



A. Form/Schedule : **F3XA**

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	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		100293.39
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	277166.21									
(c) Total Receipts (from Line 19) .....	45770.78	303049.49								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	322936.99	403342.88								
7. Total Disbursements (from Line 31) .....	31824.71	112230.60								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	291112.28	291112.28								
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) .....	2115.00									

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  
Republican Mainstreet Partnership PAC

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	0.00	8000.00
(ii) Unitemized .....	250.00	965.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	250.00	8965.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	45500.00	294000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	45750.00	302965.00
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) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	20.78	84.49
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)) .....	45770.78	303049.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	45770.78	303049.49

**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.....	7824.71	38230.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	7824.71	38230.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24000.00	74000.00
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))..	31824.71	112230.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31824.71	112230.60

**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) .....	45750.00	302965.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	45750.00	302965.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7824.71	38230.60
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7824.71	38230.60

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 24  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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

NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

**A.** Full Name (Last, First, Middle Initial)  
American Gas Association Political Action Committee (GASPAC)

Mailing Address 400 N. Capital Street, NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00007450

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 04 / 14 / 2010  
**Transaction ID:** SA11C.10776  
Amount of Each Receipt this Period: 2500.00

**B.** Full Name (Last, First, Middle Initial)  
DLA Piper PAC

Mailing Address 500 8th Street, NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00151340

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt: 04 / 25 / 2010  
**Transaction ID:** SA11C.10786  
Amount of Each Receipt this Period: 3000.00

**C.** Full Name (Last, First, Middle Initial)  
Eli Lilly and Company Political Action Committee

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285

FEC ID number of contributing federal political committee. **C** C00082792

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 04 / 06 / 2010  
**Transaction ID:** SA11C.10771  
Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 24  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

**A.** Full Name (Last, First, Middle Initial)  
International Longshoremens's Association Committee On Political Education

Mailing Address 17 Battery Place  
Suite 930

City State Zip Code  
New York NY 10004

FEC ID number of contributing federal political committee. **C** C00158576

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	4	/	2	5	/	2	0	1	0

**Transaction ID:** SA11C.10784

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Laborers' Interntional Union of North American (LIUNA PAC)

Mailing Address 905 16th Street, NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00007922

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	4	/	0	5	/	2	0	1	0

**Transaction ID:** SA11C.10772

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
National Beer Wholesalers Association Political Action Committee (NBWA PAC)

Mailing Address 1101 King Street  
Suite 600

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00144766

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	4	/	1	2	/	2	0	1	0

**Transaction ID:** SA11C.10774

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15000.00**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 24
	<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) NeurosurgeryPAC		Date of Receipt
	Mailing Address 5550 Meadowbrook Court		<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Rolling Meadows	IL	60008
	FEC ID number of contributing federal political committee.		Transaction ID: SA11C.10779
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
		<input type="text" value="5000.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Norfolk Southern Corporation Good Government Fund		Date of Receipt
	Mailing Address Three Commercial Place		<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Norfolk	VA	23510
	FEC ID number of contributing federal political committee.		Transaction ID: SA11C.10780
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
		<input type="text" value="5000.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Political Educational Fund Of The BCTD		Date of Receipt
	Mailing Address 815 16th St., NW, Suite 600		<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20006
	FEC ID number of contributing federal political committee.		Transaction ID: SA11C.10777
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
		<input type="text" value="5000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="15000.00"/>
<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 10 / 24
	(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) Solar Energy Industries Association Inc. (SEIA PAC)		Date of Receipt
	Mailing Address 805 15th Street, NW Suite 510		<input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20005
	FEC ID number of contributing federal political committee.		<input type="text" value="C00421982"/>
	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="5000.00"/>	Transaction ID: SA11C.10781
			Amount of Each Receipt this Period <input type="text" value="5000.00"/>

