

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
BLACK REPUBLICAN PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	0	7									
0.00												
0.00												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
0.00												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td>80926.02</td></tr></table>	80926.02	<table border="1" style="width: 100%;"><tr><td>80926.02</td></tr></table>	80926.02								
80926.02												
80926.02												
(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>80926.02</td></tr></table>	80926.02	<table border="1" style="width: 100%;"><tr><td>80926.02</td></tr></table>	80926.02								
80926.02												
80926.02												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td>71983.03</td></tr></table>	71983.03	<table border="1" style="width: 100%;"><tr><td>71983.03</td></tr></table>	71983.03								
71983.03												
71983.03												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td>8942.99</td></tr></table>	8942.99	<table border="1" style="width: 100%;"><tr><td>8942.99</td></tr></table>	8942.99								
8942.99												
8942.99												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td>49093.62</td></tr></table>	49093.62										
49093.62												

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
BLACK REPUBLICAN PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	12750.00	12750.00
(i) Itemized (use Schedule A)	68176.02	68176.02
(ii) Unitemized	80926.02	80926.02
(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)	80926.02	80926.02
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))	80926.02	80926.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	80926.02	80926.02

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	68983.03	68983.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	68983.03	68983.03
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	2000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	1000.00	1000.00
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))..	71983.03	71983.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	71983.03	71983.03

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	80926.02	80926.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	80926.02	80926.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	68983.03	68983.03
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	68983.03	68983.03

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 30
(check only one)

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

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

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
MR OLIVER W BIVINS 791

Mailing Address 2028 S AUSTIN ST

City State Zip Code
AMARILLO TX 79109

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 ▼
500.00

Date of Receipt
MM / DD / YYYY
11 / 14 / 2007

Transaction ID: SA11AI.4489

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
MRS ELLOINE M CLARK 752

Mailing Address 3716 MAPLEWOOD AVE

City State Zip Code
DALLAS TX 75205

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

Name of Employer
NONE

Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
12 / 19 / 2007

Transaction ID: SA11AI.4931

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
MR WILLIAM CLARK 752, III

Mailing Address 3838 OAK LAWN AVE STE 911

City State Zip Code
DALLAS TX 75219

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

Name of Employer
RETIRED

Occupation
ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
11 / 14 / 2007

Transaction ID: SA11AI.4933

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
MISS RHODA COBB 334

Mailing Address **336 E COCONUT PALM RD**

City **BOCA RATON** State **FL** Zip Code **33432**

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 ▼ **250.00**

Date of Receipt **11 / 23 / 2007**

Transaction ID: SA11AI.4968

Amount of Each Receipt this Period **250.00**

B. Full Name (Last, First, Middle Initial)
MR MICHAEL G DAMONE 483

Mailing Address **3418 BLOSSOM LN**

City **BLOOMFIELD HILLS** State **MI** Zip Code **48302**

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

Name of Employer **THE DAMONE GROUP** Occupation **OWNER**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **11 / 23 / 2007**

Transaction ID: SA11AI.5162

Amount of Each Receipt this Period **250.00**

C. Full Name (Last, First, Middle Initial)
MR BREWSTER DURKEE 322

Mailing Address **5027 RIVER POINT RD**

City **JACKSONVILLE** State **FL** Zip Code **32207**

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 ▼ **250.00**

Date of Receipt **12 / 20 / 2007**

Transaction ID: SA11AI.5335

Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional) ► **550.00**

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 / 30
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
MR EDGAR M FITZSIMONS 110

Mailing Address 67 COLONIAL PKWY

City State Zip Code
MANHASSET NY 11030

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.5723

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
LTC JAMES W GALLE 662

Mailing Address 7933 CHADWICK ST

City State Zip Code
PRAIRIE VILLAGE KS 66208

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

Name of Employer Occupation
US MILITARY RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

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

Transaction ID: SA11AI.5854

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
MR LEO J HAWK 458

Mailing Address 2636 SHORELINE DR

City State Zip Code
LIMA OH 45805

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

Name of Employer Occupation
AMERICAN TRIM LLC CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.6243

