



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
BLACK REPUBLICAN PAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		23312.90
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	29409.17									
(c) Total Receipts (from Line 19) .....	156979.08	552480.07								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	186388.25	575792.97								
7. Total Disbursements (from Line 31) .....	164512.30	553917.02								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	21875.95	21875.95								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	131212.10									

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
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

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) .....	31047.08	109920.24
(ii) Unitemized .....	125585.60	442213.43
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	156632.68	552133.67
(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) .....	156632.68	552133.67
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) .....	346.40	346.40
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 Transfer (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)) .....	156979.08	552480.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	156979.08	552480.07

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared 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.....	144512.30	508417.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	144512.30	508417.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	25500.00
24. Independent Expenditure (use Schedule E) .....	20000.00	20000.00
25. Coordinated Expenditures Made by Party Committees (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.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	164512.30	553917.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	164512.30	553917.02

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	156632.68	552133.67
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	156632.68	552133.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	144512.30	508417.02
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	346.40	346.40
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	144165.90	508070.62

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

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

FOR LINE NUMBER: PAGE 6 / 47  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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.** Full Name (Last, First, Middle Initial)  
MR CECIL BARNETT 402

Mailing Address 126 INDIAN HILLS TRL

City State Zip Code  
LOUISVILLE KY 40207

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

Name of Employer Occupation  
ALGOOD FOOD CO PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
11 / 19 / 2010

**Transaction ID:** SA11AI.100336

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
CARL BARNEY 894

Mailing Address PO BOX 1157

City State Zip Code  
CRYSTAL BAY NV 89402

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
11 / 01 / 2010

**Transaction ID:** SA11AI.100341

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
MR GUY BOWERS 883

Mailing Address PO BOX 8090

City State Zip Code  
RUIDOSO NM 88355

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 ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
10 / 29 / 2010

**Transaction ID:** SA11AI.100704

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2650.00

**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 7 / 47  
(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.** Full Name (Last, First, Middle Initial)  
MISS INEZ BROWELEIT 991

Mailing Address 7103 ALMOTA RD

City State Zip Code  
**COLFAX WA 99111**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 8 / 2 0 1 0

**Transaction ID:** SA11AI.100832

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
MRS VIRGINIA W BROWN 201

Mailing Address 828 VAN BUREN ST

City State Zip Code  
**HERNDON VA 20170**

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 ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 1 0

**Transaction ID:** SA11AI.100844

Amount of Each Receipt this Period  
750.00

**C.** Full Name (Last, First, Middle Initial)  
MR WILLIAM BROWN 607

Mailing Address 7029 W SEWARD ST

City State Zip Code  
**NILES IL 60714**

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 / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 1 0

**Transaction ID:** SA11AI.100870

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1050.00

**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 8 / 47  
(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.** Full Name (Last, First, Middle Initial)  
MR DOUGLAS BROWN 737

Mailing Address 314 E OWEN K GARRIOTT RD

City State Zip Code  
ENID OK 73701

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 2 2 / 2 0 1 0

**Transaction ID:** SA11AI.100875

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
GUS A BUDER 877, 3D

Mailing Address 560 RAYADO CREEK RD

City State Zip Code  
CIMARRON NM 87714

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  
M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 1 0

**Transaction ID:** SA11AI.100926

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
MR BARTON BULMAN 559

Mailing Address 11500 GOLDENROD RD

City State Zip Code  
CALEDONIA MN 55921

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 / D D / Y Y Y Y  
1 1 / 2 2 / 2 0 1 0

**Transaction ID:** SA11AI.100942

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 550.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 47  
(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.** Full Name (Last, First, Middle Initial)  
MRS ELLOINE M CLARK 752  
Mailing Address 3716 MAPLEWOOD AVE  
City DALLAS State TX Zip Code 75205  
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 ▼ 2000.00  
Date of Receipt 10 / 22 / 2010  
Transaction ID: SA11AI.101295  
Amount of Each Receipt this Period 2000.00

**B.** Full Name (Last, First, Middle Initial)  
MRS ELEANOR COBB 900  
Mailing Address 131 W VISTA ST  
City LOS ANGELES State CA Zip Code 90036  
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 10 / 25 / 2010  
Transaction ID: SA11AI.101349  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
MRS BETTY R CRAWFORD 527  
Mailing Address 2505 IMPERIAL OAKS DR  
City MUSCATINE State IA Zip Code 52761  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PLU MOR LANES Occupation BOWLING  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00  
Date of Receipt 10 / 19 / 2010  
Transaction ID: SA11AI.101518  
Amount of Each Receipt this Period 600.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3100.00  
**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 10 / 47  
(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.** Full Name (Last, First, Middle Initial)  
MRS BETTY R CRAWFORD 527  
Mailing Address 2505 IMPERIAL OAKS DR  
City MUSCATINE State IA Zip Code 52761  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PLU MOR LANES Occupation BOWLING  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 800.00  
Date of Receipt 11 / 19 / 2010  
Transaction ID: SA11AI.101517  
Amount of Each Receipt this Period 200.00