<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="45500.00"/>

**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)

<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) American Express	Transaction ID: SB21B.10818 Date of Disbursement
	Mailing Address PO Box 1270	<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Newark State NJ Zip Code 07101-1270	Amount of Each Disbursement this Period
	Purpose of Disbursement See Memo Entries	<input type="text" value="2779.80"/>
	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) US Airways Inc.	Transaction ID: SB21B.10818.0 Date of Disbursement
	Mailing Address 4000 East Sky Harbor Blvd	<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Phoenix State AZ Zip Code 85034	Amount of Each Disbursement this Period
	Purpose of Disbursement Airline Tickets	<input type="text" value="1594.60"/>
	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) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Delta Air Lines, Inc.	Transaction ID: SB21B.10818.1 Date of Disbursement
	Mailing Address 140 East 45th Street	<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City New York State NY Zip Code 10017	Amount of Each Disbursement this Period
	Purpose of Disbursement Airline Tickets	<input type="text" value="1185.20"/>
	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) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2779.80"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

<input 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) American Express	Transaction ID: SB21B.10821 Date of Disbursement
	Mailing Address PO Box 1270	<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City Newark State NJ Zip Code 07101-1270	Amount of Each Disbursement this Period
	Purpose of Disbursement See Memo Entry	<input type="text" value="2008.64"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Capitol Hill Club	Transaction ID: SB21B.10821.0 Date of Disbursement
	Mailing Address 300 First Street, SE	<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Facilities/Catering	<input type="text" value="2008.64"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Gilbert & Wolfand, PC	Transaction ID: SB21B.10788 Date of Disbursement
	Mailing Address 2201 Wisconsin Avenue, NW Suite 320	<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20007	Amount of Each Disbursement this Period
	Purpose of Disbursement Accounting Services	<input type="text" value="3031.00"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5039.64"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 24

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

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NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

A.

Full Name (Last, First, Middle Initial)  
Suntrust Bank

Mailing Address PO Box 85024

City Richmond State VA Zip Code 23285-5024

Purpose of Disbursement  
Bank Service Charges

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.10823

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.27

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

5.27

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

7824.71

**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)  
Bartlett for Congress Committee

Mailing Address P.O. Box 245

City Middletown State MD Zip Code 21769

Purpose of Disbursement  
Candidate Contribution  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: MD District: 06  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB23.10791  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

Mailing Address PO Box 182152

City Shelby Township State MI Zip Code 48318

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) ▼

**Transaction ID:** SB23.10803  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

Mailing Address PO Box 442

City Allentown State PA Zip Code 18105

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) ▼

**Transaction ID:** SB23.10797  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**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 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)  
Chris Lee for Congress

Transaction ID: SB23.10801  
Date of Disbursement

Mailing Address PO Box 15395

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	0

City Rochester State NY Zip Code 14615

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Candidate Contribution  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NY District: 26

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
Citizens for Tom Petri

Transaction ID: SB23.10805  
Date of Disbursement

Mailing Address PO Box 270

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	0

City Fond du Lac State WI Zip Code 54936-0270

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Candidate Contribution  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WI District: 06

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
Djou for Hawaii

Transaction ID: SB23.10815  
Date of Disbursement

Mailing Address PO Box 235280

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	0

City Honolulu State HI Zip Code 96823

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Candidate Contribution  
Candidate Name

Category/  
Type

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

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼  
Special Election

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

3500.00
---------

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)

