

# 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

Brave New PAC

ADDRESS (number and street) 777 S. Figueroa Street, Suite 4050

Check if different than previously reported. (ACC)

Los Angeles CA 90017

2. **FEC IDENTIFICATION NUMBER** C00446005

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:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(d) 30-Day **Post -Election** Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2008 through 09 30 2008

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 Devin Smith

Signature of Treasurer Electronically Filed by Devin Smith Date 04 15 2009

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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Brave New PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" 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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	0	8									
0.00												
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%;"><tr><td align="right">4762.11</td></tr></table>	4762.11										
4762.11												
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%;"><tr><td align="right">85670.00</td></tr></table>	85670.00	<table border="1" style="width: 100%;"><tr><td align="right">90757.44</td></tr></table>	90757.44								
85670.00												
90757.44												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%;"><tr><td align="right">90432.11</td></tr></table>	90432.11	<table border="1" style="width: 100%;"><tr><td align="right">90757.44</td></tr></table>	90757.44								
90432.11												
90757.44												
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%;"><tr><td align="right">31260.92</td></tr></table>	31260.92	<table border="1" style="width: 100%;"><tr><td align="right">31586.25</td></tr></table>	31586.25								
31260.92												
31586.25												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%;"><tr><td align="right">59171.19</td></tr></table>	59171.19	<table border="1" style="width: 100%;"><tr><td align="right">59171.19</td></tr></table>	59171.19								
59171.19												
59171.19												
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">3087.03</td></tr></table>	3087.03										
3087.03												

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  
Brave New PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	58500.00	59750.00
(i) Itemized (use Schedule A) .....	27170.00	31007.44
(ii) Unitemized .....	85670.00	90757.44
(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	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	85670.00	90757.44
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)) .....	85670.00	90757.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	85670.00	90757.44

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	6129.92	6455.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	6129.92	6455.25
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) .....	25131.00	25131.00
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))..	31260.92	31586.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31260.92	31586.25

**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) .....	85670.00	90757.44
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	85670.00	90757.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6129.92	6455.25
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6129.92	6455.25

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 31  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Brave New PAC

**A.**

Full Name (Last, First, Middle Initial)  
Jessica Bauman

Mailing Address 480 14th St.

City State Zip Code  
Brooklyn NY 11215

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

Name of Employer Self-Employed  
Occupation Theatre Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 13 / 2008

**Transaction ID: C411**

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
John Cunningham

Mailing Address 11313 SW 109 Road, Apt . D

City State Zip Code  
Miami FL 33176

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2008

**Transaction ID: C546**

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
Laurie David

Mailing Address 11812 San Vicente Blvd., 4th Fl.

City State Zip Code  
Los Angeles CA 90049

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

Name of Employer Self-Employed  
Occupation Producer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
08 / 07 / 2008

**Transaction ID: C99**

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3300.00**

**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 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Brave New PAC

**A.** Full Name (Last, First, Middle Initial)  
Alex Flanagan  
Mailing Address 15010 York Rd.  
City Sparks State MD Zip Code 21152  
FEC ID number of contributing federal political committee. **C**

Date of Receipt MM / DD / YYYY  
09 / 12 / 2008  
**Transaction ID: C351**  
Amount of Each Receipt this Period 1000.00

Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Stephanie Fleck  
Mailing Address 39 White Oak Road  
City Waban State MA Zip Code 02468  
FEC ID number of contributing federal political committee. **C**

Date of Receipt MM / DD / YYYY  
09 / 27 / 2008  
**Transaction ID: C638**  
Amount of Each Receipt this Period 500.00

Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

**C.** Full Name (Last, First, Middle Initial)  
Sara Foszcz  
Mailing Address 7301 W. Burgett Rd.  
City Richmond State IL Zip Code 60071  
FEC ID number of contributing federal political committee. **C**

