

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
BLACK REPUBLICAN PAC

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	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>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		8942.99
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	29628.53									
(c) Total Receipts (from Line 19)	32337.62	1219350.96								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	61966.15	1228293.95								
7. Total Disbursements (from Line 31)	56898.88	1223226.68								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5067.27	5067.27								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	150440.89									

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	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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)	9671.00	270141.50
(ii) Unitemized	22666.62	948849.63
(iii) TOTAL (add Lines 11(a)(i) and (ii)	32337.62	1218991.13
(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)	32337.62	1218991.13
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)	0.00	359.83
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))	32337.62	1219350.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	32337.62	1219350.96

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	56898.88	1198711.68
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	56898.88	1198711.68
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	7000.00
24. Independent Expenditure (use Schedule E)	0.00	11690.00
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	5825.00
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))..	56898.88	1223226.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56898.88	1223226.68

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)	32337.62	1218991.13
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	32337.62	1218991.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	56898.88	1198711.68
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	359.83
38. Net Operating Expenditures (subtract Line 37 from Line 36)	56898.88	1198351.85

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) MISS MARGARET ALLEE 329	Date of Receipt MM / DD / YYYY 12 / 01 / 2008
	Mailing Address 104 RIVER OAK DR	Transaction ID: SA11AI.64021
	City State Zip Code VERO BEACH FL 32963	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) MR BILLY J ANDERSON 212	Date of Receipt MM / DD / YYYY 12 / 17 / 2008
	Mailing Address 1115 DURST ST	Transaction ID: SA11AI.64031
	City State Zip Code BALTIMORE MD 21230	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
Name of Employer FEDERAL DEPOSIT INSURANCE CORP	Occupation FINANCE	
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 ROGER ANDREW 546	Date of Receipt MM / DD / YYYY 11 / 25 / 2008
	Mailing Address 581 W MAIN ST	Transaction ID: SA11AI.64033
	City State Zip Code LA FARGE WI 54639	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
Name of Employer SELF EMPLOYED	Occupation FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

SUBTOTAL of Receipts This Page (optional)	235.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 46
	<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 GREGORY M BOXOLD 968

Mailing Address **838 KAAHUE ST**

City **HONOLULU** State **HI** Zip Code **96825**

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

Name of Employer **UBS FINANCIAL SERVICES** Occupation **FINANCIAL ADVISOR**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt **12 / 15 / 2008**

Transaction ID: SA11AI.64112

Amount of Each Receipt this Period **100.00**

B. Full Name (Last, First, Middle Initial)
MR MAURICE BRINKMAN 773

Mailing Address **112 ELKINS LK**

City **HUNTSVILLE** State **TX** Zip Code **77340**

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 **12 / 08 / 2008**

Transaction ID: SA11AI.64121

Amount of Each Receipt this Period **50.00**

C. Full Name (Last, First, Middle Initial)
MR HARRY BRUCE 799

Mailing Address **1082 LOS JARDINES CIR**

City **EL PASO** State **TX** Zip Code **79912**

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 **12 / 09 / 2008**

Transaction ID: SA11AI.64132

Amount of Each Receipt this Period **50.00**

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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 8 / 46
	<input checked="" 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 BARTON BULMAN 559		Date of Receipt MM / DD / YYYY 12 / 08 / 2008		
	Mailing Address 11500 GOLDENROD RD		Transaction ID: SA11AI.64140		
	City CALEDONIA	State MN	Zip Code 55921	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NONE	Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00			

B.	Full Name (Last, First, Middle Initial) TIM J CALHOUN 284		Date of Receipt MM / DD / YYYY 12 / 05 / 2008		
	Mailing Address 106 CHIMNEY LN		Transaction ID: SA11AI.64161		
	City WILMINGTON	State NC	Zip Code 28409	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer	Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00			

C.	Full Name (Last, First, Middle Initial) MR GIUSEPPE CECCHI 222		Date of Receipt MM / DD / YYYY 11 / 26 / 2008		
	Mailing Address 1700 N MOORE ST		Transaction ID: SA11AI.64177		
	City ARLINGTON	State VA	Zip Code 22209	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer THE IDI GROUP	Occupation PRESIDENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00			

SUBTOTAL of Receipts This Page (optional)	1150.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 46
	<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) WILLIAM S CHILDS 462		Date of Receipt	
	Mailing Address 3538 EASTWIND ST		M M / D D / Y Y Y Y Y 1 2 / 0 4 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.64184
	INDIANAPOLIS	IN	46227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
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 ▼ 1100.00		