**B.** Full Name (Last, First, Middle Initial)  
MR JAMES N CURRIN 275  
Mailing Address 2089 SUNSET RD  
City OXFORD State NC Zip Code 27565  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 11 / 03 / 2010  
Transaction ID: SA11AI.101584  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
MR JAMES N CURRIN 275  
Mailing Address 2089 SUNSET RD  
City OXFORD State NC Zip Code 27565  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ -1000.00  
Date of Receipt 11 / 10 / 2010  
Transaction ID: SA11AI.101586  
Amount of Each Receipt this Period -1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 200.00  
**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 11 / 47

(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.**

Full Name (Last, First, Middle Initial)  
MR MICHAEL DAMONE 483

Mailing Address 3418 BLOSSOM LN

City State Zip Code  
BLOOMFIELD HILLS MI 48302

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

Name of Employer Occupation  
THE DAMONE GROUP OWNER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.101631

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
R REBECCA DONATELLI 223

Mailing Address 118 N SAINT ASAPH ST

City State Zip Code  
ALEXANDRIA VA 22314

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

Name of Employer Occupation  
CAMPAIGN SOLUTIONS INC PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 200.40

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.101824

Amount of Each Receipt this Period

182.00

**C.**

Full Name (Last, First, Middle Initial)  
R REBECCA DONATELLI 223

Mailing Address 118 N SAINT ASAPH ST

City State Zip Code  
ALEXANDRIA VA 22314

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

Name of Employer Occupation  
CAMPAIGN SOLUTIONS INC PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 276.60

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.101825

Amount of Each Receipt this Period

76.20

**SUBTOTAL** of Receipts This Page (optional) .....

508.20

**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 12 / 47  
(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.**

Full Name (Last, First, Middle Initial)  
R REBECCA DONATELLI 223

Mailing Address 118 N SAINT ASAPH ST

City State Zip Code  
**ALEXANDRIA VA 22314**

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

Name of Employer Occupation  
CAMPAIGN SOLUTIONS INC PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **569.00**

Date of Receipt **10 / 27 / 2010**

**Transaction ID: SA11AI.101826**

Amount of Each Receipt this Period **292.40**

**B.**

Full Name (Last, First, Middle Initial)  
MR STEVE ELLIS 282

Mailing Address 544 N CHURCH ST

City State Zip Code  
**CHARLOTTE NC 28202**

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

Name of Employer Occupation  
WELLS FARGO & COMPANY EXECUTIVE VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **11 / 01 / 2010**

**Transaction ID: SA11AI.102005**

Amount of Each Receipt this Period **250.00**

**C.**

Full Name (Last, First, Middle Initial)  
DR GEORGE ENGLISH 755

Mailing Address 310 CLEAR CREEK DR

City State Zip Code  
**TEXARKANA TX 75503**

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 **11 / 03 / 2010**

**Transaction ID: SA11AI.102033**

Amount of Each Receipt this Period **250.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **792.40**

**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 13 / 47  
(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.**

Full Name (Last, First, Middle Initial)  
MR W W GAY 322

Mailing Address 524 STOCKTON ST

City JACKSONVILLE State FL Zip Code 32204

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

Name of Employer W W GAY MECHANICAL Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 02 / 2010  
**Transaction ID:** SA11AI.102422  
 Amount of Each Receipt this Period: 500.00

**B.**

Full Name (Last, First, Middle Initial)  
MR TONY GODFREY 920

Mailing Address 3508 OLIVE HILL RD

City FALLBROOK State CA Zip Code 92028

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 11 / 12 / 2010  
**Transaction ID:** SA11AI.102515  
 Amount of Each Receipt this Period: 1000.00

**C.**

Full Name (Last, First, Middle Initial)  
MR ZIGMUND GRUTZA 483

Mailing Address 42900 W 9 MILE RD

City NOVI State MI Zip Code 48375

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

Name of Employer Occupation DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 25 / 2010  
**Transaction ID:** SA11AI.102674  
 Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

**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 / 47  
(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.** Full Name (Last, First, Middle Initial)  
MR DONALD GUMPERS 916  
Mailing Address PO BOX 2450  
City TOLUCA LAKE State CA Zip Code 91610  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1250.00  
Date of Receipt 11 / 19 / 2010  
Transaction ID: SA11AI.102700  
Amount of Each Receipt this Period 750.00

**B.** Full Name (Last, First, Middle Initial)  
MRS JANE GUY 673  
Mailing Address PO BOX 852  
City COFFEYVILLE State KS Zip Code 67337  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 215.00  
Date of Receipt 10 / 28 / 2010  
Transaction ID: SA11AI.102716  
Amount of Each Receipt this Period 60.00

**C.** Full Name (Last, First, Middle Initial)  
MRS DOROTHY M HARKNESS 915  
Mailing Address 925 IRVING DR  
City BURBANK State CA Zip Code 91504  
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 11 / 18 / 2010  
Transaction ID: SA11AI.102855  
Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 960.00  
**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 15 / 47
	<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**

