

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

ADDRESS (number and street) 4246 CHAIN BRIDGE RD FAIRFAX VA 22030

2. FEC IDENTIFICATION NUMBER C00277335 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special, Runoff (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 02 01 2007 through 02 28 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Michael Rumberg Signature of Treasurer Electronically Filed by Michael Rumberg Date 05 14 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		1113.01
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	11113.01									
(c) Total Receipts (from Line 19) .....	0.00	10000.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	11113.01	11113.01								
7. Total Disbursements (from Line 31) .....	4544.67	4544.67								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	6568.34	6568.34								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	16685.40									

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**

Write or Type Committee Name  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	7

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	0.00	0.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ▶	0.00	10000.00
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	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total 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)) .....	0.00	10000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	0.00	10000.00

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	4544.67	4544.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	4544.67	4544.67
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4544.67	4544.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	4544.67	4544.67

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	0.00	10000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	10000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4544.67	4544.67
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4544.67	4544.67

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

Full Name (Last, First, Middle Initial) <b>A. Barchetta Enterprises, LC</b>		Transaction ID: SB21B.7006 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 7	
Mailing Address 7138 Little River TP # 210		Amount of Each Disbursement this Period 750.00	
City Annandale State VA Zip Code 22003	Purpose of Disbursement Compliance and Accounting	001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Commonwealth Digital Office Solutions</b>		Transaction ID: SB21B.7024 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7	
Mailing Address 21205 Ridgetop Circle		Amount of Each Disbursement this Period 254.33	
City Sterling State VA Zip Code 20166	Purpose of Disbursement Equipment Lease - Copier	001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. DeLage Landen Financial Services</b>		Transaction ID: SB21B.7008 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 7	
Mailing Address P.O. Box 41601		Amount of Each Disbursement this Period 240.45	
City Philadelphia State PA Zip Code 19101	Purpose of Disbursement Copier Lease	001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1244.78
<b>TOTAL</b> 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)  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A. Full Name (Last, First, Middle Initial)  
Joe Ragan's Coffee

Mailing Address P.O. Box 125

City Springfield State VA Zip Code 22150

Purpose of Disbursement  
Office Supplies

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB21B.7005  
Date of Disbursement

02 / 09 / 2007

Amount of Each Disbursement this Period

3296.89

SUBTOTAL of Disbursements This Page (optional) ▶

3296.89

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

4541.67

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 8 / 15
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Cavalier Telephone	Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 1146	
City State ZIP Code Richmond VA 23230	

Outstanding Balance Beginning This Period 1622.84	<b>Transaction ID: SD10.7100</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1622.84

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Cavalier Telephone	Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 1146	
City State ZIP Code Richmond VA 23230	

Outstanding Balance Beginning This Period 48.51	<b>Transaction ID: SD10.7101</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 48.51

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Cavalier Telephone	Nature of Debt (Purpose): Telephone
Mailing Address P.O. Box 1146	
City State ZIP Code Richmond VA 23230	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: SD10.7102</b>	
Amount Incurred This Period 318.03	Payment This Period 0.00	Outstanding Balance at Close of This Period 318.03

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>1989.38</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Executive Press	Nature of Debt (Purpose): Printing
Mailing Address Main Street	
City State ZIP Code Fairfax VA 22030	

Outstanding Balance Beginning This Period 2843.95	<b>Transaction ID: SD10.7088</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2843.95

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Executive Press	Nature of Debt (Purpose): Printing
Mailing Address Main Street	
City State ZIP Code Fairfax VA 22030	

Outstanding Balance Beginning This Period 409.50	<b>Transaction ID: SD10.7089</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 409.50

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Executive Press	Nature of Debt (Purpose): Printing
Mailing Address Main Street	
City State ZIP Code Fairfax VA 22030	

Outstanding Balance Beginning This Period 377.27	<b>Transaction ID: SD10.7090</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 377.27

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>3630.72</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Executive Press	Nature of Debt (Purpose): Printing
Mailing Address Main Street	
City State ZIP Code Fairfax VA 22030	

Outstanding Balance Beginning This Period 2062.73	<b>Transaction ID: SD10.7091</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2062.73

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Executive Press	Nature of Debt (Purpose): Printing
Mailing Address Main Street	
City State ZIP Code Fairfax VA 22030	

Outstanding Balance Beginning This Period 341.25	<b>Transaction ID: SD10.7092</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 341.25

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Executive Press	Nature of Debt (Purpose): Printing
Mailing Address Main Street	
City State ZIP Code Fairfax VA 22030	

Outstanding Balance Beginning This Period 6321.00	<b>Transaction ID: SD10.7094</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6321.00

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>8724.98</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Executive Press	Nature of Debt (Purpose): Printing
Mailing Address Main Street	
City State ZIP Code Fairfax VA 22030	

Outstanding Balance Beginning This Period 1291.50	<b>Transaction ID:</b> SD10.7096	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1291.50

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Executive Press	Nature of Debt (Purpose): Printing
Mailing Address Main Street	
City State ZIP Code Fairfax VA 22030	

Outstanding Balance Beginning This Period 687.16	<b>Transaction ID:</b> SD10.7097	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 687.16

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Fairfax Professional Village	Nature of Debt (Purpose): Condo Fee
Mailing Address 4240 Chain Bridge Road	
City State ZIP Code Fairfax VA 22030	

Outstanding Balance Beginning This Period 180.83	<b>Transaction ID:</b> SD10.7115	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 180.83

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	2159.49
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 12 / 15	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Fairfax Professional Village	Nature of Debt (Purpose): Condo Fees
Mailing Address 4240 Chain Bridge Road	
City State ZIP Code Fairfax VA 22030	

Outstanding Balance Beginning This Period	<b>Transaction ID: SD10.7116</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
180.83	0.00	180.83

1) <b>SUBTOTALS</b> This Period This Page (optional).....	180.83
2) <b>TOTALS</b> This Period (last page this line number only).....	16685.40
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**Image# 27990056182**

Form/Schedule: **SD10**      The Cavalier bills were paid by the Thompson in-kind contribution on 4/15/07. The in-kind contribution was refunded on 5/8/07 and will appear on the June report.  
Transaction ID: **SD10.7100**

Form/Schedule: **SD10**      The Cavalier bills were paid by the Thompson in-kind contribution on 4/15/07. The in-kind contribution was refunded on 5/8/07 and will appear on the June report.  
Transaction ID: **SD10.7101**

\*\*\*\*\*

**Image# 27990056183**

Form/Schedule: **SD10**      The Cavalier bills were paid by the Thompson in-kind contribution on 4/15/07. The in-kind contribution was refunded on 5/8/07 and will appear on the June report.  
Transaction ID: **SD10.7102**

Form/Schedule: **SD10**      The Condo Fee bills were paid by the Thompson in-kind contribution on 4/15/07. The in-kind contribution was refunded on 5/8/07 and will appear on the June report.  
Transaction ID: **SD10.7115**

\*\*\*\*\*

**Image# 27990056184**

Form/Schedule: **SD10**      The Condo Fee bills were paid by the Thompson in-kind contribution on 4/15/07. The in-kind contribution was re-  
Transaction ID: **SD10.7116** funded on 5/8/07 and will appear on the June report.

\*\*\*\*\*