B.	Full Name (Last, First, Middle Initial) MRS ELLOINE M CLARK 752		Date of Receipt	
	Mailing Address 3716 MAPLEWOOD AVE		M M / D D / Y Y Y Y Y 1 2 / 0 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.64192
	DALLAS	TX	75205	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1500.00	
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 ▼ 1500.00		

C.	Full Name (Last, First, Middle Initial) MR PAUL DE CLEVA 752		Date of Receipt	
	Mailing Address 400 N SAINT PAUL ST		M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.64194
	DALLAS	TX	75201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
Name of Employer DP CONSULTANTS		Occupation CONSULTANT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional)	▶	1700.00
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 10 / 46
	<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 EUGENE COOK 719

Mailing Address 202 SHAWNEE ST

City State Zip Code
HOT SPRINGS AR 71901

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

Name of Employer
SELF EMPLOYED

Occupation
RECYCLING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
12 / 05 / 2008

Transaction ID: SA11AI.64223

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR DEAN CORSONES 341

Mailing Address 15747 VILLORESI WAY

City State Zip Code
NAPLES FL 34110

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

Name of Employer
SELF EMPLOYED

Occupation
ATTY/CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
12 / 05 / 2008

Transaction ID: SA11AI.64232

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
DR ANDREW CROOK 950

Mailing Address 2600 CASTELLO WAY

City State Zip Code
SANTA CLARA CA 95051

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

Name of Employer
LOCKHEED MARTIN

Occupation
ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
MM / DD / YYYY
12 / 22 / 2008

Transaction ID: SA11AI.64246

Amount of Each Receipt this Period
150.00

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: (check only one)	PAGE 11 / 46
	<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 JAMES H CRUSE 232	Date of Receipt MM / DD / YYYY 12 / 03 / 2008
	Mailing Address 2300 W GRACE ST	Transaction ID: SA11AI.64248
	City State Zip Code RICHMOND VA 23220	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
Name of Employer SCREENCRAFTS	Occupation DIE CUTTER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) MRS D EVELYN ELLIS 461	Date of Receipt MM / DD / YYYY 12 / 15 / 2008
	Mailing Address 8401 N RUSHVILLE RD	Transaction ID: SA11AI.64330
	City State Zip Code CARTHAGE IN 46115	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00	

C.	Full Name (Last, First, Middle Initial) OTTO FIALA 091	Date of Receipt MM / DD / YYYY 12 / 01 / 2008
	Mailing Address CMR 480 BOX 672	Transaction ID: SA11AI.64358
	City State Zip Code APO AE 09128	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer LC COMM	Occupation ANALYST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 46
	<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) OTTO FIALA 091		Date of Receipt	
	Mailing Address CMR 480 BOX 672		M M / D D / Y Y Y Y Y 1 2 / 0 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.64357
	APO	AE	09128	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.00	
Name of Employer LC COMM		Occupation ANALYST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 305.00		

B.	Full Name (Last, First, Middle Initial) LOIS FRANKE 875		Date of Receipt	
	Mailing Address 117 E LUPITA RD		M M / D D / Y Y Y Y Y 1 1 / 2 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.64386
	SANTA FE	NM	87505	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		75.00	
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 ▼ 225.00		

C.	Full Name (Last, First, Middle Initial) LOIS FRANKE 875		Date of Receipt	
	Mailing Address 117 E LUPITA RD		M M / D D / Y Y Y Y Y 1 2 / 1 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.64387
	SANTA FE	NM	87505	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		75.00	
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		

SUBTOTAL of Receipts This Page (optional)	▶	180.00
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 13 / 46
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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 IVO P GREIF 617		Date of Receipt
	Mailing Address 306 AUGUSTINE WAY		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	NORMAL	IL	61761
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.64439
Name of Employer NONE		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	<input type="text" value="30.00"/>

B.	Full Name (Last, First, Middle Initial) MR ROBERT HALVERSTADT 068		Date of Receipt
	Mailing Address 3161 MEADOW RDG		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	REDDING	CT	06896
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.64457
Name of Employer NONE		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="350.00"/>	<input type="text" value="100.00"/>

C.	Full Name (Last, First, Middle Initial) MISS HELEN HENSHAW 105		Date of Receipt
	Mailing Address PO BOX 189		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	WACCABUC	NY	10597
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.64479
Name of Employer NONE		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="750.00"/>	<input type="text" value="250.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="380.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 46
(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)
MR EUGENE HOLMES 367