<b>A.</b>	Full Name (Last, First, Middle Initial) MRS FRANCES HARRELL 325		Date of Receipt MM / DD / YYYY 10 / 28 / 2010		
	Mailing Address 2660 MAGNOLIA AVE		<b>Transaction ID:</b> SA11AI.102869		
	City PENSACOLA	State FL	Zip Code 32503	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer	Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) MRS ELLA M HELM 300		Date of Receipt MM / DD / YYYY 10 / 28 / 2010		
	Mailing Address 3385 HALLMARK DR SE		<b>Transaction ID:</b> SA11AI.102969		
	City MARIETTA	State GA	Zip Code 30067	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	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			

<b>C.</b>	Full Name (Last, First, Middle Initial) MRS ELLA M HELM 300		Date of Receipt MM / DD / YYYY 10 / 28 / 2010		
	Mailing Address 3385 HALLMARK DR SE		<b>Transaction ID:</b> SA11AI.102970		
	City MARIETTA	State GA	Zip Code 30067	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	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 ▼ 325.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>425.00</b>
<b>TOTAL</b> 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 / 47  
(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.**

Full Name (Last, First, Middle Initial)  
MRS ELLA M HELM 300

Mailing Address 3385 HALLMARK DR SE

City State Zip Code  
**MARIETTA GA 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 ▼ **625.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 29 2010**

**Transaction ID: SA11AI.102968**

Amount of Each Receipt this Period  
**300.00**

**B.**

Full Name (Last, First, Middle Initial)  
FLOYD A HICKS 960

Mailing Address 225 GILMORE RD

City State Zip Code  
**RED BLUFF CA 96080**

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 ▼ **265.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 14 2010**

**Transaction ID: SA11AI.103063**

Amount of Each Receipt this Period  
**50.00**

**C.**

Full Name (Last, First, Middle Initial)  
MS HELENE HOOVER 852

Mailing Address 474 E LOUIS WAY

City State Zip Code  
**TEMPE AZ 85284**

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  
**11 01 2010**

**Transaction ID: SA11AI.103165**

Amount of Each Receipt this Period  
**200.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **550.00**

**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 17 / 47  
(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.** Full Name (Last, First, Middle Initial)  
MS HELENE HOOVER 852  
Mailing Address 474 E LOUIS WAY

City State Zip Code  
TEMPE AZ 85284

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: 11 / 18 / 2010  
Transaction ID: SA11AI.103166  
Amount of Each Receipt this Period: 200.00

**B.** Full Name (Last, First, Middle Initial)  
MRS PAULA HRADKOWSKY 180  
Mailing Address 2274 BROOMSTICK RD

City State Zip Code  
GREEN LANE PA 18054

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 11 / 22 / 2010  
Transaction ID: SA11AI.103209  
Amount of Each Receipt this Period: 200.00

**C.** Full Name (Last, First, Middle Initial)  
MR ROLF ILLSLEY 949  
Mailing Address PO BOX 4280

City State Zip Code  
SAN RAFAEL CA 94913

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 ▼ 5000.00

Date of Receipt: 10 / 25 / 2010  
Transaction ID: SA11AI.103287  
Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5400.00

**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 18 / 47
	<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.** Full Name (Last, First, Middle Initial)  
DR JEANNE JAGGARD 074, MD

Mailing Address 16 APACHE RD

City WAYNE State NJ Zip Code 07470

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

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 26 / 2010  
Transaction ID: SA11AI.103337  
Amount of Each Receipt this Period: 450.00

**B.** Full Name (Last, First, Middle Initial)  
MR JERRY HOLTON JONES 223

Mailing Address 821 EDEN CT

City ALEXANDRIA State VA Zip Code 22308

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: 10 / 15 / 2010  
Transaction ID: SA11AI.103446  
Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
MR DONALD KELLER 341

Mailing Address 2165 HAWKSRIDGE DR

City NAPLES State FL Zip Code 34105

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 29 / 2010  
Transaction ID: SA11AI.103576  
Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 750.00

**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 19 / 47

(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.**

Full Name (Last, First, Middle Initial)  
MR THOMAS KINNEY 921

Mailing Address 12454 DORMOUSE RD

City State Zip Code  
SAN DIEGO CA 92129

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	8	/	2	0	1	0

Transaction ID: SA11AI.103645

Amount of Each Receipt this Period

100.00
--------

**B.**

Full Name (Last, First, Middle Initial)  
MR LEONARD KIRK 210

Mailing Address 6 HUNTER DR

City State Zip Code  
BEL AIR MD 21014

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 ▼  
301.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

Transaction ID: SA11AI.103651

Amount of Each Receipt this Period

151.00
--------

**C.**

Full Name (Last, First, Middle Initial)  
MR KARL O LEE 574

Mailing Address 1919 12TH AVE SE

City State Zip Code  
ABERDEEN SD 57401

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	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: SA11AI.103947

Amount of Each Receipt this Period

300.00
--------

**SUBTOTAL** of Receipts This Page (optional) .....

551.00
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**TOTAL** This Period (last page this line number only) .....

