

# 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  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

ADDRESS (number and street) 2155 HIGHWAY 42 SOUTH  
 Check if different than previously reported. (ACC)  
MCDONOUGH GA 30252

2. **FEC IDENTIFICATION NUMBER** C00265546  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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

5. Covering Period 04 01 2010 through 06 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer DIANA RENEE DIXON  
Signature of Treasurer Electronically Filed by DIANA RENEE DIXON Date 07 13 2010

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" 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>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		80995.84
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	106033.31									
(c) Total Receipts (from Line 19) .....	30330.87	55582.97								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	136364.18	136578.81								
7. Total Disbursements (from Line 31) .....	18415.86	18630.49								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	117948.32	117948.32								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	30330.95	55583.05
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	30330.95	55583.05
(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) .....	30330.95	55583.05
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) .....	-0.08	-0.08
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)) .....	30330.87	55582.97
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	30330.87	55582.97

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	18415.86	18630.49
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))..	18415.86	18630.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18415.86	18630.49

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	30330.95	55583.05
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	30330.95	55583.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	-0.08	-0.08
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.08	0.08

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.** Full Name (Last, First, Middle Initial)  
SOUTHERN STATES P.B.A  
Mailing Address 2155 HWY 42 S

City State Zip Code  
MCDONOUGH GA 30252

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
36225.61

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 28 / 2010

**Transaction ID:** SA11AI.12886

Amount of Each Receipt this Period  
10973.51

\*\$.50 PER MEMBER PER MONTH

**B.** Full Name (Last, First, Middle Initial)  
SOUTHERN STATES P.B.A  
Mailing Address 2155 HWY 42 S

City State Zip Code  
MCDONOUGH GA 30252

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
46145.92

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 26 / 2010

**Transaction ID:** SA11AI.12896

Amount of Each Receipt this Period  
9920.39

\*\$.50 PER MEMBER PER MONTH

**C.** Full Name (Last, First, Middle Initial)  
SOUTHERN STATES P.B.A  
Mailing Address 2155 HWY 42 S

City State Zip Code  
MCDONOUGH GA 30252

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
55582.97

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 28 / 2010

**Transaction ID:** SA11AI.12890

Amount of Each Receipt this Period  
9437.05

\*\$.50 PER MEMBER PER MONTH

**SUBTOTAL** of Receipts This Page (optional) ..... 30330.95

**TOTAL** This Period (last page this line number only) ..... 30330.95

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 7 / 23	
	(check only one)			
<input 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 checked="" 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)  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) SOUTHERN STATES P.B.A		Date of Receipt																					
	Mailing Address 2155 HWY 42 S		<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>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	4		3	0		2	0	1	0														
	City State Zip Code MCDONOUGH GA 30252		<b>Transaction ID:</b> SA15.12897																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period -0.08																						
Name of Employer Occupation		ADDITION ERROR																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 36225.53																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	-0.08
<b>TOTAL</b> This Period (last page this line number only) .....	▶	-0.08

**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 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

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NAME OF COMMITTEE (In Full)  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.	Full Name (Last, First, Middle Initial) JIM BARTON	Transaction ID: SB29.12878
	Mailing Address 324 ST ANDREWS DR	Date of Disbursement 05 / 24 / 2010
	City MOBILE State AL Zip Code 36693	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement CONTRIBUTION Candidate Name	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) HERBERT BATEMAN	Transaction ID: SB29.12808
	Mailing Address 203 PARKWAY DRIVE	Date of Disbursement 04 / 14 / 2010
	City NEWPORT NEWS State VA Zip Code 23606	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement CONTRIBUTION Candidate Name	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) RENEE BEAMER	Transaction ID: SB29.12809
	Mailing Address 111 OVERLOOK COVE	Date of Disbursement 04 / 14 / 2010
	City NEWPORT NEWS State VA Zip Code 23602	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement CONTRIBUTION Candidate Name	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<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