Date of Receipt MM / DD / YYYY  
09 / 11 / 2008  
**Transaction ID: C174**  
Amount of Each Receipt this Period 500.00

Name of Employer Not-Employed Occupation Not-Employed  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

**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 8 / 31

(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)  
Brave New PAC

**A.** Full Name (Last, First, Middle Initial)  
Maureen Gallagher

Mailing Address 6513 Basswood Drive

City State Zip Code  
Troy MI 48098

FEC ID number of contributing federal political committee. C

Name of Employer: Neace Lukens Occupation: Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 11 / 2008

Transaction ID: C234

Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
Debrin Goubert

Mailing Address 306 Quaker Road

City State Zip Code  
Sewickley PA 15143

FEC ID number of contributing federal political committee. C

Name of Employer: Self-Employed Occupation: Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 14 / 2008

Transaction ID: C434

Amount of Each Receipt this Period: 300.00

**C.** Full Name (Last, First, Middle Initial)  
Michael Hunter

Mailing Address 3555 Timmons Lane, #800

City State Zip Code  
Houston TX 77027

FEC ID number of contributing federal political committee. C

Name of Employer: Self Employed Occupation: Acupuncturist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 09 / 05 / 2008

Transaction ID: C101

Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 5800.00

**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 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Brave New PAC

**A.** Full Name (Last, First, Middle Initial)  
Rachel Hunter

Mailing Address 3555 Timmons Lane, #800

City State Zip Code  
Houston TX 77027

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed      Occupation Not Employed

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt M M / D D / Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** C100

Amount of Each Receipt this Period 5000.00

**B.** Full Name (Last, First, Middle Initial)  
Malcolm Jenkins

Mailing Address 1105 River Street East

City State Zip Code  
Prince Albert SK S6V0B

FEC ID number of contributing federal political committee. C

Name of Employer Malcom & Melba Jenkins      Occupation Entrepreneur

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y  
09 / 26 / 2008

**Transaction ID:** C612

Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Nick Kazan

Mailing Address 3014 Third St.

City State Zip Code  
Santa Monica CA 90405

FEC ID number of contributing federal political committee. C

Name of Employer Kazanjoglous Corp.      Occupation Writer

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y  
09 / 14 / 2008

**Transaction ID:** C458

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 6500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 31  
(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)  
Brave New PAC

**A.**

Full Name (Last, First, Middle Initial) Peter Kosa		Date of Receipt <table border="1" style="font-size: small;"> <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>0</td><td>9</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	4		2	0	0	8													
Mailing Address 488 Spruce St		<b>Transaction ID:</b> C444																				
City Berkeley	State CA	Zip Code 94708																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>1000.00</td></tr> </table>	1000.00																			
1000.00																						
Name of Employer Bayer Health Care	Occupation Business Development																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>1000.00</td></tr> </table>		1000.00																			
1000.00																						

**B.**

Full Name (Last, First, Middle Initial) Joann Loehr		Date of Receipt <table border="1" style="font-size: small;"> <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>0</td><td>9</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	6		2	0	0	8													
Mailing Address 1751 Tyler St.		<b>Transaction ID:</b> C632																				
City Port Townsend	State WA	Zip Code 98368																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>300.00</td></tr> </table>	300.00																			
300.00																						
Name of Employer Not-Employed	Occupation Not-Employed																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>300.00</td></tr> </table>		300.00																			
300.00																						

**C.**

Full Name (Last, First, Middle Initial) Frances Miller		Date of Receipt <table border="1" style="font-size: small;"> <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>0</td><td>9</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	7		2	0	0	8													
Mailing Address 221 Birch Run Road		<b>Transaction ID:</b> C126																				
City Chestertown	State MD	Zip Code 21620																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>200.00</td></tr> </table>	200.00																			
200.00																						
Name of Employer Self Employed	Occupation Writer																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>300.00</td></tr> </table>		300.00																			
300.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1" style="width: 100%;"> <tr><td>1500.00</td></tr> </table>	1500.00
1500.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td></tr> </table>	