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 47  
(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.**

Full Name (Last, First, Middle Initial)  
MR KARL O LEE 574

Mailing Address 1919 12TH AVE SE

City State Zip Code  
**ABERDEEN SD 57401**

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 ▼ **650.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**11 / 18 / 2010**

**Transaction ID: SA11AI.103946**

Amount of Each Receipt this Period  
**350.00**

**B.**

Full Name (Last, First, Middle Initial)  
MS MARIE J LETT 760

Mailing Address 3940 LETT LN

City State Zip Code  
**BURLESON TX 76028**

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

Name of Employer SELF EMPLOYED Occupation **RANCHER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**10 / 20 / 2010**

**Transaction ID: SA11AI.103993**

Amount of Each Receipt this Period  
**250.00**

**C.**

Full Name (Last, First, Middle Initial)  
MS MARIE J LETT 760

Mailing Address 3940 LETT LN

City State Zip Code  
**BURLESON TX 76028**

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

Name of Employer SELF EMPLOYED Occupation **RANCHER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**11 / 08 / 2010**

**Transaction ID: SA11AI.103991**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

**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 21 / 47  
(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.**

Full Name (Last, First, Middle Initial)  
MS MARIE J LETT 760

Mailing Address 3940 LETT LN

City State Zip Code  
**BURLESON TX 76028**

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

Name of Employer Occupation  
SELF EMPLOYED RANCHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **11 / 10 / 2010**

**Transaction ID: SA11AI.103992**

Amount of Each Receipt this Period **100.00**

**B.**

Full Name (Last, First, Middle Initial)  
MR HENRY LEWIS 200

Mailing Address 1350 CONNECTICUT AVE NW 5TH FL

City State Zip Code  
**WASHINGTON DC 20036**

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **10 / 15 / 2010**

**Transaction ID: SA11AI.104001**

Amount of Each Receipt this Period **2500.00**

**C.**

Full Name (Last, First, Middle Initial)  
MR MARTIN MACHNIAK 920

Mailing Address 160 SHADOW GLEN CT

City State Zip Code  
**EL CAJON CA 92019**

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

Name of Employer Occupation  
ENGINEER/SCIENTIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 19 / 2010**

**Transaction ID: SA11AI.104146**

Amount of Each Receipt this Period **30.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2630.00**

**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 / 47  
(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.**

Full Name (Last, First, Middle Initial)  
DR THOMAS J MEHELAS 435

Mailing Address 350 SAWGRASS CT

City State Zip Code  
HOLLAND OH 43528

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
10 / 21 / 2010

Transaction ID: SA11AI.104486

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
MR FRANK MUNSON 068

Mailing Address ONE CANDLEWOOD LN

City State Zip Code  
DARIEN CT 06820

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  
MM / DD / YYYY  
10 / 27 / 2010

Transaction ID: SA11AI.104739

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
MR WILLIAM J MYHRE 973

Mailing Address 865 2ND AVE

City State Zip Code  
SWEET HOME OR 97386

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 ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
10 / 21 / 2010

Transaction ID: SA11AI.104790

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1050.00**

**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 / 47
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) MR WILLIAM J MYHRE 973		Date of Receipt																					
	Mailing Address 865 2ND AVE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	7		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		1	7		2	0	1	0														
	City State Zip Code SWEET HOME OR 97386		<b>Transaction ID:</b> SA11AI.104789																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
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 ▼ 675.00		75.00																						

<b>B.</b>	Full Name (Last, First, Middle Initial) MR RAY ODEN 711, JR		Date of Receipt																					
	Mailing Address 702 THORA BLVD		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	9		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		1	9		2	0	1	0														
	City State Zip Code SHREVEPORT LA 71106		<b>Transaction ID:</b> SA11AI.104992																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
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 ▼ 1000.00		1000.00																						

<b>C.</b>	Full Name (Last, First, Middle Initial) BERT R OLIVER 330		Date of Receipt																					
	Mailing Address 1102 NW 118TH WAY		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	8		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		1	8		2	0	1	0														
	City State Zip Code CORAL SPRINGS FL 33071		<b>Transaction ID:</b> SA11AI.105006																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer: SELF EMPLOYED Occupation: LAWYER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		200.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1275.00
<b>TOTAL</b> 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 / 47
	<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	

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.** Full Name (Last, First, Middle Initial)  
MISS EDITH P PALMER 109

Mailing Address 2825 LAROE RD

City State Zip Code  
**CHESTER NY 10918**

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 **11 / 17 / 2010**

**Transaction ID: SA11AI.105111**

Amount of Each Receipt this Period **500.00**

**B.** Full Name (Last, First, Middle Initial)  
MS LINDA J PALMER 341

Mailing Address 115 APRIL SOUND DR

City State Zip Code  
**NAPLES FL 34119**

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 **10 / 28 / 2010**

**Transaction ID: SA11AI.105119**

Amount of Each Receipt this Period **250.00**

**C.** Full Name (Last, First, Middle Initial)  
ELAINE K PORTIER 970

Mailing Address 15770 SW TOWHEE LN

City State Zip Code  
**BEAVERTON OR 97007**

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 ▼ **250.00**

Date of Receipt **10 / 29 / 2010**

**Transaction ID: SA11AI.105370**

Amount of Each Receipt this Period **100.00**

**SUBTOTAL** of Receipts This Page (optional) ..... **850.00**

**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 25 / 47  
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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.**

