

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
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

ADDRESS (number and street) 4246 CHAIN BRIDGE RD
 Check if different than previously reported. (ACC)
FAIRFAX VA 22030

2. **FEC IDENTIFICATION NUMBER** C00277335
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 (12G)
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 08 01 2011 through 08 31 2011

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 Michael Rumberg

Signature of Treasurer Electronically Filed by Michael Rumberg Date 09 09 2011

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		21958.40
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	30928.84									
(c) Total Receipts (from Line 19)	6225.00	58837.73								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	37153.84	80796.13								
7. Total Disbursements (from Line 31)	3128.13	46770.42								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	34025.71	34025.71								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	3700.00	30719.83
(ii) Unitemized	2475.00	27867.90
(iii) TOTAL (add Lines 11(a)(i) and (ii)	6175.00	58587.73
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	200.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	6175.00	58787.73
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	50.00	50.00
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))	6225.00	58837.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	6225.00	58837.73

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.....	3128.13	46660.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	3128.13	46660.42
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	110.00
(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	110.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	3128.13	46770.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3128.13	46770.42

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)	6175.00	58787.73
34. Total Contribution Refunds (from Line 28(d))	0.00	110.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6175.00	58677.73
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3128.13	46660.42
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3128.13	46660.42

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 24
	<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)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.	Full Name (Last, First, Middle Initial) Curtis Anderson	Date of Receipt MM / DD / YYYY 08 / 02 / 2011
	Mailing Address 3020 Beechwood Ln	Transaction ID: SA11AI.15635
	City State Zip Code Falls Church VA 22042	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	contribution
Name of Employer USDA	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) Mr. Gary H. Baise	Date of Receipt MM / DD / YYYY 08 / 02 / 2011
	Mailing Address 2201 Great Falls Street	Transaction ID: SA11AI.15649
	City State Zip Code Falls Church VA 22043	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	contribution
Name of Employer Kilpatrick Stockton LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) Monica D Chiralo	Date of Receipt MM / DD / YYYY 08 / 02 / 2011
	Mailing Address 6738 Jade Post Ln	Transaction ID: SA11AI.15647
	City State Zip Code Centreville VA 20121	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	contribution
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	

SUBTOTAL of Receipts This Page (optional)	400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 24
(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)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A. Full Name (Last, First, Middle Initial)
Monica D Chiralo

Mailing Address 6738 Jade Post Ln

City State Zip Code
Centreville VA 20121

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
retired retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt 08 / 03 / 2011
Transaction ID: SA11AI.15648

Amount of Each Receipt this Period
250.00
contribution

B. Full Name (Last, First, Middle Initial)
Kent Gladstone

Mailing Address 8609 Raglan Rd

City State Zip Code
Vienna VA 22182

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SAIC Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 02 / 2011
Transaction ID: SA11AI.15658

Amount of Each Receipt this Period
100.00
contribution

C. Full Name (Last, First, Middle Initial)
Kent Gladstone

Mailing Address 8609 Raglan Rd

City State Zip Code
Vienna VA 22182

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SAIC Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 04 / 2011
Transaction ID: SA11AI.15675

Amount of Each Receipt this Period
100.00
contribution

SUBTOTAL of Receipts This Page (optional) 450.00

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 / 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A. Full Name (Last, First, Middle Initial)
Anne Gruner
Mailing Address 8027 Leesburg Pike # 304
City Vienna State VA Zip Code 22182
FEC ID number of contributing federal political committee. **C**
Name of Employer Fite Obrien Occupation Associate
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 08 / 15 / 2011
Transaction ID: SA11AI.15703
Amount of Each Receipt this Period 150.00
contribution

B. Full Name (Last, First, Middle Initial)
Karen Hontz
Mailing Address 5906 Skyline Heights Ct
City Alexandria State VA Zip Code 22311
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 08 / 01 / 2011
Transaction ID: SA11AI.15592
Amount of Each Receipt this Period 250.00
contribution

C. Full Name (Last, First, Middle Initial)
Matthew Kiessling
Mailing Address 1119 North Pitt St
City Alexandria State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C**
Name of Employer Democracy Data & Communication Occupation Program Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 08 / 04 / 2011
Transaction ID: SA11AI.15652
Amount of Each Receipt this Period 250.00
contribution

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 9 / 24
(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)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.

Full Name (Last, First, Middle Initial)
Karl W. Lady

Mailing Address 4501 Carlby Ln

City State Zip Code
Alexandria VA 22309

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 02 / 2011

Transaction ID: SA11AI.15633

Amount of Each Receipt this Period
50.00

contribution

B.

Full Name (Last, First, Middle Initial)
Karl W. Lady

Mailing Address 4501 Carlby Ln

City State Zip Code
Alexandria VA 22309

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
08 / 02 / 2011

Transaction ID: SA11AI.15634

Amount of Each Receipt this Period
50.00

contribution

C.