# 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 / 31
	<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)  
Brave New PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) David Mills		Date of Receipt
	Mailing Address 1230 Richard Pl		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 15 / 2008
	City	State	Zip Code
	Glendale	CA	91206
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C507
Name of Employer Self-Employed		Occupation Screen Writer	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"/> 250.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Josie Newhouse		Date of Receipt
	Mailing Address 7670 Jasmine Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 13 / 2008
	City	State	Zip Code
	West Palm Beach	FL	33412
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C415
Name of Employer Information Requested		Occupation Information Requested	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"/> 1000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Linda Pritzker		Date of Receipt
	Mailing Address 3155 Timmons Lane, #800		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 05 / 2008
	City	State	Zip Code
	Houston	TX	77027
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C102
Name of Employer Self-Employed		Occupation Psychotherapist	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"/> 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 6250.00
<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 12 / 31  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

NAME OF COMMITTEE (In Full)  
Brave New PAC

**A.**

Full Name (Last, First, Middle Initial)  
Roland Pritzker

Mailing Address 3155 Timmons Lane, #800

City State Zip Code  
Houston TX 77027

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

Name of Employer Self Employed Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID: C104**

Amount of Each Receipt this Period  
5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Rose Pritzker

Mailing Address 3155 Timmons Lane, #800

City State Zip Code  
Houston TX 77027

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

Name of Employer Self Employed Occupation Photographer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID: C103**

Amount of Each Receipt this Period  
5000.00

**C.**

Full Name (Last, First, Middle Initial)  
John Quigley

Mailing Address 22 Chambers Street

City State Zip Code  
Princeton NJ 08542

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

Name of Employer Kewco, LLC Occupation Investments

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2008

**Transaction ID: C603**

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10400.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 31  
(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)  
Brave New PAC

**A.**

Full Name (Last, First, Middle Initial)  
Sandra Radoff

Mailing Address 4481 Douglas Avenue

City State Zip Code  
Bronx NY 10471

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation  
Marketing Research

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y  
09 / 15 / 2008

**Transaction ID:** C499

Amount of Each Receipt this Period 500.00

**B.**

Full Name (Last, First, Middle Initial)  
Scott Renschler

Mailing Address 2318 N. 52nd St.

City State Zip Code  
Seattle WA 98103

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation  
Psychologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y  
09 / 14 / 2008

**Transaction ID:** C459

Amount of Each Receipt this Period 500.00

**C.**

Full Name (Last, First, Middle Initial)  
Francene Rodgers

Mailing Address 100 Belvidere St.

City State Zip Code  
Boston MA 2199

FEC ID number of contributing federal political committee. C

Name of Employer Work Family Directions Occupation  
Chairwoman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt M M / D D / Y Y Y Y  
09 / 08 / 2008

**Transaction ID:** C162

Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 6000.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Brave New PAC

**A.** Full Name (Last, First, Middle Initial)  
Felicia Rosenfeld  
 Mailing Address 175 N. Tigertail Road  
 City State Zip Code  
 Los Angeles CA 90049  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 13 / 2008  
**Transaction ID: C406**  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self-Employed Consultant  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

**B.** Full Name (Last, First, Middle Initial)  
Thomas Rowe  
 Mailing Address 3944 NE Alameda St.  
 City State Zip Code  
 Portland OR 97212  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2008  
**Transaction ID: C477**  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

**C.** Full Name (Last, First, Middle Initial)  
Vincent J. Ryan  
 Mailing Address 745 Atlantic Ave., 11th Floor  
 City State Zip Code  
 Boston MA 02111  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2008  
**Transaction ID: C117**  
 Amount of Each Receipt this Period  
 5000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Schoorer Capital Corp Chairman  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6000.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 31  
(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)  
Brave New PAC