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NAME OF COMMITTEE (In Full)  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.	Full Name (Last, First, Middle Initial) SCOTT BEASON	Transaction ID: SB29.12880 Date of Disbursement																			
	Mailing Address 1689 QUAIL RIDGE RD	<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>5</td><td>/</td><td>2</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	2	4	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5	/	2	4	/	2	0	1	0												
	City GARDENDALE State AL Zip Code 35071	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CONTRIBUTION	<table border="1"><tr><td>300.00</td></tr></table>	300.00																		
300.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) BIRMINGHAM NEWS	Transaction ID: SB29.12862 Date of Disbursement																			
	Mailing Address 2200 FOURTH AVENUE NORTH	<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>5</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	2	1	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5	/	2	1	/	2	0	1	0												
	City BIRMINGHAM State AL Zip Code 35203	Amount of Each Disbursement this Period																			
	Purpose of Disbursement ADVERTISEMENT	<table border="1"><tr><td>960.00</td></tr></table>	960.00																		
960.00																					
	Candidate Name STEVE FRENCH	<table border="1"><tr><td>004</td></tr></table> Category/Type	004																		
004																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) BIRMINGHAM NEWS	Transaction ID: SB29.12864 Date of Disbursement																			
	Mailing Address 2200 FOURTH AVENUE NORTH	<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>5</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	2	1	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5	/	2	1	/	2	0	1	0												
	City BIRMINGHAM State AL Zip Code 35203	Amount of Each Disbursement this Period																			
	Purpose of Disbursement ADVERTISEMENT	<table border="1"><tr><td>960.00</td></tr></table>	960.00																		
960.00																					
	Candidate Name SCOTT BEASON	<table border="1"><tr><td>004</td></tr></table> Category/Type	004																		
004																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>2220.00</td></tr></table>	2220.00
2220.00		
<b>TOTAL</b> 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 10 / 23

<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

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NAME OF COMMITTEE (In Full)  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.	Full Name (Last, First, Middle Initial) BIRMINGHAM NEWS	Transaction ID: SB29.12866 Date of Disbursement
	Mailing Address 2200 FOURTH AVENUE NORTH	<input type="text" value="05"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City BIRMINGHAM State AL Zip Code 35203	Amount of Each Disbursement this Period
	Purpose of Disbursement ADVERTISEMENT Candidate Name MIKE HILL	<input type="text" value="960.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	004 Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) BIRMINGHAM NEWS	Transaction ID: SB29.12868 Date of Disbursement
	Mailing Address 2200 FOURTH AVENUE NORTH	<input type="text" value="05"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City BIRMINGHAM State AL Zip Code 35203	Amount of Each Disbursement this Period
	Purpose of Disbursement ADVERTISEMENT Candidate Name JOHN ROGERS	<input type="text" value="960.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	004 Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) BIRMINGHAM NEWS	Transaction ID: SB29.12870 Date of Disbursement
	Mailing Address 2200 FOURTH AVENUE NORTH	<input type="text" value="05"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City BIRMINGHAM State AL Zip Code 35203	Amount of Each Disbursement this Period
	Purpose of Disbursement ADVERTISEMENT Candidate Name DEMETRIUS NEWTON	<input type="text" value="960.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	004 Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2880.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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

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NAME OF COMMITTEE (In Full)  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

<b>A.</b> Full Name (Last, First, Middle Initial) PAIGE CHERRY <hr/> Mailing Address 3521 WILLOW BREEZE DR <hr/> City PORTSMOUTH State VA Zip Code 23703 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.12814 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 250.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) ADAM EBBIN <hr/> Mailing Address 181 E REED ST #402 <hr/> City ALEXANDRIA State VA Zip Code 22305 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.12883 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 250.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) NEIL ELKS <hr/> Mailing Address 520 MILL ST <hr/> City GREENVILLE State NC Zip Code 27858 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.12849 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 360.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	860.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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 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

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NAME OF COMMITTEE (In Full)  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.	Full Name (Last, First, Middle Initial) FEDERAL EXPRESS	Transaction ID: SB29.12850 Date of Disbursement
	Mailing Address P.O. BOX 1140	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City MEMPHIS State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement POSTAGE Candidate Name	<input type="text" value="12.41"/>
	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) ▼
		<input type="text" value="001"/> Category/Type

