

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

BLACK REPUBLICAN PAC

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2014"/> | | 12945.93 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 1482.19 | |
| (c) Total Receipts (from Line 19) | 2887.00 | 298808.58 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 4369.19 | 311754.51 |
| 7. Total Disbursements (from Line 31)..... | 1494.91 | 308880.23 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 2874.28 | 2874.28 |
| 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) | 125343.01 | |

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: / / To: / /

| 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)..... | 760.00 | 60007.60 |
| (ii) Unitemized | 2127.00 | 235474.98 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 2887.00 | 295482.58 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 2887.00 | 295482.58 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 3326.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 2887.00 | 298808.58 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 2887.00 | 298808.58 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 1494.91 | 284880.23 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 1494.91 | 284880.23 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 18000.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements | 0.00 | 6000.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 1494.91 | 308880.23 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 1494.91 | 308880.23 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 2887.00 | 295482.58 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 2887.00 | 295482.58 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶ | 1494.91 | 284880.23 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 3326.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶ | 1494.91 | 281554.23 |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 6 OF 14 |
| <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. MR CECIL CASTLEMAN 796
 Full Name (Last, First, Middle Initial)
 Mailing Address 13063 RAINEY RIDGE LN
 City ABILENE State TX Zip Code 79602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RANGER PLANT CONSTRUCTIONAL CO Occupation FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2014
Transaction ID : SA11AI.15502
 Amount of Each Receipt this Period
 100.00

B. MR KARL FAIRCHILD 913
 Full Name (Last, First, Middle Initial)
 Mailing Address 9207 GEYSER AVE
 City NORTHRIDGE State CA Zip Code 91324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2014
Transaction ID : SA11AI.15510
 Amount of Each Receipt this Period
 35.00

C. RICHARD GLIELMI 109
 Full Name (Last, First, Middle Initial)
 Mailing Address 2108 FRED ILL JR CT
 City PEARL RIVER State NY Zip Code 10965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : SA11AI.15512
 Amount of Each Receipt this Period
 25.00

| | |
|--|--------|
| 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 7 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

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

Mailing Address 2506 BONICORD RD

City State Zip Code
DYERSBURG TN 38024

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2014
Transaction ID : SA11AI.15523

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. MRS LIESELOTTE H LOCATELLI 598

Mailing Address 165 MOUNTAIN GOAT RD

City State Zip Code
HAMILTON MT 59840

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

Name of Employer Occupation
BRP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2014
Transaction ID : SA11AI.15537

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. MR ROBERT S TROTH 341

Mailing Address 3003 GULF SHORE BLVD N APT 301

City State Zip Code
NAPLES FL 34103

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014
Transaction ID : SA11AI.15579

Amount of Each Receipt this Period
500.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 600.00 |
| TOTAL This Period (last page this line number only).....▶ | 760.00 |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. CAPITOL CAGING CORP

Mailing Address 504 SHAW RD

City State Zip Code
STERLING VA 20166

Purpose of Disbursement
CAGING SERVICES

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2014

Transaction ID : **SB21B.15594**

Amount of Each Disbursement this Period

89.92

Full Name (Last, First, Middle Initial)

B. CENTURY DATA MAILING SERVICES

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City State Zip Code
WASHINGTON DC 20005

Purpose of Disbursement
DIRECT MAIL - POSTAGE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 06 / 2014

Transaction ID : **SB21B.15597**

Amount of Each Disbursement this Period

73.71

Full Name (Last, First, Middle Initial)

C. EDWARD J COUSAR

Mailing Address 206 OLD FRIENDSHIP RD

City State Zip Code
CATAWBA SC 29704

Purpose of Disbursement
CONSULTING - PAC MANAGEMENT

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2014

Transaction ID : **SB21B.15595**

Amount of Each Disbursement this Period

1000.00

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

1163.63

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2014

Transaction ID : **SB21B.15591**

Amount of Each Disbursement this Period

16.01

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
CUSTOM CREDIT BILLING

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 05 / 2014

Transaction ID : **SB21B.15592**

Amount of Each Disbursement this Period

26.25

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
MERCHANT SERVICE CHARGE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 07 / 2014

Transaction ID : **SB21B.15593**

Amount of Each Disbursement this Period

73.30

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

115.56

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. SIMPKINS ESCROW LLC

Mailing Address 29243 ST JUST DR

City UNIONVILLE State VA Zip Code 22567

Purpose of Disbursement
ESCROW SERVICES

| |
|-------------------|
| 001 |
| Category/ Type |

Candidate Name
BLACK REPUBLICAN PAC

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

Date of Disbursement
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2014

Transaction ID : SB21B.15596

Amount of Each Disbursement this Period
 215.72

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

| |
|-------------------|
| |
| Category/ Type |

Candidate Name

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

Date of Disbursement
 M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

| |
|-------------------|
| |
| Category/ Type |

Candidate Name

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

Date of Disbursement
 M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

| |
|---------|
| 215.72 |
| 1494.91 |

SCHEDULE C (FEC Form 3X)

LOANS

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

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

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

TERMS

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

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

Interest Rate: % (apr)

Secured: Yes No

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

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

| | |
|---|-------------------------------------|
| SUBTOTALS This Period This Page (optional).....▶ | <input type="text" value="350.00"/> |
| TOTALS This Period (last page in this line only).....▶ | <input type="text"/> |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary. | |

SCHEDULE C (FEC Form 3X)

LOANS

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

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

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

TERMS

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

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

Interest Rate: % (apr)

Secured: Yes No

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

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

| | |
|---|-------------------------------------|
| SUBTOTALS This Period This Page (optional).....▶ | <input type="text" value="40.03"/> |
| TOTALS This Period (last page in this line only).....▶ | <input type="text" value="390.03"/> |

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 13 OF 14 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

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

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

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

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

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

| | | |
|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="35642.31"/> | Transaction ID : SD10.4122 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="35642.31"/> |

| | |
|--|---------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... ▶ | <input type="text" value="11218.01"/> |
| 2) TOTALS This Period (last page this line number only)..... ▶ | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶ | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | <input type="text"/> |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 14 OF 14 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

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

| | | |
|---|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="3476.20"/> | Transaction ID : SD10.4123 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="3476.20"/> |

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

| | | |
|---|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="6258.77"/> | Transaction ID : SD10.4124 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="6258.77"/> |

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

| | | |
|---|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="4000.00"/> | Transaction ID : SD10.4125 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="4000.00"/> |

| | |
|--|--|
| 1) SUBTOTALS This Period This Page (optional)..... ▶ | <input type="text" value="13734.97"/> |
| 2) TOTALS This Period (last page this line number only)..... ▶ | <input type="text" value="124952.98"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶ | <input type="text" value="390.03"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | <input type="text" value="125343.01"/> |