORE J REINHARDT 928
 Full Name (Last, First, Middle Initial)
 Mailing Address 12321 EMRYS AVE
 City GARDEN GROVE State CA Zip Code 92840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : SA11AI.14709
 Amount of Each Receipt this Period
 20.00

C. MS MARY K RIEG 223
 Full Name (Last, First, Middle Initial)
 Mailing Address 502 N LATHAM ST
 City ALEXANDRIA State VA Zip Code 22304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2014
Transaction ID : SA11AI.14729
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 370.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR PHILIP E RITCH 967		Date of Receipt
Mailing Address 146 KALUAMOO ST		<input type="text" value="08"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City KAILUA	State HI	Zip Code 96734
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.14741
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="48.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="229.00"/>		

Full Name (Last, First, Middle Initial) B. MRS MARY RUEGGER 922		Date of Receipt
Mailing Address 398 RUTHERFORD ROAD		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City BRAWLEY	State CA	Zip Code 92227
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.14801
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="250.00"/>		

Full Name (Last, First, Middle Initial) C. DR PENELOPE SCOTT 210 MD		Date of Receipt
Mailing Address 11824 FALLS RD		<input type="text" value="07"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City COCKEYSVILLE	State MD	Zip Code 21030
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.14889
Name of Employer SELF EMPLOYED		Amount of Each Receipt this Period
Occupation PHYSICIAN		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="450.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="398.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR AL SHANE 917		Date of Receipt MM / DD / YYYY 07 / 28 / 2014 Transaction ID : SA11AI.14910
Mailing Address 2175 FOOTHILL BLVD STE B		Amount of Each Receipt this Period 250.00
City LA VERNE	State CA	Zip Code 91750
FEC ID number of contributing federal political committee. C		
Name of Employer FINANCIAL LEARNING CENTER	Occupation FINANCIAL ADVISOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. MR JOHN SHILLINGBURG 223		Date of Receipt MM / DD / YYYY 07 / 21 / 2014 Transaction ID : SA11AI.14925
Mailing Address 4800 FILLMORE AVE APT 603		Amount of Each Receipt this Period 50.00
City ALEXANDRIA	State VA	Zip Code 22311
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. MRS JANET B SHUFF 760		Date of Receipt MM / DD / YYYY 07 / 15 / 2014 Transaction ID : SA11AI.14935
Mailing Address 1605 FOREST VISTA CT		Amount of Each Receipt this Period 100.00
City SOUTHLAKE	State TX	Zip Code 76092
FEC ID number of contributing federal political committee. C		
Name of Employer FAMILY	Occupation MOM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 46 OF 83
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MRS JANET B SHUFF 760
Full Name (Last, First, Middle Initial)
Mailing Address 1605 FOREST VISTA CT
City SOUTHLAKE State TX Zip Code 76092
FEC ID number of contributing federal political committee. **C**
Name of Employer FAMILY Occupation MOM
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00
Date of Receipt 07 / 16 / 2014
Transaction ID : SA11AI.14936
Amount of Each Receipt this Period 50.00

B. MRS JANET B SHUFF 760
Full Name (Last, First, Middle Initial)
Mailing Address 1605 FOREST VISTA CT
City SOUTHLAKE State TX Zip Code 76092
FEC ID number of contributing federal political committee. **C**
Name of Employer FAMILY Occupation MOM
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00
Date of Receipt 09 / 08 / 2014
Transaction ID : SA11AI.14933
Amount of Each Receipt this Period 50.00

C. MRS JANET B SHUFF 760
Full Name (Last, First, Middle Initial)
Mailing Address 1605 FOREST VISTA CT
City SOUTHLAKE State TX Zip Code 76092
FEC ID number of contributing federal political committee. **C**
Name of Employer FAMILY Occupation MOM
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 735.00
Date of Receipt 09 / 08 / 2014
Transaction ID : SA11AI.14934
Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR CHARLES SMITH 330
 Full Name (Last, First, Middle Initial)
 Mailing Address 13 N PELICAN DR
 City KEY LARGO State FL Zip Code 33037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 03 / 2014
Transaction ID : SA11AI.14969
 Amount of Each Receipt this Period
 25.00