Mailing Address 246 COUNTY ROAD 894

City State Zip Code
MARION JUNCTION AL 36759

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 ▼ 202.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.64499

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
MRS ANN M HUNT 381

Mailing Address 4036 DUMAINE WAY

City State Zip Code
MEMPHIS TN 38117

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 Y
1 2 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.64514

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
MS CHRISTINE JACKSON 284

Mailing Address 910 SHOALCREEK PL

City State Zip Code
WILMINGTON NC 28405

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 Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.64522

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **160.00**

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 15 / 46
(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 D PATRICIA JENNETT 605		Date of Receipt
Mailing Address 416 DEEPWOOD CT		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
City	State	Zip Code
NAPERVILLE	IL	60540
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.64531
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
NONE	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) MS MAE MATEEL JOHNSON 902		Date of Receipt
Mailing Address 8328 MANITOBA ST APT 10		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
City	State	Zip Code
PLAYA DEL REY	CA	90293
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.64539
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
FAA	COMP SPEC	
Receipt For:	Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) MR RAYMOND O JOHNSON 940		Date of Receipt
Mailing Address 495 S TAAFFE ST		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
City	State	Zip Code
SUNNYVALE	CA	94086
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.64540
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="260.00"/>	
<input type="checkbox"/> Other (specify) ▼		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 46
	<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) MISS JULIA Y KABANCE 665	Date of Receipt MM / DD / YYYY 12 / 05 / 2008
	Mailing Address 104 E TOMAHAWK DR	Transaction ID: SA11AI.64556
	City State Zip Code SAINT MARYS KS 66536	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation ACCOUNTING RETIRED	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00

B.	Full Name (Last, First, Middle Initial) MRS MARIE-LUISE KALSI 770	Date of Receipt MM / DD / YYYY 12 / 15 / 2008
	Mailing Address 13307 CAROUSEL CT	Transaction ID: SA11AI.64558
	City State Zip Code HOUSTON TX 77041	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NONE RETIRED	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00

C.	Full Name (Last, First, Middle Initial) MRS GERALDINE C KEEGAN 532	Date of Receipt MM / DD / YYYY 12 / 09 / 2008
	Mailing Address 1904 W SALEM ST	Transaction ID: SA11AI.64567
	City State Zip Code MILWAUKEE WI 53221	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NONE RETIRED	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

SUBTOTAL of Receipts This Page (optional)	155.00
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 / 46
(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 GERALDINE C KEEGAN 532
 Mailing Address 1904 W SALEM ST
 City State Zip Code
 MILWAUKEE WI 53221
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 5 / 2 0 0 8
Transaction ID: SA11AI.64568
 Amount of Each Receipt this Period
 25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

B. Full Name (Last, First, Middle Initial)
MR GARY L KNOSP 601
 Mailing Address 1033 E JEFFERSON AVE
 City State Zip Code
 WHEATON IL 60187
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 2 / 2 0 0 8
Transaction ID: SA11AI.64595
 Amount of Each Receipt this Period
 75.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AON CORP Occupation INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

C. Full Name (Last, First, Middle Initial)
MR CHARLES F KSIENIEWICH 132
 Mailing Address 215 AVERY AVE
 City State Zip Code
 SYRACUSE NY 13204
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 5 / 2 0 0 8
Transaction ID: SA11AI.64617
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

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 18 / 46

(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 CHARLES F KSIENIEWICH 132

Mailing Address 215 AVERY AVE

City State Zip Code
SYRACUSE NY 13204

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) ▼ 400.00

Date of Receipt

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

Transaction ID: SA11AI.64616

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
DR JAMES LABACH 662, MD

Mailing Address 10002 W 121ST ST

City State Zip Code
SHAWNEE MISSION KS 66213

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

Name of Employer Occupation
PHYSICIANS REFERENCE LAB PATHOLOGIST

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

Date of Receipt

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

Transaction ID: SA11AI.64624

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
MR DORRANCE B LANCE 083

Mailing Address 438 ALLOWAY FRIESBURG RD

City State Zip Code
BRIDGETON NJ 08302

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) ▼ 375.00

Date of Receipt

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

Transaction ID: SA11AI.64627

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ►

300.00

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 19 / 46
	<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 LOUIS G LAPOINTE 010, JR		Date of Receipt
	Mailing Address 226 PARKER ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	EAST LONGMEADOW	MA	01028
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.64633
Name of Employer NONE		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 250.00	

