

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (In full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

BLACK REPUBLICAN PAC

ADDRESS (number and street)

1155 - 15TH STREET, NW

(Check if address is changed)

SUITE 614

WASHINGTON

DC

20005

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

scott@FECreports.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2024786051

2. DATE

07 / 31 / 2007

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer

SCOTT B MACKENZIE

Signature of Treasurer

Date

07 / 31 / 2007

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

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5. TYPE OF COMMITTEE (Check One)

- (a)  This committee is a principal campaign committee. (Complete the candidate information below.)
- (b)  This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Candidate Party Affiliation  Office Sought:  House  Senate  President State  District

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

- (d)  This committee is a  (National, State (or subordinate) committee of the  (Democratic, Republican, etc.) Party.

- (e)  This committee is a separate segregated fund

- (f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

None

Mailing Address

CITY STATE ZIP CODE

Relationship

Type of Connected Organization:

- Corporation  Corporation w/o Capital Stock  Labor Organization
- Membership Organization  Trade Association  Cooperative

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Write or Type Committee Name

**BLACK REPUBLICAN PAC**

7. Custodian of Records: Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name **SCOTT B MACKENZIE**

Mailing Address **1155 - 15TH STREET, NW**  
**SUITE 614**  
**WASHINGTON DC 20005**

Title or Position **TREASURER** CITY **WASHINGTON** STATE **DC** ZIP CODE **20005**  
Telephone number **703 868 1776**

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer **SCOTT B MACKENZIE**

Mailing Address **1155 - 15TH STREET, NW**  
**SUITE 614**  
**WASHINGTON DC 20005**

Title or Position **TREASURER** CITY **WASHINGTON** STATE **DC** ZIP CODE **20005**  
Telephone number **703 868 1776**

Full Name of Designated Agent

Mailing Address

Title or Position CITY STATE ZIP CODE  
Telephone number

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9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

ACCESS NATIONAL BANK

Mailing Address

1800 ROBERT FULTON DR

RESTON

VA

22190

CITY Δ

STATE Δ

ZIP CODE Δ

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**Federal Election Commission  
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