B. MAURICE STEMPNITZKY 802
 Full Name (Last, First, Middle Initial)
 Mailing Address 3765 W EASTMAN AVE
 City DENVER State CO Zip Code 80236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.15033
 Amount of Each Receipt this Period
 50.00

C. MS ELEANOR STEPTOE 573
 Full Name (Last, First, Middle Initial)
 Mailing Address 803 W 2ND AVE
 City MILLER State SD Zip Code 57362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2014
Transaction ID : SA11AI.15039
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR BRUCE STRATHEARN 930
 Full Name (Last, First, Middle Initial)
 Mailing Address 2215 MONACO DR
 City OXNARD State CA Zip Code 93035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2014
Transaction ID : SA11AI.15055
 Amount of Each Receipt this Period
 60.00

B. MRS RUTH TANT 392
 Full Name (Last, First, Middle Initial)
 Mailing Address 26 WATERFORD PL
 City JACKSON State MS Zip Code 39211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TANT MANAGEMENT CO INC Occupation PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2014
Transaction ID : SA11AI.15114
 Amount of Each Receipt this Period
 400.00

C. MRS SARA THOMAS 381
 Full Name (Last, First, Middle Initial)
 Mailing Address 186 ASCOT PARK COMMON DR
 City MEMPHIS State TN Zip Code 38120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 03 / 2014
Transaction ID : SA11AI.15137
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	560.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 83
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR PAUL THORNBURG 971
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 FULTON ST APT 145
 City NEWBERG State OR Zip Code 97132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2014
Transaction ID : SA11Al.15148
 Amount of Each Receipt this Period
 45.00

B. MR PAUL THORNBURG 971
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 FULTON ST APT 145
 City NEWBERG State OR Zip Code 97132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2014
Transaction ID : SA11Al.15147
 Amount of Each Receipt this Period
 48.00

C. MRS KETURAH THUNDER-HAAB 481
 Full Name (Last, First, Middle Initial)
 Mailing Address 438 PINE BRAE ST
 City ANN ARBOR State MI Zip Code 48105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 03 / 2014
Transaction ID : SA11Al.15149
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	243.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 50 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR ANGELO TIEZZI 061
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 STEEPLECHASE DR
 City NEWINGTON State CT Zip Code 06111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2014
Transaction ID : SA11AI.15150
 Amount of Each Receipt this Period
 53.00

B. MR ANGELO TIEZZI 061
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 STEEPLECHASE DR
 City NEWINGTON State CT Zip Code 06111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.15151
 Amount of Each Receipt this Period
 50.00

C. MR FRANCIS B TOUSSAINT 338
 Full Name (Last, First, Middle Initial)
 Mailing Address 825 DAFFODIL ST
 City LAKE PLACID State FL Zip Code 33852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation CATTLEMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2014
Transaction ID : SA11AI.15173
 Amount of Each Receipt this Period
 51.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 154.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 51 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR MIKE TYRHOLM 976
 Full Name (Last, First, Middle Initial)
 Mailing Address 3703 COLLIER LN
 City KLAMATH FALLS State OR Zip Code 97603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2014
Transaction ID : SA11AI.15195
 Amount of Each Receipt this Period
 200.00

B. CLARK VANDERHOOF 841
 Full Name (Last, First, Middle Initial)
 Mailing Address 6787 S 2300 E
 City COTTONWOOD HEIGHTS State UT Zip Code 84121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2014
Transaction ID : SA11AI.15208
 Amount of Each Receipt this Period
 50.00

