

# 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  
Dominion Leadership Trust

ADDRESS (number and street) 106 Carter St  
Check if different than previously reported. (ACC) Falmouth VA 22405

2. **FEC IDENTIFICATION NUMBER** C00482356  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on 11 02 2010 in the State of VA

5. Covering Period 10 14 2010 through 11 22 2010

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 Chris Marston

Signature of Treasurer Electronically Filed by Chris Marston Date 11 30 2010

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

Office Use Only									
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**FEC FORM 3X**  
(Rev. 12/2004)

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

Write or Type Committee Name  
Dominion Leadership Trust

Report Covering the Period: From: 

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		0.00
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	17174.63									
(c) Total Receipts (from Line 19) .....	22380.00	57340.39								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	39554.63	57340.39								
7. Total Disbursements (from Line 31) .....	22663.57	40449.33								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	16891.06	16891.06								
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) .....	0.00									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Dominion Leadership Trust

Report Covering the Period: From: 

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	16550.00	45750.00
(ii) Unitemized .....	1330.00	6090.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	17880.00	51840.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	4500.00	5500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	22380.00	57340.00
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	0.39
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)) .....	22380.00	57340.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	22380.00	57340.39

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1095.16	2310.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1095.16	2310.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10400.00	22000.00
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.....	11168.41	16138.41
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))..	22663.57	40449.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22663.57	40449.33

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 23

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) .....	22380.00	57340.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	22380.00	57340.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1095.16	2310.92
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.39
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1095.16	2310.53

**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 / 23
	<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)  
 Dominion Leadership Trust

**A.**

Full Name (Last, First, Middle Initial) MR. JAMES R. BURRUSS		Date of Receipt MM / DD / YYYY 11 / 01 / 2010
Mailing Address 2815 LINKHORNE DR. STE D		Transaction ID: SA11.3960
City LYNCHBURG	State VA	Zip Code 24503-3356
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation REAL ESTATE	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) MR. JOHN R. CANNON		Date of Receipt MM / DD / YYYY 10 / 18 / 2010
Mailing Address 1133 SHADY LN		Transaction ID: SA11.3912
City SOUTH BOSTON	State VA	Zip Code 24592-6315
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation REAL ESTATE INVESTMENT	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**C.**

Full Name (Last, First, Middle Initial) THE HONORA ROBERT W. CONNER		Date of Receipt MM / DD / YYYY 10 / 18 / 2010
Mailing Address 2042 ARMISTEAD RED		Transaction ID: SA11.3915
City NATHALIE	State VA	Zip Code 24577-2936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer HALIFAX COUNTY	Occupation CLERK OF THE CIRCUIT COURT	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 23
	<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)  
Dominion Leadership Trust

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. BEN J. DAVENPORT	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 121 REID ST	Transaction ID: SA11.3907
	City State Zip Code CHATHAM VA 24531-4398	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation FIRST PIEDMONT CORP EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. STEVEN FISHER	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 2539 DONNS WAY	Transaction ID: SA11.3917
	City State Zip Code OAKTON VA 22124-1144	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. JOHN MORTON FLIPPIN	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 4922 LOCKSVIEW RD	Transaction ID: SA11.3929
	City State Zip Code LYNCHBURG VA 24503-1979	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation FLIIPIN, BRUCE & PORTER, INC. FINANCIAL INVESTMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
 Dominion Leadership Trust

**A.** Full Name (Last, First, Middle Initial)  
 MR. CRAIG A. FRANKLIN  
 Mailing Address 12888 JAMES MONROE HWY  
 City State Zip Code  
 LEESBURG VA 20176-5339  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 TRI-CHORD INFORMATION TECHNOLOGY  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 1 / 2 0 1 0  
**Transaction ID:** SA11.3963  
 Amount of Each Receipt this Period  
1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
 MR. ROGER H. GREEN  
 Mailing Address 1103 GREENWAY CT  
 City State Zip Code  
 LYNCHBURG VA 24503-1909  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 BENCHMARK SYSTEMS HEALTH IT  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 1 / 2 0 1 0  
**Transaction ID:** SA11.3962  
 Amount of Each Receipt this Period  
500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
 DR. DAVID M. HARMAN  
 Mailing Address 3820 PEAKLAND PL  
 City State Zip Code  
 LYNCHBURG VA 24503-2012  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 HARMAN EYE CENTER PHYSICIAN  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 1 / 2 0 1 0  
**Transaction ID:** SA11.3959  
 Amount of Each Receipt this Period  
500.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... 2000.00