Full Name (Last, First, Middle Initial)
Mr. Henry L. Lucas

Mailing Address 6163 Hidden Canyon Rd.

City State Zip Code
Centreville VA 20120

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

Name of Employer ECS Occupation engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2011

Transaction ID: SA11AI.15617

Amount of Each Receipt this Period
250.00

contribution

SUBTOTAL of Receipts This Page (optional) ► **350.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 24
	<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)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.	Full Name (Last, First, Middle Initial) Andrew J McDevitt	Date of Receipt MM / DD / YYYY 08 / 01 / 2011
	Mailing Address 3008 Sugar Lane	Transaction ID: SA11AI.15621
	City State Zip Code Vienna VA 22181	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	contribution
	Name of Employer Intuit Inc Occupation Govt Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 510.00	

B.	Full Name (Last, First, Middle Initial) Stephen Memery	Date of Receipt MM / DD / YYYY 08 / 03 / 2011
	Mailing Address 1508 Church Hill Pl	Transaction ID: SA11AI.15670
	City State Zip Code Reston VA 20194	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	contribution
	Name of Employer OVCapital LLP Occupation Finance 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) Anthony Mlinar	Date of Receipt MM / DD / YYYY 08 / 04 / 2011
	Mailing Address 5416 Gainsborough Dr	Transaction ID: SA11AI.15676
	City State Zip Code Fairfax VA 22033	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	contribution
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2200.00	

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 11 / 24
(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)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.

Full Name (Last, First, Middle Initial)
Jason Poblete

Mailing Address 4646 A 36th St S

City Arlington State VA Zip Code 22206

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

Name of Employer: Poblete Tamargo LLP Occupation: Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 04 / 2011

Transaction ID: SA11AI.15655

Amount of Each Receipt this Period: 250.00

contribution

B.

Full Name (Last, First, Middle Initial)
Pat Raffaniello

Mailing Address 1161 Old Gate Ct

City Mclean State VA Zip Code 22102

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

Name of Employer: Self Occupation: Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 02 / 2011

Transaction ID: SA11AI.15640

Amount of Each Receipt this Period: 250.00

contribution

C.

Full Name (Last, First, Middle Initial)
Mrs. Geraldine M. Smith

Mailing Address 7916 Old Falls Road

City McLean State VA Zip Code 22102

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

Name of Employer: self Occupation: homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt: 08 / 01 / 2011

Transaction ID: SA11AI.15618

Amount of Each Receipt this Period: 100.00

contribution

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A. Full Name (Last, First, Middle Initial)
Michael L Stern

Mailing Address 8529 Century Oak PI

City State Zip Code
Fairfax Station VA 22039

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

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt 08 / 03 / 2011
Transaction ID: SA11AI.15662
Amount of Each Receipt this Period 100.00
contribution

B. Full Name (Last, First, Middle Initial)
Kenneth Vaughn

Mailing Address 12906 Pinecrest Rd

City State Zip Code
Herndon VA 20171

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

Name of Employer Trevilon Corp Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 01 / 2011
Transaction ID: SA11AI.15590
Amount of Each Receipt this Period 50.00
contribution

C. Full Name (Last, First, Middle Initial)
Mrs. Heather M. West

Mailing Address 4930 Novak LN.

City State Zip Code
Fairfax VA 22030

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

Name of Employer Self Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2011
Transaction ID: SA11AI.15594
Amount of Each Receipt this Period 250.00
contribution

SUBTOTAL of Receipts This Page (optional) ▶ 400.00

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 / 24
(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)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.

Full Name (Last, First, Middle Initial)
Donna Yeh

Mailing Address 13447 Wood Lilly Ln

City State Zip Code
Centreville VA 20120

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

Name of Employer Occupation
UBC Business Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	1	1

Transaction ID: SA11AI.15663

Amount of Each Receipt this Period
250.00

contribution

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	3700.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 14 / 24	
	(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 type="checkbox"/> 15	<input checked="" type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.	Full Name (Last, First, Middle Initial) Norman Lerner		Date of Receipt	
	Mailing Address 4527 Pickett Rd		M M / D D / Y Y Y Y 08 / 08 / 2011	
	City	State	Zip Code	Transaction ID: SA16.15686
	Fairfax	VA	22032	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		C	50.00
	Name of Employer		Occupation	refund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	100.00	

SUBTOTAL of Receipts This Page (optional)	50.00
TOTAL This Period (last page this line number only)	50.00

