

# 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  
Republican Mainstreet Partnership PAC

ADDRESS (number and street) c/o G&W 2201 Wisconsin Ave., NW  
Suite 320  
 Check if different than previously reported. (ACC)  
Washington DC 20007

2. **FEC IDENTIFICATION NUMBER** C00165159  
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 06 01 2009 through 06 30 2009

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 Sarah Chamberlain Resnick

Signature of Treasurer Electronically Filed by Sarah Chamberlain Resnick Date 07 15 2009

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

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

A. Form/Schedule : **F3XN**

Transaction ID :

Memorandum Please be advised that all expenditures on Schedule B, Line 21(b) are to support Committee activities and are not made on behalf of specifically identified candidates. Also, all expenditures on Schedule B, Line 21(b) are to Support Committee activities and are not for public communications and voter drive activity containing express advocacy.

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Republican Mainstreet Partnership PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		48394.85
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	237284.54									
(c) Total Receipts (from Line 19) .....	26920.04	365887.20								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	264204.58	414282.05								
7. Total Disbursements (from Line 31) .....	111132.45	261209.92								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	153072.13	153072.13								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	2010.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	4754.53									

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  
Republican Mainstreet Partnership PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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) .....	1500.00	14500.00
(ii) Unitemized .....	230.00	1930.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1730.00	16430.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	24000.00	342000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	25730.00	358430.00
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) .....	1173.41	1823.41
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	5500.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	16.63	133.79
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)) .....	26920.04	365887.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	26920.04	365887.20

**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.....	47132.45	135709.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	47132.45	135709.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	64000.00	120500.00
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	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	5000.00
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))..	111132.45	261209.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	111132.45	261209.92

**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) .....	25730.00	358430.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	25730.00	353430.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	47132.45	135709.92
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	1173.41	1823.41
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	45959.04	133886.51

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 7 / 26</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial)  
Robert Keith

Mailing Address 975 Garrett Mill Road

City State Zip Code  
Newtown Square PA 19073

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

Name of Employer Occupation  
TL Ventures Venture Capitalist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2009

**Transaction ID:** SA11AI.10235

Amount of Each Receipt this Period  
1000.00

**B.**

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

Mailing Address 271-0 Market Square

City State Zip Code  
Lake Forest IL 60045

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2009

**Transaction ID:** SA11AI.10233

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>1500.00</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 8 / 26</span>
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" 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)  
Republican Mainstreet Partnership PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Action Committee For Rural Electrification (ACRE)	Date of Receipt
	Mailing Address 4301 Wilson Boulevard	<input type="text" value="06"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City State Zip Code Arlington VA 22203	<b>Transaction ID:</b> SA11C.10237
	FEC ID number of contributing federal political committee. <input type="text" value="C00002972"/>	Amount of Each Receipt this Period
	<input type="text" value="2500.00"/>	
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="2500.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) American Academy of Family Physicians PAC	Date of Receipt
	Mailing Address 2023 Massachusetts Avenue, NW	<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City State Zip Code Washington DC 20036	<b>Transaction ID:</b> SA11C.10239
	FEC ID number of contributing federal political committee. <input type="text" value="C00411553"/>	Amount of Each Receipt this Period
	<input type="text" value="2500.00"/>	
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="2500.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) American Congress on Surveying & Mapping PAC Account	Date of Receipt
	Mailing Address 6 Montgomery Village Avenue Suite 403	<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City State Zip Code Gaithersburg MD 20879	<b>Transaction ID:</b> SA11C.10240
	FEC ID number of contributing federal political committee. <input type="text" value="C00152892"/>	Amount of Each Receipt this Period
	<input type="text" value="1000.00"/>	
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="6000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 26  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

**A.** Full Name (Last, First, Middle Initial)  
Applied Materials, Inc. Political Action Committee  
Mailing Address 20 Park Road, Suite E

City State Zip Code  
Burlingame CA 94010

FEC ID number of contributing federal political committee. **C** C00406892

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	9

**Transaction ID:** SA11C.10243  
 Amount of Each Receipt this Period  
3000.00

**B.** Full Name (Last, First, Middle Initial)  
COREPAC- Corning Incorporated Employees Political Action Committee  
Mailing Address 325 7th Street, NW Suite 600

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00033589

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	3	/	2	0	0	9

**Transaction ID:** SA11C.10229  
 Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Nuclear Energy Institute - Federal Political Action Committee  
Mailing Address 1776 I Street NW , 4th Floor