**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 9 / 23  
(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)  
Dominion Leadership Trust

**A.**

Full Name (Last, First, Middle Initial)  
MR. THOMAS J. HOCKYCKO

Mailing Address 313 SAINT ANDREWS CIR

City State Zip Code  
LYNCHBURG VA 24503-3700

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

Name of Employer SELF Occupation CONTRACTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: SA11.3931

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. R. HOLT HOGAN

Mailing Address P.O. BOX 656

City State Zip Code  
KEYSVILLE VA 23947-0656

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: SA11.3908

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
HON. MARIANNE L. HORINKO

Mailing Address 4710 BENJAMIN GOSS CT

City State Zip Code  
CHANTILLY VA 20157

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

Name of Employer THG Occupation ENVIRONMENTAL CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: SA11.3936

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2000.00

**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 / 23
	<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)  
 Dominion Leadership Trust

<b>A.</b>	Full Name (Last, First, Middle Initial) HON. MARIANNE L. HORINKO	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 4710 BENJAMIN GOSS CT	<b>Transaction ID:</b> SA11.3937
	City State Zip Code CHANTILLY VA 20157	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer Occupation THG ENVIRONMENTAL CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. RICHARD S. JACKSON	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 15795 SPYGLASS HILL LOOP	<b>Transaction ID:</b> SA11.3965
	City State Zip Code GAINESVILLE VA 20155-3239	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. RONALD G. KIDD, JR.	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 109 FAIRLEA CT	<b>Transaction ID:</b> SA11.3932
	City State Zip Code LYNCHBURG VA 24503-2164	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer Occupation SOUTHERN AIR, INC. EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 23
	<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)  
Dominion Leadership Trust

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. GREGORY A. KOZERA		Date of Receipt
	Mailing Address 200 WILLOW ST		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ELKVIEW	WV	25071-9428
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.3935
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>
			CONTRIBUTION

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. CHRIS A. LUMSDEN		Date of Receipt
	Mailing Address 409 MONROE ST		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SOUTH BOSTON	VA	24592-5052
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.3910
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>
			CONTRIBUTION

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. WILLIAM M. MAYS		Date of Receipt
	Mailing Address 1744 S AMHERST HWY		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	AMHERST	VA	24521-3369
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.3956
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="500.00"/>
			CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1000.00"/>
<b>TOTAL</b> 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 12 / 23
	<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)  
Dominion Leadership Trust

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. PAUL E. MISENER		Date of Receipt
	Mailing Address 11529 SENECA WOODS CT		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	GREAT FALLS	VA	22066-1375
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11.3920
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	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="1000.00"/>
			CONTRIBUTION

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. STEVEN D. MIZE		Date of Receipt
	Mailing Address P.O. BOX 853		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SOUTH BOSTON	VA	24592-0853
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11.3928
Name of Employer TEAM NURSE INC		Occupation HOME HEALTH CARE	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="250.00"/>
			CONTRIBUTION

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. BILL V. NEFF, SR.		Date of Receipt
	Mailing Address 3436 BUFFALO DR		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HARRISONBURG	VA	22802-1931
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11.3922
Name of Employer NEFF ENTERPRISES		Occupation EXECUTIVE	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="500.00"/>
			CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1750.00"/>
<b>TOTAL</b> 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 13 / 23  
(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)  
Dominion Leadership Trust