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
MRS JANE F HIPP 296

Mailing Address 102 E ROUND HILL RD

City State Zip Code
GREENVILLE SC 29617

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

Name of Employer NONE Occupation **HOMEMAKER**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **10 / 30 / 2007**

Transaction ID: SA11AI.6374

Amount of Each Receipt this Period **1000.00**

B. Full Name (Last, First, Middle Initial)
MR ROBERT HROMADNIK 660

Mailing Address PO BOX 562

City State Zip Code
OSAWATOMIE KS 66064

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **11 / 28 / 2007**

Transaction ID: SA11AI.6459

Amount of Each Receipt this Period **250.00**

C. Full Name (Last, First, Middle Initial)
MISS LINDA KENDALL 330

Mailing Address 50 CLUB HOUSE RD

City State Zip Code
KEY LARGO FL 33037

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 ▼ **250.00**

Date of Receipt **11 / 28 / 2007**

Transaction ID: SA11AI.5418

Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional) **1500.00**

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 / 30

(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
MRS LINDA G KENDALL 941

Mailing Address 2151 LAGUNA ST

City	State	Zip Code
SAN FRANCISCO	CA	94115

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.5420

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
MR J SMITH LANIER 368

Mailing Address 2024 18TH ST NW

City	State	Zip Code
LANETT	AL	36863

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.6747

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
MR RICHARD MARTELL 333

Mailing Address 1700 W LAS OLAS BLVD

City	State	Zip Code
FORT LAUDERDALE	FL	33312

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

Name of Employer	Occupation
------------------	------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.7002

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

750.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
MR JOSEPH MOORE 017
Mailing Address 43 NORTH RD
City BEDFORD State MA Zip Code 01730
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 12 / 03 / 2007
Transaction ID: SA11AI.7298
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
MR JOEL W NEWBY 770, JR
Mailing Address 7802 WICKERSHAM LN
City HOUSTON State TX Zip Code 77063
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 ▼ 250.00
Date of Receipt 11 / 09 / 2007
Transaction ID: SA11AI.7453
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
MR KINGMAN W PAGE 147
Mailing Address 1974 WINDFALL RD
City OLEAN State NY Zip Code 14760
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 ▼ 500.00
Date of Receipt 11 / 01 / 2007
Transaction ID: SA11AI.7588
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 12 / 30
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
MR KINGMAN W PAGE 147

Mailing Address 1974 WINDFALL RD

City State Zip Code
OLEAN NY 14760

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 ▼ **650.00**

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 27 / 2007

Transaction ID: SA11AI.7589

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)
MR WILLIAM D RANKIN 152

Mailing Address 220 N DITHRIDGE ST APT 1000

City State Zip Code
PITTSBURGH PA 15213

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 ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 02 / 2007

Transaction ID: SA11AI.7874

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
MR WILLIAM D RANKIN 152

Mailing Address 220 N DITHRIDGE ST APT 1000

City State Zip Code
PITTSBURGH PA 15213

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 ▼ **500.00**

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 28 / 2007

Transaction ID: SA11AI.7873

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **650.00**

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 / 30
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
MRS TED RAZOOK 928

Mailing Address 5150D E COPA DE ORO DR

City ANAHEIM State CA Zip Code 92807

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

Name of Employer SELF EMPLOYED Occupation PROPERTY MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 10 / 2007
Transaction ID: SA11AI.7888
 Amount of Each Receipt this Period: 1000.00

B.

Full Name (Last, First, Middle Initial)
MR RICHARD K RONZETTI 115

Mailing Address 164 HAMPTON RD

City GARDEN CITY State NY Zip Code 11530

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

Name of Employer MARATHON ASSET MANAGEMENT Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 23 / 2007
Transaction ID: SA11AI.8043
 Amount of Each Receipt this Period: 500.00

C.