Full Name (Last, First, Middle Initial)  
ELAINE K PORTIER 970

Mailing Address 15770 SW TOWHEE LN

City State Zip Code  
**BEAVERTON OR 97007**

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  
M M / D D / Y Y Y Y  
**11 / 19 / 2010**

**Transaction ID: SA11AI.105371**

Amount of Each Receipt this Period  
**150.00**

**B.**

Full Name (Last, First, Middle Initial)  
MARGUERITE K POTTER 631

Mailing Address 550 BARNES RD

City State Zip Code  
**SAINT LOUIS MO 63124**

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  
M M / D D / Y Y Y Y  
**10 / 25 / 2010**

**Transaction ID: SA11AI.105377**

Amount of Each Receipt this Period  
**250.00**

**C.**

Full Name (Last, First, Middle Initial)  
MRS MARY PREDEL 121

Mailing Address 59 GARNSEY RD

City State Zip Code  
**REXFORD NY 12148**

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  
M M / D D / Y Y Y Y  
**11 / 02 / 2010**

**Transaction ID: SA11AI.105402**

Amount of Each Receipt this Period  
**150.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **550.00**

**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 26 / 47
	<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.**

Full Name (Last, First, Middle Initial) MR JERRY REYNOLDS 530		Date of Receipt MM / DD / YYYY 11 / 19 / 2010
Mailing Address N56W12546 SILVER SPRING RD		<b>Transaction ID:</b> SA11AI.105593
City MENOMONEE FALLS	State WI	Zip Code 53051
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

**B.**

Full Name (Last, First, Middle Initial) MR EDWIN C SANDHAM 349		Date of Receipt MM / DD / YYYY 10 / 25 / 2010
Mailing Address 1964 SW SAINT ANDREWS DR		<b>Transaction ID:</b> SA11AI.105915
City PALM CITY	State FL	Zip Code 34990
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
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 ▼ 300.00	

**C.**

Full Name (Last, First, Middle Initial) MR EDWIN C SANDHAM 349		Date of Receipt MM / DD / YYYY 10 / 25 / 2010
Mailing Address 1964 SW SAINT ANDREWS DR		<b>Transaction ID:</b> SA11AI.105916
City PALM CITY	State FL	Zip Code 34990
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
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 ▼ 550.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> 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 27 / 47  
(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.** Full Name (Last, First, Middle Initial)  
MR EDWIN C SANDHAM 349

Mailing Address 1964 SW SAINT ANDREWS DR

City State Zip Code  
PALM CITY FL 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 ▼ 570.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** SA11AI.105917

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
MR EDWIN C SANDHAM 349

Mailing Address 1964 SW SAINT ANDREWS DR

City State Zip Code  
PALM CITY FL 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 ▼ 770.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 2 2 / 2 0 1 0

**Transaction ID:** SA11AI.105914

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
MR STEPHEN A SANDOR 481

Mailing Address 1717 KINGS HWY

City State Zip Code  
LINCOLN PARK MI 48146

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 ▼ 206.48

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 7 / 2 0 1 0

**Transaction ID:** SA11AI.105922

Amount of Each Receipt this Period  
50.48

**SUBTOTAL** of Receipts This Page (optional) ..... ► 270.48

**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 28 / 47  
(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.** Full Name (Last, First, Middle Initial)  
CRAIG SNELL 791  
Mailing Address 100 S VAN BUREN ST  
City AMARILLO State TX Zip Code 79101  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 11 / 02 / 2010  
Transaction ID: SA11AI.106366  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
MR JACK SOBEL 112  
Mailing Address 49 WILLOW ST  
City BROOKLYN State NY Zip Code 11201  
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 10 / 20 / 2010  
Transaction ID: SA11AI.106379  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
PETER SPANO 334  
Mailing Address 711 SEAGATE DR  
City DELRAY BEACH State FL Zip Code 33483  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 11 / 02 / 2010  
Transaction ID: SA11AI.106395  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1600.00  
**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 29 / 47

(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.**

Full Name (Last, First, Middle Initial)  
MS DIAN GRAVES STAI 786

Mailing Address 1286 CHERRY SPRING RD

City State Zip Code  
FREDERICKSBURG TX 78624

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.106441

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
MR ROBERT SUNDERLAND 890

Mailing Address 953 PYRITE AVE

City State Zip Code  
HENDERSON NV 89011

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.106599

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR ROBERT SUNDERLAND 890

Mailing Address 953 PYRITE AVE

City State Zip Code  
HENDERSON NV 89011

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.106600

Amount of Each Receipt this Period

100.00

**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: PAGE 30 / 47  
(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.**

Full Name (Last, First, Middle Initial)  
MR ROBERT SUNDERLAND 890

Mailing Address 953 PYRITE AVE

City Henderson State NV Zip Code 89011

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: 11 / 18 / 2010  
**Transaction ID: SA11AI.106597**