**A.**

Full Name (Last, First, Middle Initial)  
MR. DEAN M. NICHOLS

Mailing Address 217 FRANKLIN ST

City State Zip Code  
HARRISONBURG VA 22801-4018

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS  
Occupation INFORMATION REQUESTED PER BEST EFFORTS

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 0 / 2 1 / 2 0 1 0

Transaction ID: SA11.3926

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. W. KENT SCRUGGS

Mailing Address 3535 WARDS FORK MILL RD

City State Zip Code  
CULLEN VA 23934-2334

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

Name of Employer NONE  
Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

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

Transaction ID: SA11.3914

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MR. LELAND M. SECKMAN

Mailing Address 110 HICKORY WINDS CT

City State Zip Code  
FOREST VA 24551-1700

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

Name of Employer SECKMAN PRINTING  
Occupation PRINTER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: SA11.3930

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 23
	<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)  
 Dominion Leadership Trust

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. JOHN D.K. SNOOT, III	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 7103 CAPITOL VIEW DR	Transaction ID: SA11.3918
	City State Zip Code MCLEAN VA 22101-2617	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) LEALON M. VASSAR	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 2519 PATRICK HENRY HWY	Transaction ID: SA11.3911
	City State Zip Code CHARLOTTE COURT HO VA 23923	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. MARK A. VIOLA	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address P.O. BOX 575	Transaction ID: SA11.3933
	City State Zip Code BROADWAY VA 22815-0575	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
Name of Employer VIOLA ENGINEERING	Occupation ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 23
	<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)  
Dominion Leadership Trust

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. JOHN R. VOGT	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 6038 CRIMSON CT	<b>Transaction ID:</b> SA11.3919
	City State Zip Code MCLEAN VA 22101-1818	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer Occupation CHAIN BRIDGE BANK BANKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) THE HONORA GARY D. WALKER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address P.O. BOX 448	<b>Transaction ID:</b> SA11.3909
	City State Zip Code CHARLOTTE COURT HO VA 23923-0488	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer Occupation CORNERSTONE INSURANCE INSURANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) DORCHESTER TOWERS ASSOCIATES, LLC	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 2400 COLUMBIA PIKE	<b>Transaction ID:</b> SA11.3971
	City State Zip Code ARLINGTON VA 22204	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	<b>SEE ATTRIBUTION BELOW</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 16 / 23	
	(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"/> 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)  
 Dominion Leadership Trust

<b>A.</b>	Full Name (Last, First, Middle Initial) LOLA C. REINSCH		Date of Receipt																					
	Mailing Address 2040 COLUMBIA PIKE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		2	8		2	0	1	0														
	City State Zip Code ARLINGTON VA 22204-6236		Transaction ID: SA11.3972																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00																						
Name of Employer E.G. REINSCH INC		Occupation CEO/OWNER																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00																						
		CONTRIBUTION																						
		[MEMO ITEM]																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	16550.00

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

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

FOR LINE NUMBER: PAGE 17 / 23  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Dominion Leadership Trust

**A.** Full Name (Last, First, Middle Initial)  
AMERICANS IN CONTACT PAC  
Mailing Address P.O. BOX 204

City State Zip Code  
ALEXANDRIA VA 22313-0204

FEC ID number of contributing federal political committee. **C** C00455444

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 1 / 2 0 1 0  
**Transaction ID:** SA11.3916  
 Amount of Each Receipt this Period  
 1000.00  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
CITIZENS UNITED POLITICAL VICTORY FUND  
Mailing Address 1006 PENNSYLVANIA AVE SE

City State Zip Code  
WASHINGTON DC 20003-2142

FEC ID number of contributing federal political committee. **C** C00295527

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 1 / 2 0 1 0  
**Transaction ID:** SA11.3921  
 Amount of Each Receipt this Period  
 2500.00  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
UPSPAC  
Mailing Address 55 GLENLAKE PKWY NE

City State Zip Code  
ATLANTA GA 30328-3474

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 7 / 2 0 1 0  
**Transaction ID:** SA11.3934  
 Amount of Each Receipt this Period  
 1000.00  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