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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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Frelinghuysen For Congress</p> <p>Mailing Address 19 Cattano Avenue</p> <p>City Morristown State NJ Zip Code 07960</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: NJ District: 11</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> SB23.10798</p> <p>Date of Disbursement 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</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> SB23.10806</p> <p>Date of Disbursement 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Frank Wolf</p> <p>Mailing Address PO Box 221585</p> <p>City Chantilly State VA Zip Code 20153</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: VA District: 10</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> SB23.10813</p> <p>Date of Disbursement 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1500.00
<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Friends of Ginny Brown-Waite  Mailing Address PO Box 865  City Brooksville State FL Zip Code 34605  Purpose of Disbursement Candidate Contributions Candidate Name  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 05  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.10794 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0	Amount of Each Disbursement this Period 500.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Heacock for Congress  Mailing Address 2560 Pebble Brook Drive SE  City Grand Rapids State MI Zip Code 49546  Purpose of Disbursement Candidate Contribution Candidate Name  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 03  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.10816 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period 5000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Joseph Cao For Congress  Mailing Address PO Box 56156  City New Orleans State LA Zip Code 70156  Purpose of Disbursement Candidate Contribution Candidate Name  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 02  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.10796 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0	Amount of Each Disbursement this Period 500.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6000.00
<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

<b>A.</b> Full Name (Last, First, Middle Initial) Judy Biggert for Congress <hr/> Mailing Address PO Box 637 <hr/> City Hinsdale State IL Zip Code 60522 <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: IL District: 13 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10792 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Lance for Congress <hr/> Mailing Address PO Box 225 <hr/> City Colonia State NJ Zip Code 07067 <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: NJ District: 07 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10800 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) LoBiondo For Congress <hr/> Mailing Address P.O. Box 550 <hr/> City Vineland State NJ Zip Code 08362 <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: NJ District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10802 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Category/ Type

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

1500.00

**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)

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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)  
Lynn Jenkins for Congress

Transaction ID: SB23.10799  
Date of Disbursement

Mailing Address PO Box 1441

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	0

City Topeka State KS Zip Code 66601

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Candidate Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: KS District: 02

B.

Full Name (Last, First, Middle Initial)  
Mary Bono Mack Committee

Transaction ID: SB23.10793  
Date of Disbursement

Mailing Address PO Box 3370

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	0

City Palm Springs State CA Zip Code 92263

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Candidate Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: CA District: 45

C.

Full Name (Last, First, Middle Initial)  
Shelley Moore Capito for Congress

Transaction ID: SB23.10795  
Date of Disbursement

Mailing Address P.O. Box 11519

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	0

City Charleston State WV Zip Code 25339

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Candidate Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: WV District: 02

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

1500.00

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

<p><b>A.</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</p> <p>State: OH District: 07</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10790</p> <p>Date of Disbursement 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>B.</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</p> <p>State: OH District: 12</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10807</p> <p>Date of Disbursement 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>C.</b> 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> SB23.10804</p> <p>Date of Disbursement 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>

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

1500.00

**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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Turner For Congress</p> <p>Mailing Address 131 N. Ludlow Street, Suite 317</p> <p>City Dayton State OH Zip Code 45402</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: OH 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> SB23.10808</p> <p>Date of Disbursement 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>B.</b> 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10809</p> <p>Date of Disbursement 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>C.</b> 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10810</p> <p>Date of Disbursement 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1500.00
<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

<b>A.</b> Full Name (Last, First, Middle Initial) Whitfield for Congress Committee Mailing Address P.O. BOX 391 City Hopkinsville State KY Zip Code 42241 Purpose of Disbursement Candidate Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10811 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Wicker for Senate Mailing Address PO Box 64 City Jackson State MS Zip Code 39205 Purpose of Disbursement Candidate Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10812 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5500.00
<b>TOTAL</b> This Period (last page this line number only) .....	24000.00

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 23 / 24	
	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		<b>Transaction ID: SD9.8523</b>	
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)	PAGE 24 / 24
	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 State ZIP Code Washington DC 20007	

Outstanding Balance Beginning This Period <input type="text" value="3031.00"/>	<b>Transaction ID: SD10.10766</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3031.00"/>	Outstanding Balance at Close of This Period <input type="text" value="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 State ZIP Code Washington DC 20007	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID: SD10.10824</b>	
Amount Incurred This Period <input type="text" value="2115.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2115.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="2115.00"/>
2) <b>TOTALS</b> This Period (last page this line number only).....	<input type="text" value="2115.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="2115.00"/>