**A.**

Full Name (Last, First, Middle Initial)  
Judith Sapp

Mailing Address 111 West Street

City Portland State ME Zip Code 4102

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

Name of Employer Komondorok LLC Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 07 / 2008  
**Transaction ID: C156**  
 Amount of Each Receipt this Period: 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Natalie Schmitt

Mailing Address 1274 Lexington

City Chicago State IL Zip Code 60607

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 11 / 2008  
**Transaction ID: C318**  
 Amount of Each Receipt this Period: 250.00

**C.**

Full Name (Last, First, Middle Initial)  
Marlene Share

Mailing Address 14630 Dickens St., Unit 310

City Sherman Oaks State CA Zip Code 91403

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

Name of Employer UBS Financial Services Inc. Occupation Vice President - Investments

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 06 / 2008  
**Transaction ID: C112**  
 Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

**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 16 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Brave New PAC

**A.** Full Name (Last, First, Middle Initial)  
Stephen M. Silberstein

Mailing Address 29 Eucalyptus Rd.

City State Zip Code  
Belvedere CA 94920-2435

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2008

**Transaction ID: C120**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Sheila Smith

Mailing Address 2800 North Lake Shore Drive, #4107

City State Zip Code  
Chicago IL 60657

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

Name of Employer Occupation  
Consult Ltd. Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
09 / 11 / 2008

**Transaction ID: C190**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Karl Wright

Mailing Address 2 Woodbridge Court

City State Zip Code  
Rocky Point NY 11778

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

Name of Employer Occupation  
Kaplan Test Preparation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2008

**Transaction ID: C686**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6250.00**

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



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

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

FOR LINE NUMBER: PAGE 17 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Brave New PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael Yannell

Mailing Address 2911 N. Racine Ave.

City State Zip Code  
Chicago IL 60657

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

Name of Employer Occupation  
RUSH University Medical Center Pharmacist

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 12 / 2008

**Transaction ID:** C123

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Peg Yorkin

Mailing Address 433 S. Beverly Dr.

City State Zip Code  
Beverly Hills CA 90212

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

Name of Employer Occupation  
Self Employed Philanthropist

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2008

**Transaction ID:** C121

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Richard Zitrin

Mailing Address 333 Green Street

City State Zip Code  
San Francisco CA 94133

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

Name of Employer Occupation  
Zitrin & Frassetto LLP Lawyer

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2008

**Transaction ID:** C700

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 18 / 31	
	(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)  
Brave New PAC

**A.**

Full Name (Last, First, Middle Initial) James Zuehl		Date of Receipt																					
Mailing Address 2106 Elmwood Avenue		<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>0</td><td>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	8														
City	State	Zip Code	<b>Transaction ID: C468</b>																				
Wilmette	IL	60091	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.	C		500.00																				
Name of Employer Franczek-Sullivan	Occupation Attorney																						
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) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	58500.00

**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)  
Brave New PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Bankcard USA  Mailing Address 5701 Lindero Road, Bldg. #3  City Westlake Village State CA Zip Code 91362 Purpose of Disbursement Bank Charges Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D24 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 8  Amount of Each Disbursement this Period 35.00  001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Bankcard USA  Mailing Address 5701 Lindero Road, Bldg. #3  City Westlake Village State CA Zip Code 91362 Purpose of Disbursement Bank Charges Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D25 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 8  Amount of Each Disbursement this Period 35.00  001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Bankcard USA  Mailing Address 5701 Lindero Road, Bldg. #3  City Westlake Village State CA Zip Code 91362 Purpose of Disbursement Bank Charges Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D30 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 0 8  Amount of Each Disbursement this Period 2.80  001 Category/ Type

