

# 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  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

ADDRESS (number and street) 6623 10th Street  
B2  
 Check if different than previously reported. (ACC)  
Alexandria VA 22307

2. **FEC IDENTIFICATION NUMBER** C00043919  
**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 07 01 2008 through 09 30 2008

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 Dena Kozanas

Signature of Treasurer Electronically Filed by Dena Kozanas Date 10 15 2008

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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		4576.73
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	18452.89									
(c) Total Receipts (from Line 19) .....	9578.68	35349.57								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	28031.57	39926.30								
7. Total Disbursements (from Line 31) .....	6032.20	17926.93								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	21999.37	21999.37								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	4505.43	22791.32
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	4538.25	4538.25
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	9043.68	27329.57
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	35.00	830.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	9078.68	28159.57
12. Transfers From Affiliated/Other Party Committees .....	0.00	6690.00
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) .....	500.00	500.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	9578.68	35349.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9578.68	35349.57

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<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.....	6032.20	17926.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	6032.20	17926.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	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))..	6032.20	17926.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6032.20	17926.93

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	9078.68	28159.57
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9078.68	28159.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6032.20	17926.93
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	500.00	500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5532.20	17426.93

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 21

(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)  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

**A.**

Full Name (Last, First, Middle Initial)  
Erin Anderson

Mailing Address 2333 S. Ode Street

City State Zip Code  
Arlington VA 22202

FEC ID number of contributing federal political committee. C

Name of Employer Self-employed Occupation  
Border security analyst

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt M M / D D / Y Y Y Y  
09 / 25 / 2008

**Transaction ID:** SA11AI.4485

Amount of Each Receipt this Period 50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Helen R. Blackwell

Mailing Address 3128 17th Street North

City State Zip Code  
Arlington VA 22201-5202

FEC ID number of contributing federal political committee. C

Name of Employer Virginia Eagle Forum Occupation  
Freelance writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt M M / D D / Y Y Y Y  
07 / 08 / 2008

**Transaction ID:** SA11AI.4525

Amount of Each Receipt this Period 150.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Helen R. Blackwell

Mailing Address 3128 17th Street North

City State Zip Code  
Arlington VA 22201-5202

FEC ID number of contributing federal political committee. C

Name of Employer Virginia Eagle Forum Occupation  
Freelance writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt M M / D D / Y Y Y Y  
09 / 09 / 2008

**Transaction ID:** SA11AI.4424

Amount of Each Receipt this Period 200.00

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 7 / 21  
(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)  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Terry Coleman</p> <p>Mailing Address 3026 S. Buchanan Street</p> <p>City State Zip Code Arlington VA 22206</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Ropes &amp; Gray, LLP Occupation: Attorney</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">08 / 17 / 2008</span></p> <p><b>Transaction ID:</b> SA11AI.4388</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">300.00</span></p> <p>Contribution</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Vanice J. Famme</p> <p>Mailing Address 1507-A N. Colonial Terrace</p> <p>City State Zip Code Arlington VA 22209</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Self-Employed Occupation: Consultant</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 25 / 2008</span></p> <p><b>Transaction ID:</b> SA11AI.4492</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">300.00</span></p> <p>Contribution</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) David M. Foster</p> <p>Mailing Address 2607 N. Wakefield Street</p> <p>City State Zip Code Arlington VA 22207</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Fulbright &amp; Jaworski Occupation: Attorney</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">08 / 28 / 2008</span></p> <p><b>Transaction ID:</b> SA11AI.4433</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">200.00</span></p> <p>Contribution</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">800.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