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.	Full Name (Last, First, Middle Initial) 1-800 Flowers.com	Transaction ID: SB21B.15608 Date of Disbursement 08 / 13 / 2011
	Mailing Address 1 Old Country Rd #500	Amount of Each Disbursement this Period 118.67
	City Carle Place State NY Zip Code 11514	
	Purpose of Disbursement office supplies Candidate Name	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) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) AC Moore Arts & Crafts	Transaction ID: SB21B.15612 Date of Disbursement 08 / 13 / 2011
	Mailing Address 9650 Main St	Amount of Each Disbursement this Period 14.14
	City Fairfax State VA Zip Code 22031	
	Purpose of Disbursement office supplies Candidate Name	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) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.15697 Date of Disbursement 08 / 10 / 2011
	Mailing Address PO Box 1279	Amount of Each Disbursement this Period 4.95
	City Newark State NJ Zip Code 07101	
	Purpose of Disbursement bank service charge Candidate Name	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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4.95

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 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)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.15702 Date of Disbursement																			
	Mailing Address PO Box 1279	<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>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	1	1												
	City Newark State NJ Zip Code 07101	Amount of Each Disbursement this Period																			
	Purpose of Disbursement bank service charge	<table border="1"><tr><td>83.51</td></tr></table>	83.51																		
83.51																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	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) American Express	Transaction ID: SB21B.15683 Date of Disbursement																			
	Mailing Address PO Box 1279	<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>8</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	7		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	7		2	0	1	1												
	City Newark State NJ Zip Code 07101	Amount of Each Disbursement this Period																			
	Purpose of Disbursement See memo items	<table border="1"><tr><td>895.54</td></tr></table>	895.54																		
895.54																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	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) AT&T	Transaction ID: SB21B.15598 Date of Disbursement																			
	Mailing Address 1525 Valley Center Pkwy	<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>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	1	1												
	City Bethlehem State PA Zip Code 18017	Amount of Each Disbursement this Period																			
	Purpose of Disbursement telephone	<table border="1"><tr><td>15.50</td></tr></table>	15.50																		
15.50																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	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) ▼																			

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>979.05</td></tr></table>	979.05
979.05		
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)

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<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)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.	Full Name (Last, First, Middle Initial) Authorize.net	Transaction ID: SB21B.15682 Date of Disbursement
	Mailing Address 808 East Utah Valley Drive	<input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>
	City American Fork State UT Zip Code 84003	Amount of Each Disbursement this Period
	Purpose of Disbursement bank fees Candidate Name	<input type="text" value="47.25"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Barchetta Enterprises, LC	Transaction ID: SB21B.15681 Date of Disbursement
	Mailing Address 7138 Little River TP # 210	<input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>
	City Annandale State VA Zip Code 22003	Amount of Each Disbursement this Period
	Purpose of Disbursement Compliance consultant Candidate Name	<input type="text" value="750.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Borders Books	Transaction ID: SB21B.15688 Date of Disbursement
	Mailing Address 11054 Lee Hwy	<input type="text" value="08"/> / <input type="text" value="13"/> / <input type="text" value="2011"/>
	City Fairfax State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement office supplies Candidate Name	<input type="text" value="33.08"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="797.25"/>
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)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

<p>A. Full Name (Last, First, Middle Initial) Cables & Kits.com</p> <p>Mailing Address 4555 Atwater Ct #A</p> <p>City Buford State GA Zip Code 30518</p> <p>Purpose of Disbursement office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.15599</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="18.85"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Constant Contact</p> <p>Mailing Address 1601 Trapelo Road #329</p> <p>City Waltham State MA Zip Code 02451</p> <p>Purpose of Disbursement webhosting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.15597</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="80.00"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Cox Communications Inc</p> <p>Mailing Address 4246 Chain Bridge Rd</p> <p>City Fairfax State VA Zip Code 22033</p> <p>Purpose of Disbursement telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.15708</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="352.74"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A. Full Name (Last, First, Middle Initial) CVS Drug Store Mailing Address Leesburg Pike City Falls Church State VA Zip Code 22041 Purpose of Disbursement office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.15604 Date of Disbursement 08 / 13 / 2011
	Amount of Each Disbursement this Period 5.65 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) DeLage Landen Financial Services Mailing Address P.O. Box 41601 City Philadelphia State PA Zip Code 19101 Purpose of Disbursement equipment lease Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.15687 Date of Disbursement 08 / 05 / 2011
	Amount of Each Disbursement this Period 191.74

C. Full Name (Last, First, Middle Initial) Dominion Virginia Power Mailing Address P.O. Box 26543 City Richmond State VA Zip Code 23290 Purpose of Disbursement utility Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.15696 Date of Disbursement 08 / 09 / 2011
	Amount of Each Disbursement this Period 35.91

SUBTOTAL of Disbursements This Page (optional) ▶	227.65
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 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)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.

Full Name (Last, First, Middle Initial)
Fairfax Professional Village

Mailing Address 4240 Chain Bridge Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
condo fee

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.15700

Date of Disbursement

08 / 10 / 2011

Amount of Each Disbursement this Period

43.00

B.