C. MR HAROLD VARNER 115
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 ATHEM DR
 City GLEN COVE State NY Zip Code 11542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2014
Transaction ID : SA11AI.15210
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MS CECELIA WAGNER 054 RN		Date of Receipt
Mailing Address 38 HAYES AVE		<input type="text" value="07"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
SOUTH BURLINGTON	VT	05403
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.15232
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF EMPLOYED	REGISTERED NURSE	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="205.00"/>	

Full Name (Last, First, Middle Initial) B. MR KENNETH C WALDO 276 JR		Date of Receipt
Mailing Address 1000 DEERFIELD RD		<input type="text" value="07"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
RALEIGH	NC	27609
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.15237
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="400.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) C. MR J D WALKER 761		Date of Receipt
Mailing Address 6917 BAL LAKE DR		<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
FORT WORTH	TX	76116
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.15240
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	NOT EMPLOYED	<input type="text" value="40.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="205.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="540.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR J D WALKER 761
 Full Name (Last, First, Middle Initial)
 Mailing Address 6917 BAL LAKE DR
 City FORT WORTH State TX Zip Code 76116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2014
Transaction ID : SA11AI.15241
 Amount of Each Receipt this Period
 30.00

B. MR WALTER WILLIAMS 349
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 SW SHORELINE DR APT 325
 City PALM CITY State FL Zip Code 34990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : SA11AI.15337
 Amount of Each Receipt this Period
 100.00

C. MR THOMAS WILLIAMS 775
 Full Name (Last, First, Middle Initial)
 Mailing Address 3007 ELSBURY LN
 City PEARLAND State TX Zip Code 77584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2014
Transaction ID : SA11AI.15338
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 205.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 54 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MRS BARBARA WINTERLAND 617
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 212
 City FAIRBURY State IL Zip Code 61739
 Date of Receipt 07 / 07 / 2014
 Transaction ID : SA11AI.15351
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer SELF EMPLOYED Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

B. MISS DAISY WISNIEWSKI 177
 Full Name (Last, First, Middle Initial)
 Mailing Address 2485 NORTHBEND RD
 City MUNCY State PA Zip Code 17756
 Date of Receipt 07 / 15 / 2014
 Transaction ID : SA11AI.15359
 Amount of Each Receipt this Period 80.00
 FEC ID number of contributing federal political committee. C
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

C. MRS BONNIE JEAN WOLFGRAM 549
 Full Name (Last, First, Middle Initial)
 Mailing Address 2335 PATRIOT LN
 City OSHKOSH State WI Zip Code 54904
 Date of Receipt 07 / 11 / 2014
 Transaction ID : SA11AI.15367
 Amount of Each Receipt this Period 75.00
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 655.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 55 OF 83
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MRS BONNIE JEAN WOLFGRAM 549
Full Name (Last, First, Middle Initial)
Mailing Address 2335 PATRIOT LN
City OSHKOSH State WI Zip Code 54904
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation TEACHER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 368.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 28 / 2014
Transaction ID : SA11AI.15366
Amount of Each Receipt this Period
100.00

B. MRS MARION J ZOLA 902
Full Name (Last, First, Middle Initial)
Mailing Address 1160 MARILYN DR
City BEVERLY HILLS State CA Zip Code 90210
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 02 / 2014
Transaction ID : SA11AI.15414
Amount of Each Receipt this Period
200.00

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	23398.60

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)
A. CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW RD
SUITE 206

City State Zip Code
STERLING VA 20166

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3326.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 06 / 2014
Transaction ID : SA15.15417

Amount of Each Receipt this Period
264.00

REFUND

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	264.00
TOTAL This Period (last page this line number only).....▶	264.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. CAPITOL CAGING CORP

Mailing Address 504 SHAW RD

City STERLING State VA Zip Code 20166

Purpose of Disbursement
BRE POSTAGE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2014

Transaction ID : **SB21B.12721**

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

B. CAPITOL CAGING CORP

Mailing Address 504 SHAW RD

City STERLING State VA Zip Code 20166

Purpose of Disbursement
BRE POSTAGE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2014

Transaction ID : **SB21B.12722**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. CAPITOL CAGING CORP