B.	Full Name (Last, First, Middle Initial) FEDERAL EXPRESS	Transaction ID: SB29.12881 Date of Disbursement
	Mailing Address P.O. BOX 1140	<input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City MEMPHIS State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement POSTAGE Candidate Name	<input type="text" value="76.28"/>
	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) ▼
		<input type="text" value="001"/> Category/Type

C.	Full Name (Last, First, Middle Initial) FEDERAL EXPRESS	Transaction ID: SB29.12882 Date of Disbursement
	Mailing Address P.O. BOX 1140	<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City MEMPHIS State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement POSTAGE Candidate Name	<input type="text" value="84.19"/>
	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) ▼
		<input type="text" value="001"/> Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="172.88"/>
<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 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

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NAME OF COMMITTEE (In Full)  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

<b>A.</b> Full Name (Last, First, Middle Initial) STEVE FRENCH <hr/> Mailing Address 184 PEACHTREE CIRCLE <hr/> City BIRMINGHAM State AL Zip Code 36213 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.12877 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 0
	Amount of Each Disbursement this Period 300.00
	Category/Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) GADSDEN MESSENGER <hr/> Mailing Address 408 BROAD ST <hr/> City GADSDEN State AL Zip Code 35901 <hr/> Purpose of Disbursement ADVERTISEMENT Candidate Name BLAINE GALLIHER <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.12859 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 129.75
	Category/Type 004
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) CHARNIELE HERRING <hr/> Mailing Address 715 NORTH ASHTON ST <hr/> City ALEXANDRIA State VA Zip Code 22312 <hr/> Purpose of Disbursement VOID CK# 3479 DATED 1/5/2009 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.12895 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period -500.00
	Category/Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

-70.25

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input 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

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NAME OF COMMITTEE (In Full)  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.	Full Name (Last, First, Middle Initial) MIKE HILL	Transaction ID: SB29.12876 Date of Disbursement 05 / 24 / 2010
	Mailing Address 114 ARLINGTON LANE	Amount of Each Disbursement this Period 300.00
	City COLUMBIANA State AL Zip Code 35051	
	Purpose of Disbursement CONTRIBUTION Candidate Name	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) HUNTSVILLE TIMES	Transaction ID: SB29.12872 Date of Disbursement 05 / 21 / 2010
	Mailing Address 2317 MEMORIAL PARKWAY SOUTH	Amount of Each Disbursement this Period 1120.95
	City HUNTSVILLE State AL Zip Code 35801	
	Purpose of Disbursement ADVERTISEMENT Candidate Name BUTCH TAYLOR	004 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CHARLES INMAN	Transaction ID: SB29.12851 Date of Disbursement 04 / 30 / 2010
	Mailing Address 1407 N HUTCHINSON	Amount of Each Disbursement this Period 200.00
	City PINE BLUFF State AR Zip Code 71602	
	Purpose of Disbursement CONTRIBUTION Candidate Name	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1620.95
<b>TOTAL</b> This Period (last page this line number only) .....	▶	





# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input 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

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NAME OF COMMITTEE (In Full)  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.	Full Name (Last, First, Middle Initial) ASHLEY RICH	Transaction ID: SB29.12853 Date of Disbursement 05 / 06 / 2010
	Mailing Address PO BOX 9045	
	City MOBILE State AL Zip Code 36693	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement CONTRIBUTION Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ROANOKE TIMES	Transaction ID: SB29.12842 Date of Disbursement 04 / 23 / 2010
	Mailing Address 201 W CAMPBELL AVENUE	
	City ROANOKE State VA Zip Code 24010	Amount of Each Disbursement this Period 250.36
	Purpose of Disbursement ADVERTISEMENT Candidate Name TOM STARNES	004 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ROANOKE TIMES	Transaction ID: SB29.12843 Date of Disbursement 04 / 23 / 2010
	Mailing Address 201 W CAMPBELL AVENUE	
	City ROANOKE State VA Zip Code 24010	Amount of Each Disbursement this Period 250.36
	Purpose of Disbursement ADVERTISEMENT Candidate Name KEITH MARSHALL	004 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1500.72
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<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