Full Name (Last, First, Middle Initial)
MR JOHN W SAMPSON 339

Mailing Address 9614 PARKWOOD CT

City FORT MYERS State FL Zip Code 33908

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 ▼ 250.00

Date of Receipt: 10 / 30 / 2007
Transaction ID: SA11AI.8136
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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 / 30
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
MRS CHRISTINA SASSI 068

Mailing Address 312 ELM ST APT 2

City State Zip Code
NEW CANAAN CT 06840

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

Name of Employer NONE Occupation **HOMEMAKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

Transaction ID: SA11AI.8165

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
MR JOHN SLANGA 194

Mailing Address 684 RIDGE RD

City State Zip Code
SPRING CITY PA 19475

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 ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

Transaction ID: SA11AI.8387

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
MR JOHN SLANGA 194

Mailing Address 684 RIDGE RD

City State Zip Code
SPRING CITY PA 19475

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	0	7

Transaction ID: SA11AI.8386

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **600.00**

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 / 30
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
MR ROBERT F SPROWLS 920

Mailing Address 6929 SANDPIPER PL

City State Zip Code
CARLSBAD CA 92009

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.8497

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
MR ROY J STARRAK 768

Mailing Address 7133 US HIGHWAY 84

City State Zip Code
COLEMAN TX 76834

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.8521

Amount of Each Receipt this Period
400.00

C.

Full Name (Last, First, Middle Initial)
MR ROY J STARRAK 768

Mailing Address 7133 US HIGHWAY 84

City State Zip Code
COLEMAN TX 76834

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.8522

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **600.00**

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 / 30
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
MR WILLIAM STEELE 270

Mailing Address 336 HOLLYBROOK DR

City State Zip Code
ADVANCE NC 27006

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 ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.8524

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
MR CAMPBELL STEWARD 019

Mailing Address 65 ASBURY ST

City State Zip Code
TOPSFIELD MA 01983

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

Name of Employer KONA CORP Occupation TREASURER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.8544

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
MR J JOSEPH TAYLOR 741

Mailing Address 6800 S GRANITE AVE APT 245

City State Zip Code
TULSA OK 74136

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 ▼
500.00

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

Transaction ID: SA11AI.8663

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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 / 30
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial) MISS JOSEPHINE E WOOD 245		Date of Receipt MM / DD / YYYY 11 / 23 / 2007
Mailing Address 1400 ENTERPRISE DR #330N # 330		Transaction ID: SA11AI.9127
City LYNCHBURG	State VA	Zip Code 24502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.

Full Name (Last, First, Middle Initial) MR FREDERICK J WUENSCHER 149		Date of Receipt MM / DD / YYYY 11 / 14 / 2007
Mailing Address 876 UPLAND DR		Transaction ID: SA11AI.9151
City ELMIRA	State NY	Zip Code 14905
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF EMPLOYED	Occupation MANAGEMENT CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) MR GEORGE W YOUNG 012		Date of Receipt MM / DD / YYYY 11 / 23 / 2007
Mailing Address 235 WALKER ST APT 252		Transaction ID: SA11AI.9170
City LENOX	State MA	Zip Code 01240
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	12750.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
ACCESS NATIONAL BANK

Transaction ID: SB21B.4149
Date of Disbursement

Mailing Address 1800 ROBERT FULTON DR

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	7

City RESTON State VA Zip Code 22190

Amount of Each Disbursement this Period

194.20

Purpose of Disbursement
SERVICE CHARGE

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
BMW DIRECT INC

Transaction ID: SB21B.4123
Date of Disbursement

Mailing Address 1155 - 15TH STREET NW
SUITE 410

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	0	7

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

7539.57

Purpose of Disbursement
DIRECT MAIL FUNDRAISING FOR BRPAC

003

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
BMW DIRECT INC

Transaction ID: SB21B.4124
Date of Disbursement

Mailing Address 1155 - 15TH STREET NW
SUITE 410

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	0	7

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

5693.34

Purpose of Disbursement
DIRECT MAIL FUNDRAISING FOR BRPAC

003

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

13427.11

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) CENTURY DATA SYSTEMS	Transaction ID: SB21B.4126 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="11"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DATA PROCESSING	<input type="text" value="1887.32"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE	Transaction ID: SB21B.4127 Date of Disbursement
	Mailing Address 504 SHAW ROAD SUITE 206	<input type="text" value="11"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City STERLING State VA Zip Code 20166	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR BRPAC	<input type="text" value="3415.70"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE	Transaction ID: SB21B.4128 Date of Disbursement
	Mailing Address 504 SHAW ROAD SUITE 206	<input type="text" value="12"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City STERLING State VA Zip Code 20166	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR BRPAC	<input type="text" value="3300.00"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="8603.02"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
CONSOLIDATED MAILING SERVICE