Mailing Address 504 SHAW RD

City STERLING State VA Zip Code 20166

Purpose of Disbursement
BRE POSTAGE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 30 / 2014

Transaction ID : **SB21B.12723**

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. CAPITOL CAGING CORP

Mailing Address 504 SHAW RD

City STERLING State VA Zip Code 20166

Purpose of Disbursement
CAGING SERVICES

001

Candidate Name
BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : **SB21B.12725**

Amount of Each Disbursement this Period

798.02

Full Name (Last, First, Middle Initial)

B. CAPITOL CAGING CORP

Mailing Address 504 SHAW RD

City STERLING State VA Zip Code 20166

Purpose of Disbursement
BRE POSTAGE

001

Candidate Name
BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2014

Transaction ID : **SB21B.12724**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. CAPITOL CAGING CORP

Mailing Address 504 SHAW RD

City STERLING State VA Zip Code 20166

Purpose of Disbursement
CAGING SERVICES

001

Candidate Name
BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2014

Transaction ID : **SB21B.12726**

Amount of Each Disbursement this Period

619.97

SUBTOTAL of Disbursements This Page (optional)..... ▶

3417.99

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. CENTURY DATA MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003

Transaction ID : SB21B.12727

Amount of Each Disbursement this Period

3632.65

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. CENTURY DATA MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003

Transaction ID : SB21B.12728

Amount of Each Disbursement this Period

3210.52

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. CENTURY DATA MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2014

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003

Transaction ID : SB21B.12729

Amount of Each Disbursement this Period

73.71

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

6916.88

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. CENTURY DATA MAILING SERVICES

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : **SB21B.12730**

Amount of Each Disbursement this Period

73.71

Full Name (Last, First, Middle Initial)

B. CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 24 / 2014

Transaction ID : **SB21B.12731**

Amount of Each Disbursement this Period

13071.45

Full Name (Last, First, Middle Initial)

C. EDWARD J COUSAR

Mailing Address 206 OLD FRIENDSHIP RD

City CATAWBA State SC Zip Code 29704

Purpose of Disbursement
CONSULTING - PAC MANAGEMENT

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2014

Transaction ID : **SB21B.12733**

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

14145.16

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. EDWARD J COUSAR

Mailing Address 206 OLD FRIENDSHIP RD

City CATAWBA State SC Zip Code 29704

Purpose of Disbursement
CONSULTING - PAC MANAGEMENT

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2014

Transaction ID : **SB21B.12734**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. EDWARD J COUSAR

Mailing Address 206 OLD FRIENDSHIP RD

City CATAWBA State SC Zip Code 29704

Purpose of Disbursement
CONSULTING - PAC MANAGEMENT

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 28 / 2014

Transaction ID : **SB21B.12735**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. DONOR BUREAU

Mailing Address 1900 N CULPEPPER ST

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement
LIST ENHANCEMENT

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2014

Transaction ID : **SB21B.12732**

Amount of Each Disbursement this Period

1941.11

SUBTOTAL of Disbursements This Page (optional)..... ▶

3941.11

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.12683

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

137.87

Purpose of Disbursement
SERVICE CHARGE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		03		2014

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.12686

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

1.58

Purpose of Disbursement
AMEX DISCOUNT FEE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		07		2014

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.12687

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

3.50

Purpose of Disbursement
AMEX DISCOUNT FEE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

142.95

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
CUSTOM CREDIT BILLING

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2014

Transaction ID : SB21B.12706

Amount of Each Disbursement this Period

64.50

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
MERCHANT SERVICE CHARGE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2014

Transaction ID : SB21B.12709

Amount of Each Disbursement this Period

352.26

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2014

Transaction ID : SB21B.12688

Amount of Each Disbursement this Period

26.53

SUBTOTAL of Disbursements This Page (optional)..... ▶

443.29

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2014

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.12689

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

4.38

Purpose of Disbursement
AMEX DISCOUNT FEE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		14		2014