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00239848

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	9

**Transaction ID:** SA11C.10251  
 Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **13000.00**

**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: <span style="float: right;">PAGE 10 / 26</span>
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" 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)  
Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial) Orbital Sciences Corporation Political Action Committee (ORBAPAC)		Date of Receipt
Mailing Address 21839 Atlantic Boulevard		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
City	State	Zip Code
Dulles	VA	20166
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.10242
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="2500.00"/>
Occupation		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) WAL*PAC		Date of Receipt
Mailing Address 702 SW 8th Street		<input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
City	State	Zip Code
Bentonville	AR	72716
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.10230
<input type="text" value="C C00093054"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="2500.00"/>
Occupation		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="24000.00"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 26	
	(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

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NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Timothy Regan		Date of Receipt	
	Mailing Address 7505 S Valley Drive		M M / D D / Y Y Y Y 06 / 30 / 2009	
	City	State	Zip Code	<b>Transaction ID:</b> SA15.10249
	Fairfax Station	VA	22039	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		C	1173.41
	Name of Employer		Occupation	Reimb for Airline Tickets
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	1173.41	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1173.41
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1173.41

# 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)  
Republican Mainstreet Partnership PAC

A.	Full Name (Last, First, Middle Initial) Caplin & Drysdale	Transaction ID: SB21B.10253 Date of Disbursement 06 / 05 / 2009
	Mailing Address One Thomas Circle, NW	Amount of Each Disbursement this Period 5283.49
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Legal Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Caplin & Drysdale	Transaction ID: SB21B.10257 Date of Disbursement 06 / 09 / 2009
	Mailing Address One Thomas Circle, NW	Amount of Each Disbursement this Period 1076.86
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Legal Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Sarah Chamberlain Resnick	Transaction ID: SB21B.10262 Date of Disbursement 06 / 30 / 2009
	Mailing Address 11431 James Jack Lane	Amount of Each Disbursement this Period 35343.00
	City Charlotte State NC Zip Code 28277	
	Purpose of Disbursement Fundraising Services Candidate Name	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) ..... ▶

41703.35

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 13 / 26

<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)  
Republican Mainstreet Partnership PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Chase Card Services</p> <p>Mailing Address PO Box 15153</p> <p>City Wilmington State DE Zip Code 19886-5153</p> <p>Purpose of Disbursement See Credit Card Memo Entry</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><b>Transaction ID:</b> SB21B.10260</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="396.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Capitol Hill Club</p> <p>Mailing Address 300 First Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Facilities/Catering</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><b>Transaction ID:</b> SB21B.10260.0</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="396.00"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Dickstein Shapiro LLP</p> <p>Mailing Address 1825 Eye Street, NW</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Legal Services</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><b>Transaction ID:</b> SB21B.10254</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> / <input type="text" value="09"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="817.50"/></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)  
Republican Mainstreet Partnership PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Gilbert &amp; Wolfand, PC</p> <p>Mailing Address 2201 Wisconsin Avenue, NW Suite 320</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Accounting Services</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><b>Transaction ID:</b> SB21B.10256</p> <p>Date of Disbursement 06 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 2226.75</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) National Republican Congressional Committee</p> <p>Mailing Address 320 First Street</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Travel</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><b>Transaction ID:</b> SB21B.10255</p> <p>Date of Disbursement 06 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 1904.85</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Suntrust Bank</p> <p>Mailing Address PO Box 85024</p> <p>City Richmond State VA Zip Code 23285-5024</p> <p>Purpose of Disbursement Bank Service Charges</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><b>Transaction ID:</b> SB21B.10296</p> <p>Date of Disbursement 06 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 18.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4149.60</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>47066.45</b>

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

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NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

A.

Full Name (Last, First, Middle Initial)  
Candice Miller for Congress

Transaction ID: SB23.10268  
Date of Disbursement

Mailing Address PO Box 182152

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	0	9

City State Zip Code  
Shelby Township MI 48318

Amount of Each Disbursement this Period

3000.00
---------

Purpose of Disbursement  
Candidate Contribution  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 10

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
Castle Campaign Fund

Transaction ID: SB23.10280  
Date of Disbursement

Mailing Address PO Box 133

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	0	9

City State Zip Code  
Wilmington DE 19899-0133

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Candidate Contribution  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: DE District: 01

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
Charlie Dent for Congress

Transaction ID: SB23.10265  
Date of Disbursement

Mailing Address PO Box 442

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	0	9

City State Zip Code  
Allentown PA 18105

Amount of Each Disbursement this Period

3000.00
---------

Purpose of Disbursement  
Candidate Contribution  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: PA District: 15

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

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

7000.00
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**TOTAL** This Period (last page this line number only) .....