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

72.80

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

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
Brave New PAC

A.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D23 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="1.87"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D27 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="0.58"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D28 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="0.47"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2.92"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Brave New PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D26 <b>Date of Disbursement</b></p> <p><input type="text" value="09"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p><b>Amount of Each Disbursement this Period</b></p> <p><input type="text" value="37.73"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D19 <b>Date of Disbursement</b></p> <p><input type="text" value="09"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p><b>Amount of Each Disbursement this Period</b></p> <p><input type="text" value="24.47"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D21 <b>Date of Disbursement</b></p> <p><input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p><b>Amount of Each Disbursement this Period</b></p> <p><input type="text" value="0.70"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="62.90"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Brave New PAC

A.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D20 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="2.33"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D22 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="116.50"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D29 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="2.33"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="121.16"/>
<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 23 / 31

<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)  
Brave New PAC

A.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D39 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="09"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="125.58"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D38 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="09"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="29.71"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D40 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="09"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="120.70"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="275.99"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Brave New PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D45 <b>Date of Disbursement</b> 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 51.37</p> <p>001 Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D43 <b>Date of Disbursement</b> 09 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 84.11</p> <p>001 Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D44 <b>Date of Disbursement</b> 09 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 58.61</p> <p>001 Category/Type</p>

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

194.09

**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)  
Brave New PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D42 <b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p><b>Amount of Each Disbursement this Period</b></p> <p><input type="text" value="12.09"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D31 <b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p><b>Amount of Each Disbursement this Period</b></p> <p><input type="text" value="4.66"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D41 <b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p><b>Amount of Each Disbursement this Period</b></p> <p><input type="text" value="1.75"/></p>

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

**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)  
Brave New PAC

A.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D36 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="9.32"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D35 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="18.87"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D33 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="16.55"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**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)  
Brave New PAC

A.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D34 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="84.70"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D37 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="7.38"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D32 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="13.84"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="105.92"/>
<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 28 / 31

<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)  
Brave New PAC

A.

Full Name (Last, First, Middle Initial)  
Buying Time, LLC

Transaction ID: D46

Date of Disbursement

Mailing Address 2715 M St. NW, Ste. 400

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	8

City Washington State DC Zip Code 20007

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Media Buy

--

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

5000.00
---------

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

5899.02
---------

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 29 / 31
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Brave New PAC

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group	Nature of Debt (Purpose): Legal & Treasury Expense
Mailing Address 777 S. Figueroa St. Ste. 4050	
City State ZIP Code Los Angeles CA 90017	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: D98</b>	
Amount Incurred This Period 87.03	Payment This Period 0.00	Outstanding Balance at Close of This Period 87.03

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group	Nature of Debt (Purpose): Legal & Treasury Fees
Mailing Address 777 S. Figueroa St. Ste. 4050	
City State ZIP Code Los Angeles CA 90017	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: D97</b>	
Amount Incurred This Period 3000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3000.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	3087.03
2) <b>TOTALS</b> This Period (last page this line number only).....	3087.03
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)	3087.03

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

NAME OF COMMITTEE (In Full) Brave New PAC		FEC IDENTIFICATION NUMBER <b>C</b> C00446005	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		Date M M / D D / Y Y Y Y 09 / 14 / 2008	
Full Name (Last, First, Middle, Initial) of Payee Buying Time, LLC		Amount 25131.00	
Mailing Address 2715 M St. NW, Ste. 400 Washington, DC 20007		Transaction ID: D47	
City Washington	State DC	Zip Code 20007	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential
Purpose of Expenditure Radio/Television Media		Category/ Type	004
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
		25131.00	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	25131.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	25131.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Devin Smith Signature	Date M M / D D / Y Y Y Y 10 / 15 / 2008

Form/Schedule: **F3XA**

Transaction ID:

Brave New PAC has been a volunteer organization that has no paid employees, no offices and is not connected to any organization. The Committee has retained legal counsel to provide compliance services and administer the Committee. These are the only regularly occurring administrative expenses incurred by the Committee. Periodic expenditures incurred by the Committee have been disclosed on Schedule B Line 21 (b) or Schedule D of the Committee's reports