B.	Full Name (Last, First, Middle Initial) MRS INGEBORG R LEDERGERBER 331		Date of Receipt
	Mailing Address 14248 SW 47TH ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	MIAMI	FL	33175
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.64641
Name of Employer NONE		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 338.00	

C.	Full Name (Last, First, Middle Initial) MS MARIE J LETT 760		Date of Receipt
	Mailing Address 3940 LETT LN		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	BURLESON	TX	76028
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.64647
Name of Employer SELF EMPLOYED		Occupation RANCHER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 450.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 225.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 46
(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)
TRUDY A MACKAY 853

Mailing Address 1312 E COUNTY 16TH ST

City State Zip Code
YUMA AZ 85365

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
12 / 08 / 2008

Transaction ID: SA11AI.64678

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
MISS BEVERLY MCMAHON 979

Mailing Address PO BOX 608

City State Zip Code
ONTARIO OR 97914

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt
MM / DD / YYYY
12 / 01 / 2008

Transaction ID: SA11AI.64717

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
MR DONALD MESSA 054

Mailing Address 10 KELLOGG RD STE 365

City State Zip Code
ESSEX JUNCTION VT 05452

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
MM / DD / YYYY
12 / 19 / 2008

Transaction ID: SA11AI.64725

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **105.00**

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 / 46
(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 MARGARET F MILLER 460
Mailing Address 13553 KENSINGTON PL
City CARMEL State IN Zip Code 46032
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 ▼ 243.00
Date of Receipt 12 / 05 / 2008
Transaction ID: SA11AI.64735
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
MR J ROGER MILLER 530
Mailing Address 4933 EVERGREEN DR
City SHEBOYGAN State WI Zip Code 53081
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 ▼ 248.00
Date of Receipt 12 / 16 / 2008
Transaction ID: SA11AI.64736
Amount of Each Receipt this Period 33.00

C. Full Name (Last, First, Middle Initial)
MR WILLIAM MILLER 826
Mailing Address 625 S BEECH ST
City CASPER State WY Zip Code 82601
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00
Date of Receipt 11 / 25 / 2008
Transaction ID: SA11AI.64739
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 103.00
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 / 46
(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 WILLIAM MILLER 826

Mailing Address 625 S BEECH ST

City State Zip Code
CASPER WY 82601

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.64738

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
MR CHARLES P MINNING 910

Mailing Address 2029 FAIR OAKS AVE

City State Zip Code
SOUTH PASADENA CA 91030

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

Name of Employer Occupation ENGINEERING TECH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.64742

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
MR JOSEPH MYERS 321

Mailing Address 157 MALLARD LN

City State Zip Code
DAYTONA BEACH FL 32119

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 ▼ 263.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.64770

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 135.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 46
(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 HENRY P NEMENZ 445, SR
Mailing Address 8518 TWIN OAKS CT

City POLAND State OH Zip Code 44514

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

Name of Employer Occupation RETAIL FOOD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 11 / 26 / 2008
Transaction ID: SA11AI.64784
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
MR HENRY M NEUMANN 300
Mailing Address 622 WEBSTER DR

City DECATUR State GA Zip Code 30033

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

Name of Employer Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 12 / 08 / 2008
Transaction ID: SA11AI.64785
Amount of Each Receipt this Period: 150.00

C. Full Name (Last, First, Middle Initial)
MS KATHRYN P NOBLE 432
Mailing Address 2809 LYMINGTON RD

City COLUMBUS State OH Zip Code 43220

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

Name of Employer Occupation ANESTHESIOLOGIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1700.00

Date of Receipt: 12 / 05 / 2008
Transaction ID: SA11AI.64793
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 450.00

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 24 / 46
(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 SHIRLEY G O'BOYLE 801
 Mailing Address 18901 BRIARGATE LN APT 1F
 City State Zip Code
 PARKER CO 80134
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 8
Transaction ID: SA11AI.64802
 Amount of Each Receipt this Period
 38.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 233.00

B. Full Name (Last, First, Middle Initial)
MR ROBERT OWEN 804
 Mailing Address 32743 UPPER BEAR CREEK RD
 City State Zip Code
 EVERGREEN CO 80439
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 8
Transaction ID: SA11AI.64819
 Amount of Each Receipt this Period
 50.00
 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 ▼
 350.00