Amount of Each Receipt this Period: 100.00

**B.**

Full Name (Last, First, Middle Initial)  
MR ALVIS THOMPSON 922

Mailing Address 72761 GRANITE AVE

City TWENTYNINE PALMS State CA Zip Code 92277

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 / 12 / 2010  
**Transaction ID: SA11AI.106742**

Amount of Each Receipt this Period: 150.00

**C.**

Full Name (Last, First, Middle Initial)  
MR WALLACE TIPPERY 985

Mailing Address 120 WILLIAM FAULKNER DR

City CENTRALIA State WA Zip Code 98531

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 ▼ 237.00

Date of Receipt: 11 / 22 / 2010  
**Transaction ID: SA11AI.106779**

Amount of Each Receipt this Period: 135.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **385.00**

**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 31 / 47  
(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.** Full Name (Last, First, Middle Initial)  
MR ROBERT S TROTH 358  
Mailing Address PO BOX 286

City State Zip Code  
HUNTSVILLE AL 35804

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: 10 / 19 / 2010  
Transaction ID: SA11AI.106851  
Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
MR LEROY WEBER 945  
Mailing Address PO BOX 355

City State Zip Code  
RIO VISTA CA 94571

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 / 17 / 2010  
Transaction ID: SA11AI.107168  
Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
ROBERT WEINER 303  
Mailing Address 2 LEIGHTON CT NW

City State Zip Code  
ATLANTA GA 30327

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: 11 / 10 / 2010  
Transaction ID: SA11AI.107189  
Amount of Each Receipt this Period: 250.00

**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: PAGE 32 / 47

(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.**

Full Name (Last, First, Middle Initial)  
MR K DEAN WILLIS 357

Mailing Address 2504 CRANFIELD RD SE

City State Zip Code  
OWENS CROSS ROADS AL 35763

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

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	8	/	2	0	1	0

Transaction ID: SA11AI.107341

Amount of Each Receipt this Period

250.00
--------

**B.**

Full Name (Last, First, Middle Initial)  
MR KENNETH WRIGHT 611

Mailing Address RR 3527 ROTAY

City State Zip Code  
ROCKFORD IL 61108

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA11AI.107434

Amount of Each Receipt this Period

100.00
--------

**C.**

Full Name (Last, First, Middle Initial)  
MR KENNETH WRIGHT 611

Mailing Address RR 3527 ROTAY

City State Zip Code  
ROCKFORD IL 61108

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

Transaction ID: SA11AI.107432

Amount of Each Receipt this Period

100.00
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**SUBTOTAL** of Receipts This Page (optional) ..... ▶

450.00
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**TOTAL** This Period (last page this line number only) ..... ▶

31047.08
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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 33 / 47	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)  
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City State Zip Code  
CHANTILLY VA 20151

FEC ID number of contributing federal political committee.

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
1	0	/	2	9	/	2	0	1	0

Transaction ID: SA15.107546

Amount of Each Receipt this Period

REFUND

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="171.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="171.00"/>

# 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

<p><b>A.</b> Full Name (Last, First, Middle Initial) ADKINS EXPOSURES</p> <p>Mailing Address 1308 RHODE ISLAND AVE NW</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement WEBSITE / BLOG</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.100003 <b>Date of Disbursement</b> 11 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 400.00</p> <p>Category/Type: 001</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) BASE CONNECT, INC.</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL - CREATIVE</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.99992 <b>Date of Disbursement</b> 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 4382.58</p> <p>Category/Type: 003</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) BASE CONNECT, INC.</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL - CREATIVE FEES</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.99993 <b>Date of Disbursement</b> 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 14635.99</p> <p>Category/Type: 003</p>

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

19418.57

**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

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.	Full Name (Last, First, Middle Initial) BASE CONNECT, INC.	Transaction ID: SB21B.99994 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="11"/> <input type="text" value="11"/> / <input type="text" value="11"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - CREATIVE FEES	<input type="text" value="2352.42"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.100004 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="10"/> <input type="text" value="10"/> / <input type="text" value="14"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - POSTAGE	<input type="text" value="8344.01"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.100005 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="11"/> <input type="text" value="11"/> / <input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - POSTAGE	<input type="text" value="58427.62"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="69124.05"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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

A.	Full Name (Last, First, Middle Initial) CENTURY DATA SYSTEMS	Transaction ID: SB21B.99995 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	4	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	4	/	2	0	1	0												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DATA PROCESSING	<table border="1"><tr><td>1893.48</td></tr></table>	1893.48																		
1893.48																					
	Candidate Name BLACK REPUBLICAN PAC	001 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) COLORTREE	Transaction ID: SB21B.99996 Date of Disbursement																			
	Mailing Address 2519 BRITTONS HILL RD	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	5	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	5	/	2	0	1	0												
	City RICHMOND State VA Zip Code 23230	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL - PRINTING	<table border="1"><tr><td>2559.38</td></tr></table>	2559.38																		
2559.38																					
	Candidate Name BLACK REPUBLICAN PAC	003 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE	Transaction ID: SB21B.99997 Date of Disbursement																			
	Mailing Address 504 SHAW ROAD SUITE 206	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	1	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	1	/	2	0	1	0												
	City STERLING State VA Zip Code 20166	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL - PRINTING	<table border="1"><tr><td>2800.00</td></tr></table>	2800.00																		
2800.00																					
	Candidate Name BLACK REPUBLICAN PAC	003 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>7252.86</td></tr></table>	7252.86
7252.86		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td> </td></tr></table>	