Mailing Address 504 SHAW ROAD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
DIRECT MAIL FUNDRAISING FOR BRPAC

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.4129
Date of Disbursement

12 / 19 / 2007

Amount of Each Disbursement this Period

3634.99

B. Full Name (Last, First, Middle Initial)
LEGACY LISTS INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
FUNDRAISING LIST RENTALS FOR BRPAC

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.4130
Date of Disbursement

11 / 21 / 2007

Amount of Each Disbursement this Period

1045.00

C. Full Name (Last, First, Middle Initial)
LEGACY LISTS INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
FUNDRAISING LIST RENTALS FOR BRPAC

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.4131
Date of Disbursement

11 / 28 / 2007

Amount of Each Disbursement this Period

4235.00

SUBTOTAL of Disbursements This Page (optional) ▶

8914.99

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

A.	Full Name (Last, First, Middle Initial) PATRIOT PARTNERS INC	Transaction ID: SB21B.4132 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="11"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR BRPAC	<input type="text" value="15293.41"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PATRIOT PARTNERS INC	Transaction ID: SB21B.4133 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="11"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR BRPAC	<input type="text" value="5325.77"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PATRIOT PARTNERS INC	Transaction ID: SB21B.4134 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="12"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR BRPAC	<input type="text" value="2900.00"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="23519.18"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) PATRIOT PARTNERS INC	Transaction ID: SB21B.4135 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	7		2	0	0	7												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR BRPAC	<table border="1"><tr><td>4900.00</td></tr></table>	4900.00																		
4900.00																					
	Candidate Name	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) PATRIOT PARTNERS INC	Transaction ID: SB21B.4136 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	9		2	0	0	7												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR BRPAC	<table border="1"><tr><td>7757.92</td></tr></table>	7757.92																		
7757.92																					
	Candidate Name	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) PATTON-KIEHL GROUP	Transaction ID: SB21B.4137 Date of Disbursement																			
	Mailing Address PO BOX 590	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	5		2	0	0	7												
	City THORNBURG State VA Zip Code 22565	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL FUNDRAISING FOR BRPAC	<table border="1"><tr><td>1223.63</td></tr></table>	1223.63																		
1223.63																					
	Candidate Name	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>13881.55</td></tr></table>	13881.55
13881.55		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 30

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

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

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
WASHINGTON INTELLIGENCE BUREAU

Transaction ID: SB21B.4138

Date of Disbursement

Mailing Address 4128 PEPSI PLACE

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
1	1		2	8		2	0	0	7

City State Zip Code
CHANTILLY VA 20151

Amount of Each Disbursement this Period

457.48

Purpose of Disbursement
MONEY PROCESSING & ESCROW SERVICES

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

457.48

TOTAL This Period (last page this line number only)

68803.33

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
HAYES FOR CONGRESS

Transaction ID: SB23.4144
Date of Disbursement

Mailing Address PO BOX 2000

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	0	7

City CONCORD State NC Zip Code 28026

Amount of Each Disbursement this Period

Purpose of Disbursement
FEDERAL CONTRIBUTION

011
Category/
Type

1000.00

Candidate Name
ROBERT C (ROBIN) HAYES

Office Sought: House
 Senate
 President
State: NC District: 08

Disbursement For: 2008
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
ROBERTS FOR CONGRESS

Transaction ID: SB23.4139
Date of Disbursement

Mailing Address PO BOX 437046

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	0	7

City LOUISVILLE State KY Zip Code 40253

Amount of Each Disbursement this Period

Purpose of Disbursement
FEDERAL CONTRIBUTION

011
Category/
Type

1000.00

Candidate Name
ERWIN ROBERTS

Office Sought: House
 Senate
 President
State: KY District: 03

Disbursement For: 2008
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

**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)

PAGE 25 / 30

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
CHERYL ALLEN FOR SUPERIOR COURT