**TOTAL** This Period (last page this line number only) ..... ► 4500.00

**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)  
Dominion Leadership Trust

A.	Full Name (Last, First, Middle Initial) Click & Pledge	Transaction ID: SB21.005 Date of Disbursement
	Mailing Address 2200 Kraft Dr Ste 1175	<input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
	City Blacksburg State VA Zip Code 24060	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges	<input type="text" value="212.75"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Election CFO, LLC	Transaction ID: SB21.002 Date of Disbursement
	Mailing Address PO Box 26141	<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimbursement (See Below)	<input type="text" value="415.80"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Molasses Grill	Transaction ID: SB21.004 Date of Disbursement
	Mailing Address PO Box 906	<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City Halifax State VA Zip Code 24558	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Lunch Catering	<input type="text" value="415.80"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="628.55"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 23

<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)  
Dominion Leadership Trust

A.

Full Name (Last, First, Middle Initial)  
The Early Katering Company

Mailing Address PO Box 415

City Harrisonburg State VA Zip Code 22803

Purpose of Disbursement  
Fundraising Breakfast Catering

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21.003

Date of Disbursement

<sup>M</sup>	<sup>M</sup>	/	<sup>D</sup>	<sup>D</sup>	/	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>
1	1		1	6		2	0	1	0

Amount of Each Disbursement this Period

466.61
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SUBTOTAL of Disbursements This Page (optional) ..... ►

466.61
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TOTAL This Period (last page this line number only) ..... ►

1095.16
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Dominion Leadership Trust

A.	Full Name (Last, First, Middle Initial) Fimian for Congress 2010	Transaction ID: SB23.004 Date of Disbursement
	Mailing Address PO Box 3131	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="26"/> <input type="text" value="6"/> / <input type="text" value="20"/> <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/>
	City Oakton State VA Zip Code 22124	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2600.00"/>
	Candidate Name Keith Fimian	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Morgan Griffith for Congress	Transaction ID: SB23.003 Date of Disbursement
	Mailing Address PO Box 361	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="26"/> <input type="text" value="6"/> / <input type="text" value="20"/> <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/>
	City Christiansburg State VA Zip Code 24068	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2600.00"/>
	Candidate Name H Griffith	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 09	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Robert Hurt for Congress	Transaction ID: SB23.002 Date of Disbursement
	Mailing Address PO Box 2	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="26"/> <input type="text" value="6"/> / <input type="text" value="20"/> <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/>
	City Chatham State VA Zip Code 24531	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2600.00"/>
	Candidate Name Robert Hurt	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="7800.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 23

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

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NAME OF COMMITTEE (In Full)  
Dominion Leadership Trust

A.	Full Name (Last, First, Middle Initial) Scott Rigell for Congress		Transaction ID: SB23.001	
	Mailing Address 913 First Colonial Rd Ste 200		Date of Disbursement 10 / 26 / 2010	
	City Virginia Beach	State VA	Zip Code 23454	Amount of Each Disbursement this Period 2600.00
	Purpose of Disbursement Contribution		Category/ Type	
	Candidate Name Mr Scott Rigell			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: VA	District: 02		

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

2600.00

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

10400.00

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" 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)  
Dominion Leadership Trust

A.

Full Name (Last, First, Middle Initial)  
The Printing Express

Mailing Address PO Box 1975

City Harrisonburg State VA Zip Code 22801

Purpose of Disbursement  
Printing and Postage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21.001

Date of Disbursement

10 / 19 / 2010

Amount of Each Disbursement this Period

11168.41

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

11168.41

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

11168.41

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 23 / 23	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Dominion Leadership Trust

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Printing Express			Nature of Debt (Purpose): Fundraising Printing & Po- stage
Mailing Address PO Box 1975			
City Harrisonburg	State VA	ZIP Code 22801	

Outstanding Balance Beginning This Period		<b>Transaction ID: SD.001</b>	
11168.41			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	11168.41	0.00	

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