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NAME OF COMMITTEE (In Full)  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

<b>A.</b> Full Name (Last, First, Middle Initial) ROANOKE TIMES Mailing Address 201 W CAMPBELL AVENUE City ROANOKE State VA Zip Code 24010 Purpose of Disbursement ADVERTISEMENT Candidate Name ADAM DEVRIES Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.12844 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 250.36 Category/Type: 004
<b>B.</b> Full Name (Last, First, Middle Initial) JOHN ROGERS Mailing Address 1424 18TH STREET SW City BIRMINGHAM State AL Zip Code 35211 Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.12874 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 0
	Amount of Each Disbursement this Period 300.00 Category/Type: 011
<b>C.</b> Full Name (Last, First, Middle Initial) DOUGLAS SMITH Mailing Address 334 MIDDLE STREET City PORTSMOUTH State VA Zip Code 23704 Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VA District:	Transaction ID: SB29.12812 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00 Category/Type: 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1050.36
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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

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NAME OF COMMITTEE (In Full)  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.	Full Name (Last, First, Middle Initial) PAUL STAM	Transaction ID: SB29.12894 Date of Disbursement 04 / 30 / 2010
	Mailing Address P.O. BOX 1600	Amount of Each Disbursement this Period -500.00
	City APEX State NC Zip Code 27502	
	Purpose of Disbursement VOID CK # 3419 DATED 10/2/2008	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) THE DAILY PRESS	Transaction ID: SB29.12833 Date of Disbursement 04 / 21 / 2010
	Mailing Address 7505 WARWICK BLVD	Amount of Each Disbursement this Period 440.00
	City NEWPORT NEWS State VA Zip Code 23607	
	Purpose of Disbursement ADVERTISEMENT	004 Category/ Type
	Candidate Name PATRICIA P. WOODBURY	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) THE DAILY PRESS	Transaction ID: SB29.12834 Date of Disbursement 04 / 21 / 2010
	Mailing Address 7505 WARWICK BLVD	Amount of Each Disbursement this Period 440.00
	City NEWPORT NEWS State VA Zip Code 23607	
	Purpose of Disbursement ADVERTISEMENT	004 Category/ Type
	Candidate Name JOHN MCMILLAN, Jr.	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	380.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input 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

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NAME OF COMMITTEE (In Full)  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>THE DAILY PRESS</b></p> <p>Mailing Address 7505 WARWICK BLVD</p> <p>City NEWPORT NEWS State VA Zip Code 23607</p> <p>Purpose of Disbursement ADVERTISEMENT</p> <p>Candidate Name RENEE BEAMER</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.12836 <b>Date of Disbursement</b> 04 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 440.00</p> <p>Category/Type 004</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>THE DAILY PRESS</b></p> <p>Mailing Address 7505 WARWICK BLVD</p> <p>City NEWPORT NEWS State VA Zip Code 23607</p> <p>Purpose of Disbursement ADVERTISEMENT</p> <p>Candidate Name SHAUN BROWN</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.12837 <b>Date of Disbursement</b> 04 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 440.00</p> <p>Category/Type 004</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>THE DAILY PRESS</b></p> <p>Mailing Address 7505 WARWICK BLVD</p> <p>City NEWPORT NEWS State VA Zip Code 23607</p> <p>Purpose of Disbursement ADVERTISEMENT</p> <p>Candidate Name SHARON P SCOTT</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.12840 <b>Date of Disbursement</b> 04 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 440.00</p> <p>Category/Type 004</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1320.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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