Transaction ID: SB29.4147

Date of Disbursement

Mailing Address 5055 BUTTERMILK HOLLOW ROAD

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	2		2	0	0	7

City State Zip Code
WEST MIFFLIN PA 15122

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
NON-FEDERAL CONTRIBUTION

012
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

1000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BMW DIRECT INC			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING FOR BRPAC
Mailing Address 1155 - 15TH STREET NW SUITE 410			
City	State	ZIP Code	
WASHINGTON	DC	20005	

Outstanding Balance Beginning This Period		Transaction ID: SD10.4113	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
16744.79	13232.91	3511.88	

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

Outstanding Balance Beginning This Period		Transaction ID: SD10.4114	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
4247.74	1887.32	2360.42	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING FOR BRPAC
Mailing Address 2519 BRITTONS HILL RD			
City	State	ZIP Code	
RICHMOND	VA	23230	

Outstanding Balance Beginning This Period		Transaction ID: SD10.4115	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
9671.97	0.00	9671.97	

1) SUBTOTALS This Period This Page (optional).....	▶	15544.27
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

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

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.4116	
Amount Incurred This Period 11670.15	Payment This Period 10350.69	Outstanding Balance at Close of This Period 1319.46

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LEGACY LISTS INC	Nature of Debt (Purpose): FUNDRAISING LIST RENTALS FOR BRPAC
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City State ZIP Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.4117	
Amount Incurred This Period 17700.52	Payment This Period 5280.00	Outstanding Balance at Close of This Period 12420.52

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MACKENZIE & COMPANY	Nature of Debt (Purpose): CONSULTING - COMPLIANCE
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City State ZIP Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.4118	
Amount Incurred This Period 1250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1250.00

1) SUBTOTALS This Period This Page (optional).....	▶	14989.98
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor PATRIOT PARTNERS INC			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING FOR BRPAC
Mailing Address 1155 - 15TH STREET NW SUITE 410			
City	State	ZIP Code	
WASHINGTON	DC	20005	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.4119	
Amount Incurred This Period <input type="text" value="45888.92"/>	Payment This Period <input type="text" value="36177.10"/>	Outstanding Balance at Close of This Period <input type="text" value="9711.82"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PATTON-KIEHL GROUP			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING FOR BRPAC
Mailing Address PO BOX 590			
City	State	ZIP Code	
THORNBURG	VA	22565	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.4120	
Amount Incurred This Period <input type="text" value="4322.18"/>	Payment This Period <input type="text" value="1223.63"/>	Outstanding Balance at Close of This Period <input type="text" value="3098.55"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor WASHINGTON INTELLIGENCE BUREAU			Nature of Debt (Purpose): MONEY PROCESSING & ESCROW SERVICES
Mailing Address 4128 PEPSI PLACE			
City	State	ZIP Code	
CHANTILLY	VA	20151	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.4121	
Amount Incurred This Period <input type="text" value="1670.48"/>	Payment This Period <input type="text" value="457.48"/>	Outstanding Balance at Close of This Period <input type="text" value="1213.00"/>	

1) SUBTOTALS This Period This Page (optional).....	▶	<input type="text" value="14023.37"/>
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)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor WEST END PRINTING CO			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING FOR BRPAC
Mailing Address 1609 SHERWOOD AVE			
City RICHMOND	State VA	ZIP Code 23220	

Outstanding Balance Beginning This Period		Transaction ID: SD10.4122	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
4536.00	0.00	4536.00	

1) SUBTOTALS This Period This Page (optional).....	▶	4536.00
2) TOTALS This Period (last page this line number only).....	▶	49093.62
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	49093.62

Form/Schedule: **SA11AI** The committee takes the following steps to satisfy the best efforts requirements: (i) we send a letter clearly asking for the missing information, without soliciting a contribution; (ii) we inform the contributor of the requirements of federal law for the reporting of such information; and (iii) we provide a return envelope, a fax number and an email address.
Transaction ID: **SA11AI.9170**