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Citizens for Tom Petri</p> <p>Mailing Address PO Box 270</p> <p>City Fond du Lac State WI Zip Code 54936-0270</p> <p>Purpose of Disbursement Candidate Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: WI District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10287</p> <p>Date of Disbursement 06 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Dave Camp For Congress 2010</p> <p>Mailing Address 5915 Eastman Avenue Suite 100</p> <p>City Midland State MI Zip Code 48640</p> <p>Purpose of Disbursement Candidate Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10275</p> <p>Date of Disbursement 06 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ehlers for Congress Committee</p> <p>Mailing Address PO Box 3340</p> <p>City Grand Rapids State MI Zip Code 49501</p> <p>Purpose of Disbursement Candidate Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10281</p> <p>Date of Disbursement 06 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7000.00
<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)

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

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NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Dave Reichert</p> <p>Mailing Address PO Box 53322</p> <p>City Bellevue State WA Zip Code 98015</p> <p>Purpose of Disbursement Candidate Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: WA District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10288</p> <p>Date of Disbursement 06 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Erik Paulsen</p> <p>Mailing Address P.O. Box 44369 250 Prairie Center Drive</p> <p>City Eden Prairie State MN Zip Code 55344</p> <p>Purpose of Disbursement Candidate Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MN District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10285</p> <p>Date of Disbursement 06 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Roy Blount</p> <p>Mailing Address PO Box 50100</p> <p>City Springfield State MO Zip Code 65805</p> <p>Purpose of Disbursement Candidate Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MO District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10272</p> <p>Date of Disbursement 06 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p>

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

7000.00

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

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NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Gerlach for Congress <hr/> Mailing Address PO Box 87 <hr/> City Uwchland State PA Zip Code 19480 <hr/> Purpose of Disbursement Candidate Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10266 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 4000.00
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Joseph Cao For Congress <hr/> Mailing Address PO Box 56156 <hr/> City New Orleans State LA Zip Code 70156 <hr/> Purpose of Disbursement Candidate Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10278 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph Cao For Congress <hr/> Mailing Address PO Box 56156 <hr/> City New Orleans State LA Zip Code 70156 <hr/> Purpose of Disbursement Candidate Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10294 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 9
	Amount of Each Disbursement this Period 4000.00
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	9000.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

A.	Full Name (Last, First, Middle Initial) Judy Biggert for Congress	Transaction ID: SB23.10264 Date of Disbursement 06 / 05 / 2009
	Mailing Address PO Box 637	Amount of Each Disbursement this Period 3000.00
	City Hinsdale State IL Zip Code 60522	
	Purpose of Disbursement Candidate Contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) LaTourette for Congress Committee	Transaction ID: SB23.10267 Date of Disbursement 06 / 05 / 2009
	Mailing Address 320 Kenarden Drive	Amount of Each Disbursement this Period 3000.00
	City Highland Hts State OH Zip Code 44143	
	Purpose of Disbursement Candidate Contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 14	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Lee Terry For Congress	Transaction ID: SB23.10263 Date of Disbursement 06 / 05 / 2009
	Mailing Address PO Box 540098	Amount of Each Disbursement this Period 2000.00
	City Omaha State NE Zip Code 68154	
	Purpose of Disbursement Candidate Contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

8000.00

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

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NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

A.	Full Name (Last, First, Middle Initial) LoBiondo For Congress	Transaction ID: SB23.10283 Date of Disbursement 06 / 24 / 2009
	Mailing Address P.O. Box 550	Amount of Each Disbursement this Period 1000.00
	City Vineland State NJ Zip Code 08362	
	Purpose of Disbursement Candidate Contribution	Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NJ District: 02	

B.	Full Name (Last, First, Middle Initial) Lynn Jenkins for Congress	Transaction ID: SB23.10282 Date of Disbursement 06 / 24 / 2009
	Mailing Address PO Box 1441	Amount of Each Disbursement this Period 1000.00
	City Topeka State KS Zip Code 66601	
	Purpose of Disbursement Candidate Contribution	Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: KS District: 02	

C.	Full Name (Last, First, Middle Initial) Richard Burr Committee	Transaction ID: SB23.10290 Date of Disbursement 06 / 24 / 2009
	Mailing Address PO Box 5928	Amount of Each Disbursement this Period 5000.00
	City Winston-Salem State NC Zip Code 27113	
	Purpose of Disbursement Candidate Contribution	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NC District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7000.00
<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)