**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 8 / 21
	<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)  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Giere	Date of Receipt MM / DD / YYYY 07 / 29 / 2008
	Mailing Address 2003 Miracle Lane	<b>Transaction ID:</b> SA11AI.4545
	City Falls Church State VA Zip Code 22043	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
	Name of Employer Wilmington Finance Occupation Mortgage broker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Karen D. Ginsberg	Date of Receipt MM / DD / YYYY 09 / 22 / 2008
	Mailing Address 6533 Gardenwick Road	<b>Transaction ID:</b> SA11AI.4480
	City Baltimore State MD Zip Code 21209	Amount of Each Receipt this Period 1250.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
	Name of Employer Dr. Ronald L. Ginsberg Occupation Office Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael E. Ginsberg	Date of Receipt MM / DD / YYYY 07 / 05 / 2008
	Mailing Address 1276 N. Wayne Street Apt. 408	<b>Transaction ID:</b> SA11AI.4394
	City Arlington State VA Zip Code 22201-5851	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	In-kind - E-Newsletter
	Name of Employer Arnold & Porter Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1305.89	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1320.00
<b>TOTAL</b> 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 / 21

(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)  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

**A.**

Full Name (Last, First, Middle Initial)  
Michael E. Ginsberg

Mailing Address 1276 N. Wayne Street  
Apt. 408

City State Zip Code  
Arlington VA 22201-5851

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Arnold & Porter Attorney

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1427.22

Date of Receipt MM / DD / YYYY  
07 / 27 / 2008

**Transaction ID:** SA11AI.4408

Amount of Each Receipt this Period 121.33

In-kind - Food

**B.**

Full Name (Last, First, Middle Initial)  
Michael E. Ginsberg

Mailing Address 1276 N. Wayne Street  
Apt. 408

City State Zip Code  
Arlington VA 22201-5851

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Arnold & Porter Attorney

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1447.22

Date of Receipt MM / DD / YYYY  
08 / 05 / 2008

**Transaction ID:** SA11AI.4396

Amount of Each Receipt this Period 20.00

In-kind - E-Newsletter

**C.**

Full Name (Last, First, Middle Initial)  
Michael E. Ginsberg

Mailing Address 1276 N. Wayne Street  
Apt. 408

City State Zip Code  
Arlington VA 22201-5851

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Arnold & Porter Attorney

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1467.22

Date of Receipt MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** SA11AI.4398

Amount of Each Receipt this Period 20.00

In-kind - E-Newsletter

**SUBTOTAL** of Receipts This Page (optional) ..... 161.33

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 21  
(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)  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Michael E. Ginsberg</p> <p>Mailing Address 1276 N. Wayne Street Apt. 408</p> <p>City State Zip Code Arlington VA 22201-5851</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Arnold &amp; Porter Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1540.89</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 06 / 2008</p> <p><b>Transaction ID:</b> SA11AI.4414</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">73.67</span></p> <p>In-kind - Food</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Michael E. Ginsberg</p> <p>Mailing Address 1276 N. Wayne Street Apt. 408</p> <p>City State Zip Code Arlington VA 22201-5851</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Arnold &amp; Porter Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1550.32</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 07 / 2008</p> <p><b>Transaction ID:</b> SA11AI.4417</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">9.43</span></p> <p>In-kind - Supplies</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Michael E. Ginsberg</p> <p>Mailing Address 1276 N. Wayne Street Apt. 408</p> <p>City State Zip Code Arlington VA 22201-5851</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Arnold &amp; Porter Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1571.32</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 07 / 2008</p> <p><b>Transaction ID:</b> SA11AI.4419</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">21.00</span></p> <p>In-kind - Food</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">104.10</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 11 / 21  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

**A.** Full Name (Last, First, Middle Initial)  
Dr. Ronald L. Ginsberg  
 Mailing Address 6533 Gardenwick Road  
 City State Zip Code  
 Baltimore MD 21209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00  
 Date of Receipt M M / D D / Y Y Y Y Y  
 07 24 2008  
**Transaction ID:** SA11AI.4522  
 Amount of Each Receipt this Period 1250.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
Matthew B. Kandrach  
 Mailing Address 3812 6th Road North  
 City State Zip Code  
 Arlington VA 22203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Republican Party of Virginia Occupation Grassroots Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00  
 Date of Receipt M M / D D / Y Y Y Y Y  
 09 27 2008  
**Transaction ID:** SA11AI.4478  
 Amount of Each Receipt this Period 250.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mark Kelly  
 Mailing Address 826 S. 31st Street  
 City State Zip Code  
 Arlington VA 22202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer US House of Representatives Occupation Staff Member  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00  
 Date of Receipt M M / D D / Y Y Y Y Y  
 09 25 2008  
**Transaction ID:** SA11AI.4484  
 Amount of Each Receipt this Period 50.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1550.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 12 / 21	
	(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"/> 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)  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert Neil Miller		Date of Receipt
	Mailing Address 4643 Lambert Drive		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Alexandria	VA	22311
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer DLA Piper		Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="370.00"/>	Transaction ID: SA11AI.4486
			Amount of Each Receipt this Period <input type="text" value="170.00"/>
			Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="170.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="4505.43"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 13 / 21	
	(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"/> 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)  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