# 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

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

Mailing Address 504 SHAW ROAD  
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement  
DIRECT MAIL - PRINTING

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.99998  
Date of Disbursement

11 / 05 / 2010

Amount of Each Disbursement this Period

23434.08

**B.** Full Name (Last, First, Middle Initial)  
CONSOLIDATED MAILING SERVICE

Mailing Address 504 SHAW ROAD  
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement  
DIRECT MAIL - PRINTING

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.99999  
Date of Disbursement

11 / 11 / 2010

Amount of Each Disbursement this Period

2558.75

**C.** Full Name (Last, First, Middle Initial)  
MR EDWARD J COUSAR

Mailing Address PO BOX 96613

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement  
CONSULTING - MANAGEMENT

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.100006  
Date of Disbursement

10 / 21 / 2010

Amount of Each Disbursement this Period

1700.00

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

27692.83

**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

A.

Full Name (Last, First, Middle Initial)  
MR EDWARD J COUSAR

Transaction ID: SB21B.100007  
Date of Disbursement

Mailing Address PO BOX 96613

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	1		2	0	1	0

City WASHINGTON State DC Zip Code 20090

Amount of Each Disbursement this Period

Purpose of Disbursement  
CONSULTING - MANAGEMENT

001
-----

Category/  
Type

1000.00
---------

Candidate Name  
BLACK REPUBLICAN PAC

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

B.

Full Name (Last, First, Middle Initial)  
ELECTRONIC REPORTING SYSTEMS INC

Transaction ID: SB21B.100000  
Date of Disbursement

Mailing Address 683 BERRYVILLE AVE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	1	0

City WINCHESTER State VA Zip Code 22601

Amount of Each Disbursement this Period

Purpose of Disbursement  
ELECTRONIC DISCLOSURE REPORTING

001
-----

Category/  
Type

2042.80
---------

Candidate Name  
BLACK REPUBLICAN PAC

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

C.

Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Transaction ID: SB21B.100008  
Date of Disbursement

Mailing Address 11325 RANDOM HILLS DR

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	1	0

City FAIRFAX State VA Zip Code 22030

Amount of Each Disbursement this Period

Purpose of Disbursement  
AMEX COLLECTION FEE

001
-----

Category/  
Type

4.95
------

Candidate Name  
BLACK REPUBLICAN PAC

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

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

3047.75
---------

**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

A.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.100009 Date of Disbursement
	Mailing Address 11325 RANDOM HILLS DR	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement SERVICE CHARGE	<input type="text" value="300.60"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.100010 Date of Disbursement
	Mailing Address 11325 RANDOM HILLS DR	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement AMEX DISCOUNT FEE	<input type="text" value="14.98"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.100011 Date of Disbursement
	Mailing Address 11325 RANDOM HILLS DR	<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement MERCHANT SERVICE CHARGE	<input type="text" value="75.00"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="390.58"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)

PAGE 40 / 47

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement MERCHANT SERVICE CHARGE</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.100012 <b>Date of Disbursement</b> 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 359.83</p> <p>Category/Type 001</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) INTEGRAM</p> <p>Mailing Address 8421 HILLTOP RD</p> <p>City FAIRFAX State VA Zip Code 22031</p> <p>Purpose of Disbursement DIRECT MAIL - PRINTING</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.100001 <b>Date of Disbursement</b> 11 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 3353.68</p> <p>Category/Type 003</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) LEGACY LISTS INC</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement LIST RENTALS</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.100013 <b>Date of Disbursement</b> 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2390.70</p> <p>Category/Type 003</p>

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

6104.21

**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

A.	Full Name (Last, First, Middle Initial) LEGACY LISTS INC	Transaction ID: SB21B.100014 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="10"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST RENTALS	<input type="text" value="400.00"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LEGACY LISTS INC	Transaction ID: SB21B.100015 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="11"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST RENTALS	<input type="text" value="8791.59"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) LEGACY LISTS INC	Transaction ID: SB21B.100016 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="11"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST RENTALS	<input type="text" value="403.43"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9595.02"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)

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<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

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.