C. Full Name (Last, First, Middle Initial)
MR JOHN A PAGIN 467
 Mailing Address PO BOX 86
 City State Zip Code
 HOWE IN 46746
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 5 / 2 0 0 8
Transaction ID: SA11AI.64821
 Amount of Each Receipt this Period
 100.00
 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 ▼
 500.00

SUBTOTAL of Receipts This Page (optional) ► **188.00**
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 46
	<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) MR WESLEY PAYNE 286	Date of Receipt MM / DD / YYYY 12 / 04 / 2008
	Mailing Address 355 GUILFORD RD	Transaction ID: SA11AI.64839
	City State Zip Code HARMONY NC 28634	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

B.	Full Name (Last, First, Middle Initial) MR ROBERT PERKINSON 631	Date of Receipt MM / DD / YYYY 12 / 05 / 2008
	Mailing Address 222 CARLYLE LAKE DR	Transaction ID: SA11AI.64848
	City State Zip Code SAINT LOUIS MO 63141	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) MR WAYNE L PHIPPS 805	Date of Receipt MM / DD / YYYY 12 / 01 / 2008
	Mailing Address 5951 WC ROAD 8E	Transaction ID: SA11AI.64865
	City State Zip Code BERTHOUD CO 80513	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer SELF EMPLOYED	Occupation HORSESHOER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	150.00
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 26 / 46
(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 RODERICK K RAWLINS 863

Mailing Address 374 OAK CREEK CLIFFS DR

City State Zip Code
SEDONA AZ 86336

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

Name of Employer NONE Occupation RETIRD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11AI.64894

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MRS CAROL J REUTER 112

Mailing Address 8201 4TH AVE

City State Zip Code
BROOKLYN NY 11209

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.64909

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MRS CAROL J REUTER 112

Mailing Address 8201 4TH AVE

City State Zip Code
BROOKLYN NY 11209

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
M M / D D / Y Y Y Y Y
1 2 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.64910

Amount of Each Receipt this Period
100.00

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 27 / 46
(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 HOMER J ROSE 156

Mailing Address 806 WELDON ST

City State Zip Code
LATROBE PA 15650

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

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

Transaction ID: SA11AI.64934

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
JEAN F ROSS 535

Mailing Address 9401 OLD SAUK RD APT 131

City State Zip Code
MIDDLETON WI 53562

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 213.00

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

Transaction ID: SA11AI.64939

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
MRS VIRGINIA B ROUSH 949

Mailing Address 600 DEER VALLEY RD APT 2E

City State Zip Code
SAN RAFAEL CA 94903

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 Y
1 2 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.64942

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **175.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 46

(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 JANICE B RUBEL 331

Mailing Address 2000 S BAYSHORE DR

City State Zip Code
MIAMI FL 33133

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

Name of Employer Occupation
INNISFREE, INC IMPORT SPECIALIST

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 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.64944

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)
NEAL RUEGSEGGER 973

Mailing Address 1016 SW MARK ST

City State Zip Code
NEWPORT OR 97365

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.64946

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MS BEVERLEE SCHMIDT 890

Mailing Address 2761 RETREAD RD

City State Zip Code
PAHRUMP NV 89048

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00

Date of Receipt

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

Transaction ID: SA11AI.64970

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 29 / 46
	<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 NED SHANAMAN 170		Date of Receipt																					
	Mailing Address 103 N RACE ST 163		<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>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		0	4		2	0	0	8														
	City State Zip Code RICHLAND PA 17087		Transaction ID: SA11AI.64989																					
FEC ID number of contributing federal political committee. C		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 ▼ 300.00		70.00																						

B.	Full Name (Last, First, Middle Initial) MRS DEBORAH J SHERLOCK 432		Date of Receipt																					
	Mailing Address 474 S TERRACE 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>2</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	5		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		0	5		2	0	0	8														
	City State Zip Code COLUMBUS OH 43204		Transaction ID: SA11AI.64999																					
FEC ID number of contributing federal political committee. C		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 ▼ 385.00		25.00																						

C.	Full Name (Last, First, Middle Initial) MR RONALD H SMITH 349		Date of Receipt																					
	Mailing Address 1870 SW WILLOWBEND LN		<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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	5		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		2	5		2	0	0	8														
	City State Zip Code PALM CITY FL 34990		Transaction ID: SA11AI.65013																					
FEC ID number of contributing federal political committee. C		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 ▼ 250.00		50.00																						