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.12690

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

0.70

Purpose of Disbursement
AMEX DISCOUNT FEE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		17		2014

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.12691

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

3.50

Purpose of Disbursement
AMEX DISCOUNT FEE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

8.58

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		21		2014

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.12692

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

7.70

Purpose of Disbursement
AMEX DISCOUNT FEE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		25		2014

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.12693

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

2.91

Purpose of Disbursement
AMEX DISCOUNT FEE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		28		2014

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.12694

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

1.05

Purpose of Disbursement
AMEX DISCOUNT FEE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

11.66

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		28		2014

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.12695

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

2.10

Purpose of Disbursement
AMEX DISCOUNT FEE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.12696

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

24.82

Purpose of Disbursement
AMEX DISCOUNT FEE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		01		2014

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.12684

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

171.97

Purpose of Disbursement
SERVICE CHARGE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

198.89

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SB21B.12697

Amount of Each Disbursement this Period

2.91

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : SB21B.12698

Amount of Each Disbursement this Period

3.50

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
CUSTOM CREDIT BILLING

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2014

Transaction ID : SB21B.12707

Amount of Each Disbursement this Period

87.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

93.41

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		06		2014

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.12710

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

506.04

Purpose of Disbursement
MERCHANT SERVICE CHARGE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2014

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.12699

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

1.86

Purpose of Disbursement
AMEX DISCOUNT FEE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		11		2014

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.12700

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

0.70

Purpose of Disbursement
AMEX DISCOUNT FEE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

508.60

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		14		2014

Transaction ID : SB21B.12701

Amount of Each Disbursement this Period

0.70

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2014

Transaction ID : SB21B.12702

Amount of Each Disbursement this Period

1.23

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2014

Transaction ID : SB21B.12685

Amount of Each Disbursement this Period

26.02

SUBTOTAL of Disbursements This Page (optional)..... ▶

27.95

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2014

Transaction ID : SB21B.12703

Amount of Each Disbursement this Period

7.88

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
CUSTOM CREDIT BILLING

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2014

Transaction ID : SB21B.12708

Amount of Each Disbursement this Period

37.50

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
MERCHANT SERVICE CHARGE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2014

Transaction ID : SB21B.12711

Amount of Each Disbursement this Period

159.89

SUBTOTAL of Disbursements This Page (optional)..... ▶

205.27

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2014

Transaction ID : SB21B.12705

Amount of Each Disbursement this Period

0.88

Full Name (Last, First, Middle Initial)

B. INTEGRAM

Mailing Address 8421 HILLTOP RD

City State Zip Code
FAIRFAX VA 22031

Purpose of Disbursement
DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2014

Transaction ID : SB21B.12736

Amount of Each Disbursement this Period

7464.15

Full Name (Last, First, Middle Initial)

C. INTEGRAM

Mailing Address 8421 HILLTOP RD

City State Zip Code
FAIRFAX VA 22031

Purpose of Disbursement
DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 24 / 2014

Transaction ID : SB21B.12737

Amount of Each Disbursement this Period

4268.60

SUBTOTAL of Disbursements This Page (optional)..... ▶

11733.63

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. INTEGRAM

Mailing Address 8421 HILLTOP RD

City State Zip Code
FAIRFAX VA 22031

Purpose of Disbursement
DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Transaction ID : SB21B.12738

Amount of Each Disbursement this Period

3479.76

Full Name (Last, First, Middle Initial)

B. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DR #806

City State Zip Code
ARLINGTON VA 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2014

Transaction ID : SB21B.12743

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DR #806

City State Zip Code
ARLINGTON VA 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 24 / 2014

Transaction ID : SB21B.12744

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

9479.76

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DR #806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2014

Transaction ID : **SB21B.12745**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DR #806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : **SB21B.12746**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. SIMPKINS ESCROW LLC