Full Name (Last, First, Middle Initial)  
WASHINGTON INTELLIGENCE BUREAU

Transaction ID: SB21B.100002

Date of Disbursement

Mailing Address 4128 PEPSI PLACE

<sup>M</sup>	<sup>M</sup>	/	<sup>D</sup>	<sup>D</sup>	/	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>
1	1		0	5		2	0	1	0

City State Zip Code  
CHANTILLY VA 20151

Amount of Each Disbursement this Period

1886.43
---------

Purpose of Disbursement  
CAGING & ESCROW SERVICES

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) ..... ►

1886.43
---------

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

144512.30
-----------

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

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

Outstanding Balance Beginning This Period <input type="text" value="41039.01"/>		<b>Transaction ID: SD10.4113</b>	
Amount Incurred This Period <input type="text" value="43282.39"/>	Payment This Period <input type="text" value="21370.99"/>	Outstanding Balance at Close of This Period <input type="text" value="62950.41"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> CENTURY DATA SYSTEMS			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="4303.21"/>		<b>Transaction ID: SD10.90227</b>	
Amount Incurred This Period <input type="text" value="5852.94"/>	Payment This Period <input type="text" value="1893.48"/>	Outstanding Balance at Close of This Period <input type="text" value="8262.67"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> COLORTREE			Nature of Debt (Purpose): DIRECT MAIL - PRINTING
Mailing Address 2519 BRITTONS HILL RD			
City	State	ZIP Code	
RICHMOND	VA	23230	

Outstanding Balance Beginning This Period <input type="text" value="2559.38"/>		<b>Transaction ID: SD10.90228</b>	
Amount Incurred This Period <input type="text" value="2559.38"/>	Payment This Period <input type="text" value="2559.38"/>	Outstanding Balance at Close of This Period <input type="text" value="2559.38"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="73772.46"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> 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)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor CONSOLIDATED MAILING SERVICE	Nature of Debt (Purpose): DIRECT MAIL - PRINTING
Mailing Address 504 SHAW ROAD SUITE 206	
City State ZIP Code STERLING VA 20166	

Outstanding Balance Beginning This Period 29842.41	<b>Transaction ID:</b> SD10.90229	
Amount Incurred This Period 30079.59	Payment This Period 28792.83	Outstanding Balance at Close of This Period 31129.17

<b>B.</b> 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 22601	

Outstanding Balance Beginning This Period 5069.20	<b>Transaction ID:</b> SD10.63979	
Amount Incurred This Period 4721.60	Payment This Period 2042.80	Outstanding Balance at Close of This Period 7748.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor INTEGRAM	Nature of Debt (Purpose): DIRECT MAIL - PRINTING
Mailing Address 8421 HILLTOP RD	
City State ZIP Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 3353.68	<b>Transaction ID:</b> SD10.90231	
Amount Incurred This Period 13332.11	Payment This Period 3353.68	Outstanding Balance at Close of This Period 13332.11

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	52209.28
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 45 / 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor MACKENZIE & COMPANY	Nature of Debt (Purpose): CONSULTING - COMPLIANCE
Mailing Address 3464 S UTAH ST	
City State ZIP Code ARLINGTON VA 22206	

Outstanding Balance Beginning This Period 1500.00	<b>Transaction ID:</b> SD10.72919	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor PATTON-KIEHL GROUP	Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address PO BOX 590	
City State ZIP Code THORNBURG VA 22565	

Outstanding Balance Beginning This Period 189.95	<b>Transaction ID:</b> SD10.63997	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 189.95

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor WASHINGTON INTELLIGENCE BUREAU	Nature of Debt (Purpose): CAGING & ESCROW SERVICES
Mailing Address 4128 PEPSI PLACE	
City State ZIP Code CHANTILLY VA 20151	

Outstanding Balance Beginning This Period 1886.43	<b>Transaction ID:</b> SD10.90233	
Amount Incurred This Period 3340.41	Payment This Period 1886.43	Outstanding Balance at Close of This Period 3340.41

1) <b>SUBTOTALS</b> This Period This Page (optional).....	5030.36
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 46 / 47	
	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 WEST END PRINTING CO			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address 1609 SHERWOOD AVE			
City RICHMOND	State VA	ZIP Code 23220	

Outstanding Balance Beginning This Period		Transaction ID: SD10.23902	
200.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	200.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	200.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	131212.10
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	131212.10

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) BLACK REPUBLICAN PAC	FEC IDENTIFICATION NUMBER <b>C</b> C00437053
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
RED CAP STRATEGY

Mailing Address  
PO BOX 300503

City	State	Zip Code
MINNEAPOLIS	MN	55403

Purpose of Expenditure PLANNING, PRODUCTION & RADIO BUY	Category/ Type	004
--	-------------------	-----

Name of Federal Candidate supported or Opposed by expenditure:  
TIMOTHY E SCOTT

Calendar Year-To-Date Per Election for Office Sought	5500.00
---	---------

Date  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Amount  
5500.00

Transaction ID: SE.100017

Office Sought:  House State: SC  
 Senate District: 01  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010

Full Name (Last, First, Middle, Initial) of Payee  
RED CAP STRATEGY

Mailing Address  
PO BOX 300503

City	State	Zip Code
MINNEAPOLIS	MN	55403

Purpose of Expenditure PLANNING, PRODUCTION & RADIO BUY	Category/ Type	004
--	-------------------	-----

Name of Federal Candidate supported or Opposed by expenditure:  
RYAN L FRAZIER

Calendar Year-To-Date Per Election for Office Sought	14500.00
---	----------

Date  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Amount  
14500.00

Transaction ID: SE.100019

Office Sought:  House State: CO  
 Senate District: 07  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	20000.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	20000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE  
Signature

Date M M / D D / Y Y Y Y  
1 2 / 0 1 / 2 0 1 0