SUBTOTAL of Receipts This Page (optional)	▶	145.00
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 / 46

(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 HELEN L SMITH 522

Mailing Address 5954 COUNTY ROAD X40

City State Zip Code
ANAMOSA IA 52205

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) ▼ 305.00

Date of Receipt

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

Transaction ID: SA11AI.65014

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)
MS MADELEINE SOUDEE 200

Mailing Address 2325 20TH ST NW

City State Zip Code
WASHINGTON DC 20009

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

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	0	8

Transaction ID: SA11AI.65029

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)
MS PATRICIA STANLEY 088

Mailing Address 7 HUDSON CT

City State Zip Code
FRANKLIN PARK NJ 08823

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

Name of Employer Occupation
PROGRAMMER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 245.00

Date of Receipt

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

Transaction ID: SA11AI.65041

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional)

175.00

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 31 / 46

(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)
MISS MARY F STORY 982

Mailing Address 4980 CASCADE PL

City State Zip Code
OAK HARBOR WA 98277

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 ▼ 255.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.65060

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
MR JOHN STRONG 900

Mailing Address 1432 CRENSHAW BLVD

City State Zip Code
LOS ANGELES CA 90019

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

Name of Employer Occupation
LA COUNTY AUDITOR INTERMEDIATE CLERK

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4445.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.65063

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
MR FRANCIS G TENBUSCH 496

Mailing Address 743 MUNSON AVE

City State Zip Code
TRAVERSE CITY MI 49686

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

Name of Employer Occupation
STEPHAN WOOD PRODUCTS INC OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

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

Transaction ID: SA11AI.65085

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 32 / 46
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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 BARBARA TRAVAGLINI 193		Date of Receipt
	Mailing Address 4000 HAZELWOOD AVE		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	DOWNINGTOWN	PA	19335
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer NONE		Occupation RETIRED	Transaction ID: SA11AI.65110
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	Amount of Each Receipt this Period <input type="text" value="150.00"/>

B.	Full Name (Last, First, Middle Initial) MR FRANK H WALK 701		Date of Receipt
	Mailing Address 150 BROADWAY ST APT 1112		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	NEW ORLEANS	LA	70118
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer WALK, HAYDEL & ASSOC		Occupation PARTNER	Transaction ID: SA11AI.65146
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1700.00"/>	Amount of Each Receipt this Period <input type="text" value="500.00"/>

C.	Full Name (Last, First, Middle Initial) MR LEROY WEBER 945, JR		Date of Receipt
	Mailing Address PO BOX 355		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	RIO VISTA	CA	94571
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer NONE		Occupation RETIRED	Transaction ID: SA11AI.65159
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1200.00"/>	Amount of Each Receipt this Period <input type="text" value="200.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="850.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 33 / 46
(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 JAMES WESTFALL 329
Mailing Address 1035 MAYFLOWER AVE
City MELBOURNE State FL Zip Code 32940
FEC ID number of contributing federal political committee. **C**
Name of Employer US NAVY Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00
Date of Receipt 12 / 08 / 2008
Transaction ID: SA11AI.65166
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
MR GERALD WHITE 600
Mailing Address 2314 DODGE AVE
City WAUKEGAN State IL Zip Code 60085
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 361.00
Date of Receipt 12 / 05 / 2008
Transaction ID: SA11AI.65169
Amount of Each Receipt this Period 60.00

C. Full Name (Last, First, Middle Initial)
DANIEL WIESMAN 372
Mailing Address 84 LESTER AVE APT 231
City NASHVILLE State TN Zip Code 37210
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 278.00
Date of Receipt 12 / 05 / 2008
Transaction ID: SA11AI.65172
Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional) ► 145.00
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 34 / 46
	<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) MS SHIRLEY A WILSON 150		Date of Receipt
	Mailing Address 1215 CREST AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	CHARLEROI	PA	15022
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.65182
Name of Employer H&R BLOCK		Occupation TAXPREPARER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 50.00

B.	Full Name (Last, First, Middle Initial) MR PETER F WILSON 395		Date of Receipt
	Mailing Address 453 CARMARGUE LN		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	BILOXI	MS	39531
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.65183
Name of Employer BANCORP SOUTH		Occupation FINANCIAL SERVICES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 50.00