<b>A.</b>	Full Name (Last, First, Middle Initial) EIGHTH DISTRICT CONSERVATIVE COALITION FOR DELEGATES		Date of Receipt
	Mailing Address 5616 BISMACH DRIVE #T2		<input type="text" value="07"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	ALEXANDRIA	VA	22312
	FEC ID number of contributing federal political committee.		<input type="text" value="C00447292"/>
Name of Employer		Occupation	Transaction ID: SA11C.4392 Amount of Each Receipt this Period <input type="text" value="35.00"/> Donation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="330.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="35.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="35.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 21
	(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"/> 14
<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

**A.**

Full Name (Last, First, Middle Initial) City of Alexandria		Date of Receipt
Mailing Address P.O. Box 178 City Hall		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 1 1 / 2 0 0 8
City	State	Zip Code
Alexandria	VA	22313
FEC ID number of contributing federal political committee.		Transaction ID: SA15.4510
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text"/> 500.00
Occupation		Rental Refund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text"/> 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 500.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 500.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 15 / 21

<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)  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Advantage, Inc.</p> <p>Mailing Address 2300 Clarendon Boulevard Suite 1004</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Survey Calls</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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.4400</p> <p>Date of Disbursement 08 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 273.95</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Advantage, Inc.</p> <p>Mailing Address 2300 Clarendon Boulevard Suite 1004</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Survey Phone Calls</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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.4401</p> <p>Date of Disbursement 08 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 190.50</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Advantage, Inc.</p> <p>Mailing Address 2300 Clarendon Boulevard Suite 1004</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Survey Phone Calls</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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.4402</p> <p>Date of Disbursement 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 546.35</p>

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

1010.80

**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)  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

A.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.4369
	Mailing Address 300 S. Washington Street	Date of Disbursement MM / DD / YYYY 08 / 04 / 2008
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 114.95
	Purpose of Disbursement Bank Fee 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) BB&T	Transaction ID: SB21B.4370
	Mailing Address 300 S. Washington Street	Date of Disbursement MM / DD / YYYY 08 / 04 / 2008
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 5.95
	Purpose of Disbursement Bank Fee 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) BB&T	Transaction ID: SB21B.4371
	Mailing Address 300 S. Washington Street	Date of Disbursement MM / DD / YYYY 08 / 21 / 2008
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 9.95
	Purpose of Disbursement Bank Fee 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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	130.85
<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)

PAGE 17 / 21

<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)  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

A.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.4367
	Mailing Address 300 S. Washington Street	Date of Disbursement 09 / 03 / 2008
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 15.00
	Purpose of Disbursement Bank Fee 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) BB&T	Transaction ID: SB21B.4368
	Mailing Address 300 S. Washington Street	Date of Disbursement 09 / 22 / 2008
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 17.95
	Purpose of Disbursement Bank Fee 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) Keith G. Damon	Transaction ID: SB21B.4411
	Mailing Address 5121 Pheasant Ridge Road	Date of Disbursement 07 / 27 / 2008
	City Fairfax State VA Zip Code 22030	Amount of Each Disbursement this Period 2560.00
	Purpose of Disbursement Tech Support 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>SUBTOTAL</b> of Disbursements This Page (optional) .....	2592.95
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 18 / 21

<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)  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