Full Name (Last, First, Middle Initial)
Fairfax Professional Village

Mailing Address 4240 Chain Bridge Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
condo fee

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.15701

Date of Disbursement

08 / 10 / 2011

Amount of Each Disbursement this Period

192.60

C.

Full Name (Last, First, Middle Initial)
Fedex

Mailing Address 9600 Main St Ste A

City Fairfax State VA Zip Code 22031

Purpose of Disbursement
postage

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.15605

Date of Disbursement

08 / 13 / 2011

Amount of Each Disbursement this Period

1.47

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

235.60

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)

PAGE 21 / 24

<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)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.	Full Name (Last, First, Middle Initial) Fedex	Transaction ID: SB21B.15614 Date of Disbursement 08 / 13 / 2011
	Mailing Address 9600 Main St Ste A	Amount of Each Disbursement this Period 12.96
	City Fairfax State VA Zip Code 22031	
	Purpose of Disbursement postage Candidate Name	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) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Giant Food	Transaction ID: SB21B.15691 Date of Disbursement 08 / 13 / 2011
	Mailing Address Lee Highway	Amount of Each Disbursement this Period 47.48
	City Fairfax State VA Zip Code 22030	
	Purpose of Disbursement food for volunteers Candidate Name	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) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: SB21B.15690 Date of Disbursement 08 / 13 / 2011
	Mailing Address 2200 Old Germantown Road	Amount of Each Disbursement this Period 84.98
	City Delray Beach State FL Zip Code 33445	
	Purpose of Disbursement office supplies Candidate Name	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) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
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)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.15601 Date of Disbursement																			
	Mailing Address 2145 Hamilton Ave	<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>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	1	1												
	City San Jose State CA Zip Code 95101	Amount of Each Disbursement this Period																			
	Purpose of Disbursement office supplies	<table border="1"><tr><td>53.40</td></tr></table>	53.40																		
53.40																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	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) ▼																			

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.15611 Date of Disbursement																			
	Mailing Address 2145 Hamilton Ave	<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>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	1	1												
	City San Jose State CA Zip Code 95101	Amount of Each Disbursement this Period																			
	Purpose of Disbursement subscription	<table border="1"><tr><td>50.00</td></tr></table>	50.00																		
50.00																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	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) ▼																			

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Quill Corporation	Transaction ID: SB21B.15615 Date of Disbursement																			
	Mailing Address 100 Schelster 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>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	1	1												
	City Lincolnshire State IL Zip Code 60069	Amount of Each Disbursement this Period																			
	Purpose of Disbursement office supplies	<table border="1"><tr><td>330.91</td></tr></table>	330.91																		
330.91																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	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) ▼																			

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
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)

<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)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.	Full Name (Last, First, Middle Initial) Safeway Stores	Transaction ID: SB21B.15606 Date of Disbursement																			
	Mailing Address Chain Bridge 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>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	1	1												
	City Fairfax State VA Zip Code 22030	Amount of Each Disbursement this Period																			
	Purpose of Disbursement food for volunteers	<table border="1"><tr><td>12.27</td></tr></table>	12.27																		
12.27																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	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) ▼																			

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Transfirst, LLC	Transaction ID: SB21B.15680 Date of Disbursement																			
	Mailing Address 3131 S Vaughn Way #350	<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>8</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	1		2	0	1	1												
	City Aurora State CO Zip Code 80014	Amount of Each Disbursement this Period																			
	Purpose of Disbursement bank fees	<table border="1"><tr><td>351.93</td></tr></table>	351.93																		
351.93																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	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) Transfirst, LLC	Transaction ID: SB21B.15699 Date of Disbursement																			
	Mailing Address 3131 S Vaughn Way #350	<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>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	0		2	0	1	1												
	City Aurora State CO Zip Code 80014	Amount of Each Disbursement this Period																			
	Purpose of Disbursement bank service charge	<table border="1"><tr><td>178.96</td></tr></table>	178.96																		
178.96																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	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>530.89</td></tr></table>	530.89
530.89		
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)

<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)
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB21B.15603
	Mailing Address 10660 Page Street	Date of Disbursement 08 / 13 / 2011
	City Fairfax State VA Zip Code 22030	Amount of Each Disbursement this Period 1.48
	Purpose of Disbursement postage	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB21B.15609
	Mailing Address 10660 Page Street	Date of Disbursement 08 / 13 / 2011
	City Fairfax State VA Zip Code 22030	Amount of Each Disbursement this Period 10.50
	Purpose of Disbursement postage	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Walgreens Drugstore	Transaction ID: SB21B.15607
	Mailing Address Main St	Date of Disbursement 08 / 13 / 2011
	City Fairfax State VA Zip Code 22033	Amount of Each Disbursement this Period 4.20
	Purpose of Disbursement office supplies	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	3128.13