C.	Full Name (Last, First, Middle Initial) MR GEORGE W YOUNG 012		Date of Receipt
	Mailing Address 235 WALKER ST APT 252		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	LENOX	MA	01240
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.65211
Name of Employer NONE		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 350.00
TOTAL This Period (last page this line number only)	<input type="text"/> 9671.00

**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

A.	Full Name (Last, First, Middle Initial) BASE CONNECT, INC.	Transaction ID: SB21B.63989 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>2</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	0	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	0	/	2	0	0	8												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	<table border="1"><tr><td>10915.01</td></tr></table>	10915.01																		
10915.01																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	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) BASE CONNECT, INC.	Transaction ID: SB21B.63990 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>2</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	7	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	7	/	2	0	0	8												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	<table border="1"><tr><td>3423.11</td></tr></table>	3423.11																		
3423.11																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	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.63993 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>2</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	3	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	0	3	/	2	0	0	8												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	<table border="1"><tr><td>10000.00</td></tr></table>	10000.00																		
10000.00																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	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) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>24338.12</td></tr></table>	24338.12
24338.12		
TOTAL 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) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.63992 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>2</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	0	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	0	/	2	0	0	8												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	<table border="1"><tr><td>3656.60</td></tr></table>	3656.60																		
3656.60																					
	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.	Full Name (Last, First, Middle Initial) CENTURY DATA SYSTEMS	Transaction ID: SB21B.63995 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>2</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	0	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	0	/	2	0	0	8												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DATA PROCESSING	<table border="1"><tr><td>5048.58</td></tr></table>	5048.58																		
5048.58																					
	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) ▼																			

C.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.64005 Date of Disbursement																			
	Mailing Address 11325 RANDOM HILLS DR	<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>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	5	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	2	5	/	2	0	0	8												
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MERCHANT SERVICE FEE (11/03)	<table border="1"><tr><td>20.00</td></tr></table>	20.00																		
20.00																					
	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) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>8725.18</td></tr></table>	8725.18
8725.18		
TOTAL 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)

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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

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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.64006 Date of Disbursement
	Mailing Address 11325 RANDOM HILLS DR	<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement MERCHANT SERVICE FEE (11/04)	<input type="text" value="60.00"/>
	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.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.64007 Date of Disbursement
	Mailing Address 11325 RANDOM HILLS DR	<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement MERCHANT SERVICE FEE (11/04)	<input type="text" value="743.57"/>
	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.64014 Date of Disbursement
	Mailing Address 11325 RANDOM HILLS DR	<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement MERCHANT SERVICE FEE (10/03)	<input type="text" value="253.59"/>
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1057.16"/>
TOTAL 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) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.64010 Date of Disbursement 11 / 30 / 2008
	Mailing Address 11325 RANDOM HILLS DR	Amount of Each Disbursement this Period 243.96
	City FAIRFAX State VA Zip Code 22030	
	Purpose of Disbursement SERVICE CHARGE 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) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.64012 Date of Disbursement 11 / 30 / 2008
	Mailing Address 11325 RANDOM HILLS DR	Amount of Each Disbursement this Period 68.10
	City FAIRFAX State VA Zip Code 22030	
	Purpose of Disbursement AMEX DISCOUNT FEE 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) ▼

C.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.64008 Date of Disbursement 12 / 02 / 2008
	Mailing Address 11325 RANDOM HILLS DR	Amount of Each Disbursement this Period 60.00
	City FAIRFAX State VA Zip Code 22030	
	Purpose of Disbursement MERCHANT SERVICE FEE 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) ▼

SUBTOTAL of Disbursements This Page (optional)	372.06
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)

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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