A.	Full Name (Last, First, Middle Initial) Michael E. Ginsberg	Transaction ID: SB21B.4395 Date of Disbursement 07 / 05 / 2008
	Mailing Address 1276 N. Wayne Street Apt. 408	Amount of Each Disbursement this Period 20.00
	City Arlington State VA Zip Code 22201-5851	
	Purpose of Disbursement In-kind - E-Newsletter 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) Michael E. Ginsberg	Transaction ID: SB21B.4409 Date of Disbursement 07 / 27 / 2008
	Mailing Address 1276 N. Wayne Street Apt. 408	Amount of Each Disbursement this Period 121.33
	City Arlington State VA Zip Code 22201-5851	
	Purpose of Disbursement In-kind - Food 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) Michael E. Ginsberg	Transaction ID: SB21B.4397 Date of Disbursement 08 / 05 / 2008
	Mailing Address 1276 N. Wayne Street Apt. 408	Amount of Each Disbursement this Period 20.00
	City Arlington State VA Zip Code 22201-5851	
	Purpose of Disbursement In-kind - E-Newsletter 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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	161.33
<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)

PAGE 19 / 21

<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)  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

A.	Full Name (Last, First, Middle Initial) Michael E. Ginsberg	Transaction ID: SB21B.4405 Date of Disbursement 08 / 31 / 2008
	Mailing Address 1276 N. Wayne Street Apt. 408	Amount of Each Disbursement this Period 167.85
	City Arlington State VA Zip Code 22201-5851	
	Purpose of Disbursement Reimbursement 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) Michael E. Ginsberg	Transaction ID: SB21B.4399 Date of Disbursement 09 / 05 / 2008
	Mailing Address 1276 N. Wayne Street Apt. 408	Amount of Each Disbursement this Period 20.00
	City Arlington State VA Zip Code 22201-5851	
	Purpose of Disbursement In-kind - E-Newsletter 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) Michael E. Ginsberg	Transaction ID: SB21B.4415 Date of Disbursement 09 / 06 / 2008
	Mailing Address 1276 N. Wayne Street Apt. 408	Amount of Each Disbursement this Period 73.67
	City Arlington State VA Zip Code 22201-5851	
	Purpose of Disbursement In-kind - Food 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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	261.52
<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)

PAGE 20 / 21

<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)  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

A.	Full Name (Last, First, Middle Initial) Michael E. Ginsberg	Transaction ID: SB21B.4418 Date of Disbursement 09 / 07 / 2008
	Mailing Address 1276 N. Wayne Street Apt. 408	Amount of Each Disbursement this Period 9.43
	City Arlington State VA Zip Code 22201-5851	
	Purpose of Disbursement In-kind - Supplies	Category/ Type
	Candidate Name	
	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) Michael E. Ginsberg	Transaction ID: SB21B.4420 Date of Disbursement 09 / 07 / 2008
	Mailing Address 1276 N. Wayne Street Apt. 408	Amount of Each Disbursement this Period 21.00
	City Arlington State VA Zip Code 22201-5851	
	Purpose of Disbursement In-kind - Food	Category/ Type
	Candidate Name	
	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) Lyon Village Community House	Transaction ID: SB21B.4473 Date of Disbursement 08 / 30 / 2008
	Mailing Address 1920 North Highland Street	Amount of Each Disbursement this Period 600.00
	City Arlington State VA Zip Code 22201	
	Purpose of Disbursement Facility Rental	Category/ Type
	Candidate Name	
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>630.43</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 21

<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)  
8TH DISTRICT REPUBLICAN COMMITTEE (VA)

<b>A.</b> Full Name (Last, First, Middle Initial) Politics and Prose Mailing Address 5015 Connecticut Avenue NW City Washington State DC Zip Code 20008 Purpose of Disbursement Book Purchase Candidate Name 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) ▼	Transaction ID: SB21B.4511 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 0 8
	Amount of Each Disbursement this Period 280.00
<b>B.</b> Full Name (Last, First, Middle Initial) Politics and Prose Mailing Address 5015 Connecticut Avenue NW City Washington State DC Zip Code 20008 Purpose of Disbursement Book Purchase Candidate Name 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) ▼	Transaction ID: SB21B.4512 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 620.00

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

900.00

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

5687.88