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

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NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Simmons For Senate</p> <p>Mailing Address PO Box 268</p> <p>City Stonington State CT Zip Code 06378</p> <p>Purpose of Disbursement Candidate Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10292</p> <p>Date of Disbursement 06 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Steve Austria for Congress</p> <p>Mailing Address 20 South Limestone Street Suite 390</p> <p>City Springfield State OH Zip Code 45502</p> <p>Purpose of Disbursement Candidate Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 07</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10289</p> <p>Date of Disbursement 06 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Tiberi for Congress</p> <p>Mailing Address 2021 E Dublin Granville Road Suite 2000</p> <p>City Columbus State OH Zip Code 43229</p> <p>Purpose of Disbursement Candidate Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10298</p> <p>Date of Disbursement 06 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 3000.00</p>

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

9000.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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)  
Republican Mainstreet Partnership PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Tim Murphy for Congress</p> <p>Mailing Address PO Box 24551</p> <p>City Pittsburgh State PA Zip Code 15234</p> <p>Purpose of Disbursement Candidate Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: PA District: 18</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10284</p> <p>Date of Disbursement 06 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Upton for All of US</p> <p>Mailing Address PO Box 490 402 State Street</p> <p>City St. Joseph State MI Zip Code 49085</p> <p>Purpose of Disbursement Candidate Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10269</p> <p>Date of Disbursement 06 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Walden for Congress</p> <p>Mailing Address PO Box 1091</p> <p>City Hood River State OR Zip Code 97031</p> <p>Purpose of Disbursement Candidate Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OR District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10271</p> <p>Date of Disbursement 06 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>Category/ Type</p>

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

7000.00

**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)

PAGE 23 / 26

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

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NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

A.

Full Name (Last, First, Middle Initial)  
Whitfield for Congress Committee

Transaction ID: SB23.10270

Date of Disbursement

Mailing Address P.O. BOX 391

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	0	9

City State Zip Code  
Hopkinsville KY 42241

Amount of Each Disbursement this Period

3000.00
---------

Purpose of Disbursement  
Candidate Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: KY District: 01

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

3000.00
---------

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

6400.00
---------

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 24 / 26	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Johnson for Congress			Nature of Debt (Purpose): Refund of Excess Contribution
Mailing Address PO Box 1986			
City New Britain	State CT	ZIP Code 06050	

Outstanding Balance Beginning This Period		Transaction ID: SD9.8523	
2010.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	2010.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	2010.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	2010.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	2010.00



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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Capitol Hill Club			Nature of Debt (Purpose): Facilities/Catering
Mailing Address 300 First Street, SE			
City Washington	State DC	ZIP Code 20003	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID: SD10.10300</b>	
Amount Incurred This Period <input type="text" value="2327.03"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2327.03"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Caplin & Drysdale			Nature of Debt (Purpose): Legal Services
Mailing Address One Thomas Circle, NW			
City Washington	State DC	ZIP Code 20005	

Outstanding Balance Beginning This Period <input type="text" value="5283.49"/>		<b>Transaction ID: SD10.10226</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="5283.49"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Dickstein Shapiro LLP			Nature of Debt (Purpose): Legal Services
Mailing Address 1825 Eye Street, NW			
City Washington	State DC	ZIP Code 20006	

Outstanding Balance Beginning This Period <input type="text" value="817.50"/>		<b>Transaction ID: SD10.10156</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="817.50"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="2327.03"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 26 / 26
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 Republican Mainstreet Partnership PAC

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Gilbert & Wolfand, PC	Nature of Debt (Purpose): Accounting Services
Mailing Address 2201 Wisconsin Avenue, NW Suite 320	
City Washington State DC ZIP Code 20007	

Outstanding Balance Beginning This Period 2226.75	<b>Transaction ID:</b> SD10.10215	
Amount Incurred This Period 0.00	Payment This Period 2226.75	Outstanding Balance at Close of This Period 0.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Gilbert & Wolfand, PC	Nature of Debt (Purpose): Accounting Services
Mailing Address 2201 Wisconsin Avenue, NW Suite 320	
City Washington State DC ZIP Code 20007	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID:</b> SD10.10299	
Amount Incurred This Period 2427.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 2427.50

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor National Republican Congressional Committee	Nature of Debt (Purpose): Travel
Mailing Address 320 First Street	
City Washington State DC ZIP Code 20003	

Outstanding Balance Beginning This Period 1904.85	<b>Transaction ID:</b> SD10.10227	
Amount Incurred This Period 0.00	Payment This Period 1904.85	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	2427.50
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	4754.53
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	4754.53