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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.64009 Date of Disbursement																			
	Mailing Address 11325 RANDOM HILLS DR	<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>2</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	2		2	0	0	8												
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MERCHANT SERVICE FEE	<table border="1"><tr><td>565.88</td></tr></table>	565.88																		
565.88																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																		
001																					
	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.64011 Date of Disbursement																			
	Mailing Address 11325 RANDOM HILLS DR	<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>2</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	0		2	0	0	8												
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period																			
	Purpose of Disbursement SERVICE CHARGE	<table border="1"><tr><td>58.87</td></tr></table>	58.87																		
58.87																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																		
001																					
	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.64013 Date of Disbursement																			
	Mailing Address 11325 RANDOM HILLS DR	<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>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	8												
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period																			
	Purpose of Disbursement AMEX DISCOUNT FEE	<table border="1"><tr><td>19.34</td></tr></table>	19.34																		
19.34																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																		
001																					
	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) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>644.09</td></tr></table>	644.09
644.09		
TOTAL 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) LEGACY LISTS INC	Transaction ID: SB21B.64000 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>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	0		2	0	0	8												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LIST RENTALS	<table border="1"><tr><td>9221.56</td></tr></table>	9221.56																		
9221.56																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	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.64001 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>2</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	7		2	0	0	8												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LIST RENTALS	<table border="1"><tr><td>1919.30</td></tr></table>	1919.30																		
1919.30																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	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) MACKENZIE & COMPANY	Transaction ID: SB21B.64002 Date of Disbursement																			
	Mailing Address 3464 S UTAH ST	<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>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	0		2	0	0	8												
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CONSULTING - COMPLIANCE	<table border="1"><tr><td>1500.00</td></tr></table>	1500.00																		
1500.00																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	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) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>12640.86</td></tr></table>	12640.86
12640.86		
TOTAL 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)

PAGE 41 / 46

<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) MDI IMAGING & MAIL	Transaction ID: SB21B.64003
	Mailing Address 21721-A FILIGREE CT	Date of Disbursement 12 / 10 / 2008
	City ASHBURN State VA Zip Code 20147	Amount of Each Disbursement this Period 4121.41
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	003 Category/ Type
	Candidate Name BLACK REPUBLICAN PAC	
	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) RED CAP STRATEGY	Transaction ID: SB21B.64004
	Mailing Address PO BOX 300503	Date of Disbursement 12 / 03 / 2008
	City MINNEAPOLIS State MN Zip Code 55403	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement CONSULTING - MEDIA	001 Category/ Type
	Candidate Name BLACK REPUBLICAN PAC	
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	9121.41
TOTAL This Period (last page this line number only)	56898.88

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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		Transaction ID: SD10.4113	
67095.99			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
1486.97	14338.12	54244.84	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CENTURY DATA MAILING SERVICES			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		Transaction ID: SD10.4119	
13656.60			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
37457.16	13656.60	37457.16	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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		Transaction ID: SD10.4114	
14688.30			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	5048.58	9639.72	

1) SUBTOTALS This Period This Page (optional).....	▶	101341.72
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

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

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

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.63996	
Amount Incurred This Period 3731.20	Payment This Period 0.00	Outstanding Balance at Close of This Period 3731.20

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 3982.90	Transaction ID: SD10.63979	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3982.90

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

Outstanding Balance Beginning This Period 7618.16	Transaction ID: SD10.16231	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7618.16

1) SUBTOTALS This Period This Page (optional).....	▶	15332.26
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LEGACY LISTS INC

Nature of Debt (Purpose):
FUNDRAISING LIST RENTALS FOR BRPAC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City State ZIP Code
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

35079.31

Transaction ID: SD10.4117

Amount Incurred This Period

0.00

Payment This Period

11140.86

Outstanding Balance at Close of This Period

23938.45

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

Transaction ID: SD10.4118

Amount Incurred This Period

0.00

Payment This Period

1500.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MDI IMAGING & MAIL

Nature of Debt (Purpose):
DIRECT MAIL FUNDRAISING

Mailing Address 21721-A FILIGREE CT

City State ZIP Code
ASHBURN VA 20147

Outstanding Balance Beginning This Period

4121.41

Transaction ID: SD10.16237

Amount Incurred This Period

0.00

Payment This Period

4121.41

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

23938.45

2) **TOTALS** This Period (last page this line number only)..... ▶

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 45 / 46
	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 PATTON-KIEHL GROUP	Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address PO BOX 590	
City THORNBURG State VA ZIP Code 22565	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.63997	
Amount Incurred This Period 5218.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5218.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LEGACY PROJECT INC	Nature of Debt (Purpose): CONSULTING - HIGH DOLLAR FUNDRAISING
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City WASHINGTON State DC ZIP Code 20005	

Outstanding Balance Beginning This Period 1500.00	Transaction ID: SD10.16240	
Amount Incurred This Period -1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.00

C. 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 CHANTILLY State VA ZIP Code 20151	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.63998	
Amount Incurred This Period 4410.46	Payment This Period 0.00	Outstanding Balance at Close of This Period 4410.46

1) SUBTOTALS This Period This Page (optional).....	▶	9628.46
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 46 / 46
	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) SUBTOTALS This Period This Page (optional).....	200.00
2) TOTALS This Period (last page this line number only).....	150440.89
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	150440.89