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NAME OF COMMITTEE (In Full)  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.	Full Name (Last, First, Middle Initial) <b>THE DAILY PRESS</b>	<b>Transaction ID:</b> SB29.12841 Date of Disbursement
	Mailing Address 7505 WARWICK BLVD	<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City NEWPORT NEWS State VA Zip Code 23607	Amount of Each Disbursement this Period
	Purpose of Disbursement ADVERTISEMENT	<input type="text" value="440.00"/>
	Candidate Name HERBERT BATEMAN	<input type="text" value="004"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>THE DAILY REFLECTOR</b>	<b>Transaction ID:</b> SB29.12845 Date of Disbursement
	Mailing Address 1150 SUGG PKWY	<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City GREENVILLE State NC Zip Code 27835	Amount of Each Disbursement this Period
	Purpose of Disbursement ADVERTISEMENT	<input type="text" value="140.25"/>
	Candidate Name NEIL ELKS	<input type="text" value="004"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>THE DAILY REFLECTOR</b>	<b>Transaction ID:</b> SB29.12847 Date of Disbursement
	Mailing Address 1150 SUGG PKWY	<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City GREENVILLE State NC Zip Code 27835	Amount of Each Disbursement this Period
	Purpose of Disbursement ADVERTISEMENT	<input type="text" value="140.25"/>
	Candidate Name KENNETH ROSS	<input type="text" value="004"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="720.50"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input 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

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NAME OF COMMITTEE (In Full)  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

<b>A.</b> Full Name (Last, First, Middle Initial) THE PRESS REGISTER Mailing Address 401 N WATER ST City MOBILE State AL Zip Code 36602 Purpose of Disbursement ADVERTISEMENT Candidate Name JIM BARTON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.12857 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 1313.25	

<b>B.</b> Full Name (Last, First, Middle Initial) THE PRESS REGISTER Mailing Address 401 N WATER ST City MOBILE State AL Zip Code 36602 Purpose of Disbursement ADVERTISEMENT Candidate Name ASHLEY RICH Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.12858 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 1313.25	

<b>C.</b> Full Name (Last, First, Middle Initial) THE VIRGINIAN PILOT Mailing Address 160 W BRAMBLETON AVE City NORFOLK State VA Zip Code 23510 Purpose of Disbursement ADVERTISEMENT Candidate Name PAIGE CHERRY Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.12804 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 1 0
	Amount of Each Disbursement this Period 441.00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3067.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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 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

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NAME OF COMMITTEE (In Full)  
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>THE VIRGINIAN PILOT</b></p> <p>Mailing Address <b>160 W BRAMBLETON AVE</b></p> <p>City <b>NORFOLK</b> State <b>VA</b> Zip Code <b>23510</b></p> <p>Purpose of Disbursement <b>ADVERTISEMENT</b></p> <p>Candidate Name <b>DOUGLAS SMITH</b></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>VA</b> District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.12805 <b>Date of Disbursement</b> 04 / 13 / 2010</p> <p><b>Amount of Each Disbursement this Period</b> 441.00</p> <p>004 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>THE VIRGINIAN PILOT</b></p> <p>Mailing Address <b>160 W BRAMBLETON AVE</b></p> <p>City <b>NORFOLK</b> State <b>VA</b> Zip Code <b>23510</b></p> <p>Purpose of Disbursement <b>ADVERTISEMENT</b></p> <p>Candidate Name <b>WILLIAM MOODY, Jr.</b></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.12806 <b>Date of Disbursement</b> 04 / 13 / 2010</p> <p><b>Amount of Each Disbursement this Period</b> 441.00</p> <p>004 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>WHITE HALL</b></p> <p>Mailing Address <b>70400 DOLLARWAY RD STE E</b></p> <p>City <b>WHITEHALL</b> State <b>AR</b> Zip Code <b>71602</b></p> <p>Purpose of Disbursement <b>ADVERTISEMENT</b></p> <p>Candidate Name <b>CHARLES INMAN</b></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.12823 <b>Date of Disbursement</b> 04 / 15 / 2010</p> <p><b>Amount of Each Disbursement this Period</b> 238.70</p> <p>004 Category/ Type</p>

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

**1120.70**

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

**18415.86**