Mailing Address 29243 ST JUST DR

City UNIONVILLE State VA Zip Code 22567

Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 24 / 2014

Transaction ID : **SB21B.12747**

Amount of Each Disbursement this Period

258.58

SUBTOTAL of Disbursements This Page (optional)..... ▶

6258.58

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. SIMPKINS ESCROW LLC

Mailing Address 29243 ST JUST DR

City UNIONVILLE State VA Zip Code 22567

Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 21 / 2014

Transaction ID : SB21B.12748

Amount of Each Disbursement this Period

366.66

Full Name (Last, First, Middle Initial)

B. SIMPKINS ESCROW LLC

Mailing Address 29243 ST JUST DR

City UNIONVILLE State VA Zip Code 22567

Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Transaction ID : SB21B.12749

Amount of Each Disbursement this Period

219.91

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

586.57

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

65620.28

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. CMTE TO ELECT GARY COBB TO CONGRESS

Mailing Address PO BOX 1426

City State Zip Code
CHERRY HILL NJ 08034

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name
GARY WILBERT COBB

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼
State: NJ District: 01

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : SB23.12716

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. DR CHARLES TREY THOMAS III FOR CONGRESS

Mailing Address PO BOX 741

City State Zip Code
BATON ROUGE LA 70821

Purpose of Disbursement
POLITICAL CONTRIBUTION - DEBT RETIREMENT

011

Candidate Name
DR CHARLES TREY THOMAS III

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼
State: LA District: 06

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2014

Transaction ID : SB23.12712

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. DR CHARLES TREY THOMAS III FOR CONGRESS

Mailing Address PO BOX 741

City State Zip Code
BATON ROUGE LA 70821

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name
DR CHARLES TREY THOMAS III

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼
State: LA District: 06

Date of Disbursement

MM / DD / YYYY
08 / 28 / 2014

Transaction ID : SB23.12720

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

9000.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF MIA LOVE

Mailing Address PO BOX 255

City RIVERTON State UT Zip Code 84065

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name
MIA LOVE

Category/
Type

Office Sought: House
 Senate
 President
State: UT District: 04

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : SB23.15448

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. GLO FOR CONGRESS

Mailing Address 133 S HARBOR DRIVE

City VENICE State FL Zip Code 34285

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name
GLOREATHA SCURRY-SMITH

Category/
Type

Office Sought: House
 Senate
 President
State: FL District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : SB23.15447

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. HURD FOR CONGRESS

Mailing Address PO BOX 656

City HELOTES State TX Zip Code 78023

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name
WILLIAM HURD

Category/
Type

Office Sought: House
 Senate
 President
State: TX District: 23

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : SB23.15446

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

3000.00

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

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. TIM SCOTT FOR SENATE

Mailing Address 1405 ASHLEY RIVER RD

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name
TIM SCOTT

Office Sought: House
 Senate
 President
State: SC District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : SB23.15449

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1000.00

13000.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JACKIE WINTERS

Mailing Address PO BOX 126

City SALEM State OR Zip Code 97308

Purpose of Disbursement
STATE CAMPAIGN CONTRIBUTION

011

Candidate Name
JACKIE WINTERS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : SB29.15436

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JOHN D ANTHONY

Mailing Address PO BOX 828

City MORRIS State IL Zip Code 60450

Purpose of Disbursement
STATE CAMPAIGN CONTRIBUTION

011

Candidate Name
JOHN D ANTHONY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : SB29.15435

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. JAMES WHITE CAMPAIGN

Mailing Address PO BOX 21

City HILLISTER State TX Zip Code 77624

Purpose of Disbursement
STATE CAMPAIGN CONTRIBUTION

011

Candidate Name
JAMES WHITE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : SB29.15434

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. JANE E POWDRELL-CULBERT STATE REPRESENTATIVE

Mailing Address PO BOX 2819

City State Zip Code
CORRALES NM 87048

Purpose of Disbursement
STATE CAMPAIGN CONTRIBUTION

011

Candidate Name
JANE E POWDRELL-CULBERT

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : **SB29.15437**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. MIKE HILL, REPUBLICAN FOR STATE REPRESENTATIVE

Mailing Address PO BOX 16229

City State Zip Code
PENSACOLA FL 32507

Purpose of Disbursement
STATE CAMPAIGN CONTRIBUTION

011

Candidate Name
MIKE HILL

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : **SB29.15438**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. SCOTT TURNER CAMPAIGN

Mailing Address PO BOX 771

City State Zip Code
FRISCO TX 75034

Purpose of Disbursement
STATE CAMPAIGN CONTRIBUTION

011

Candidate Name
SCOTT TURNER

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : **SB29.15433**

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

3000.00

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

6000.00

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) BLACK REPUBLICAN PAC	Transaction ID : SC/10.7797
--	------------------------------------

LOAN SOURCE Full Name (Last, First, Middle Initial) SCOTT B MACKENZIE	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2776 S ARLINGTON MILL DR #806	
City ARLINGTON State VA ZIP Code 22206	

Original Amount of Loan 350.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 350.00
-----------------------------------	------------------------------------	---

TERMS

Date Incurred 10 / 09 / 2012	Date Due UPON DEMAND	Interest Rate 18.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------	-------------------------	--------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	[] 350.00
TOTALS This Period (last page in this line only)..... ▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **BLACK REPUBLICAN PAC** Transaction ID : **SC/10.7799**

LOAN SOURCE Full Name (Last, First, Middle Initial) SCOTT B MACKENZIE	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2776 S ARLINGTON MILL DR #806	
City ARLINGTON State VA ZIP Code 22206	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40.03	0.00	40.03

TERMS

Date Incurred: M M / D D / Y Y Y Y Y Y / /

Date Due: M M / D D / Y Y Y Y Y Y

Interest Rate: % (apr)

Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	40.03
TOTALS This Period (last page in this line only).....▶	390.03

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 82 OF 83
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BASE CONNECT INC	Nature of Debt (Purpose): DIRECT MAIL - CREATIVE
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period <input type="text" value="46158.38"/>	Transaction ID : SD10.4120	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="46158.38"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CENTURY DATA SYSTEMS CORP	Nature of Debt (Purpose): DATA PROCESSING
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period <input type="text" value="29417.32"/>	Transaction ID : SD10.4121	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="29417.32"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CONSOLIDATED MAILING SERVICES	Nature of Debt (Purpose): DIRECT MAIL - PRINTING & MAILSHOP
Mailing Address 504 SHAW RD SUITE 206	
City State Zip Code STERLING VA 20166	

Outstanding Balance Beginning This Period <input type="text" value="52317.36"/>	Transaction ID : SD10.4122	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="13071.45"/>	Outstanding Balance at Close of This Period <input type="text" value="39245.91"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="114821.61"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 83 OF 83
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ELECTRONIC REPORTING SYSTEMS INC	Nature of Debt (Purpose): ELECTRONIC DISCLOSURE REPORTING
Mailing Address 683 BERRYVILLE AVE	
City State Zip Code WINCHESTER VA 20005	

Outstanding Balance Beginning This Period 3476.20	Transaction ID : SD10.4123	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3476.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LEGACY LIST MARKETING INC	Nature of Debt (Purpose): DIRECT MAIL - LIST RENTALS
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period 23046.61	Transaction ID : SD10.4124	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 23046.61

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MACKENZIE & COMPANY	Nature of Debt (Purpose): CONSULTING - COMPLIANCE
Mailing Address 2776 S ARLINGTON MILL DR #806	
City State Zip Code ARLINGTON VA 22206	

Outstanding Balance Beginning This Period 20000.00	Transaction ID : SD10.4125	
Amount Incurred This Period 0.00	Payment This Period 12000.00	Outstanding Balance at Close of This Period 8000.00

1) SUBTOTALS This Period This Page (optional)..... ▶	34522.81
2) TOTALS This Period (last page this line number only)..... ▶	149344.42
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	390.03
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	149734.45