



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Republican Member Senate Fund

Report Covering the Period: From: 

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	2

D	D
3	1

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		2080.36
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	86237.20									
(c) Total Receipts (from Line 19) .....	30320.25	974832.54								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	116557.45	976912.90								
7. Total Disbursements (from Line 31) .....	49956.68	910312.13								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	66600.77	66600.77								
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) .....	46627.85									

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 Member Senate Fund

Report Covering the Period: From: 

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	2

D	D
3	1

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	9446.75	375775.70
(i) Itemized (use Schedule A) .....	20873.50	594056.84
(ii) Unitemized .....	30320.25	969832.54
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	30320.25	969832.54
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	5000.00
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)) .....	30320.25	974832.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	30320.25	974832.54

**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.....	49956.68	786610.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	49956.68	786610.83
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	113999.99
24. Independent Expenditure (use Schedule E) .....	0.00	9701.31
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))..	49956.68	910312.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	49956.68	910312.13

**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) .....	30320.25	969832.54
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	30320.25	969832.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	49956.68	786610.83
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	49956.68	786610.83

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

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

FOR LINE NUMBER: PAGE 6 / 33

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

**A.**

Full Name (Last, First, Middle Initial)  
MS MARY EMMA ARMSTRONG

Mailing Address 7605 MEADOW LN

City State Zip Code  
CHEVY CHASE MD 20815

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 316.75

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.41129

Amount of Each Receipt this Period  
116.75

**B.**

Full Name (Last, First, Middle Initial)  
MISS MARYANN BARILLARO

Mailing Address 130 WATER ST APT 1A

City State Zip Code  
NEW YORK NY 10005

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.41007

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS MARGARET BERNHEIM

Mailing Address PO BOX 6928

City State Zip Code  
BEND OR 97708

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

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

Transaction ID: SA11AI.41665

Amount of Each Receipt this Period  
160.00

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

376.75

**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 7 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

**A.** Full Name (Last, First, Middle Initial)  
MR JAMES BITNER

Mailing Address PO BOX 610

City State Zip Code  
ROCKPORT ME 04856

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 2 2 / 2 0 0 8

**Transaction ID:** SA11AI.40962

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
MR PHIL BRANDIS

Mailing Address 9813 NW VIEW COVES DR

City State Zip Code  
KANSAS CITY MO 64152

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

Name of Employer Occupation  
BAYER ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 8

**Transaction ID:** SA11AI.41700

Amount of Each Receipt this Period  
10.00

**C.** Full Name (Last, First, Middle Initial)  
MR JOHN BREWER

Mailing Address 7 LAKE OGLETHORPE DR

City State Zip Code  
ARNOLDSVILLE GA 30619

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

Name of Employer Occupation  
UNIVERSITY OF GEORGIA PROFESSOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 2 9 / 2 0 0 8

**Transaction ID:** SA11AI.41186

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **710.00**

**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 / 33  
(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)  
Republican Member Senate Fund

**A.**

Full Name (Last, First, Middle Initial) MR JAMES BRIGHAM		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	8		2	0	0	8													
Mailing Address 24 WATER OAK DR		<b>Transaction ID:</b> SA11AI.41168																				
City HILTON HEAD	State SC	Zip Code 29928																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>100.00</td></tr> </table>	100.00																			
100.00																						
Name of Employer REQUESTED	Occupation REQUESTED																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>400.00</td></tr> </table>	400.00																				
400.00																						

**B.**

Full Name (Last, First, Middle Initial) VITO CAPRIO		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		2	2		2	0	0	8													
Mailing Address PO BOX 1204		<b>Transaction ID:</b> SA11AI.41844																				
City NASHUA	State NH	Zip Code 03061																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>50.00</td></tr> </table>	50.00																			
50.00																						
Name of Employer NONE	Occupation RETIRED																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>350.00</td></tr> </table>	350.00																				
350.00																						

**C.**

Full Name (Last, First, Middle Initial) MR WALTER H COBBS, JR		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		2	5		2	0	0	8													
Mailing Address 216 PARKWOOD AVE		<b>Transaction ID:</b> SA11AI.41717																				
City SALEM	State VA	Zip Code 24153																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>30.00</td></tr> </table>	30.00																			
30.00																						
Name of Employer REQUESTED	Occupation REQUESTED																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>210.00</td></tr> </table>	210.00																				
210.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1" style="width: 100%;"> <tr><td>180.00</td></tr> </table>	180.00
180.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td></tr> </table>	

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

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

FOR LINE NUMBER: PAGE 9 / 33  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

**A.** Full Name (Last, First, Middle Initial)  
MR THOMAS COURTNEY

Mailing Address 906 PEBBLEBROOK DR

City ALLEN State TX Zip Code 75002

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 12 / 05 / 2008  
**Transaction ID:** SA11AI.41466  
 Amount of Each Receipt this Period 35.00

**B.** Full Name (Last, First, Middle Initial)  
MR NELSON COX

Mailing Address 1617 MONTGOMERY AVE

City ASHLAND State KY Zip Code 41101

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 12 / 23 / 2008  
**Transaction ID:** SA11AI.41259  
 Amount of Each Receipt this Period 30.00

**C.** Full Name (Last, First, Middle Initial)  
MR ORIN CURRIE

Mailing Address 106 FLEETWOOD PL

City BARTLESVILLE State OK Zip Code 74006

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 12 / 01 / 2008  
**Transaction ID:** SA11AI.41461  
 Amount of Each Receipt this Period 55.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 120.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

**A.**

Full Name (Last, First, Middle Initial) MRS LOIS M DAVIS		Date of Receipt
Mailing Address 89 OAK MOUNTAIN TRL		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 5 / 2 0 0 8
City State Zip Code CARROLLTON GA 30116		<b>Transaction ID:</b> SA11AI.41178
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer NONE	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

**B.**

Full Name (Last, First, Middle Initial) MRS SUSAN W DULIN		Date of Receipt
Mailing Address 2405 COUNTY ROAD 501		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 2 9 / 2 0 0 8
City State Zip Code BAYFIELD CO 81122		<b>Transaction ID:</b> SA11AI.41519
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer NONE	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

**C.**

Full Name (Last, First, Middle Initial) MR BREWSTER DURKEE		Date of Receipt
Mailing Address 5027 RIVER POINT RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 0 2 / 2 0 0 8
City State Zip Code JACKSONVILLE FL 32207		<b>Transaction ID:</b> SA11AI.41194
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1350.00</b>
<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: (check only one)	PAGE 11 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

**A.** Full Name (Last, First, Middle Initial)  
MR HAL A ENGER

Mailing Address 3840 CADDEN WAY

City SAN DIEGO State CA Zip Code 92117

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 12 / 29 / 2008  
Transaction ID: SA11AI.41585  
Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
MR CHARLES V FINELL

Mailing Address 402 W CARMEL VALLEY RD

City CARMEL VALLEY State CA Zip Code 93924

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 12 / 01 / 2008  
Transaction ID: SA11AI.41614  
Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
MRS GENEVA FINLAYSON

Mailing Address 7700 LAMPSON AVE SPC 75

City GARDEN GROVE State CA Zip Code 92841

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 11 / 25 / 2008  
Transaction ID: SA11AI.41829  
Amount of Each Receipt this Period: 75.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 425.00

**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 / 33  
(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)  
Republican Member Senate Fund

**A.**

Full Name (Last, First, Middle Initial)  
Joel Fischer

Mailing Address 46595 E Eldorado

City State Zip Code  
Indian Wells CA 92210

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 8 / 2 0 0 8

**Transaction ID:** SA11AI.41590

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
MR LARRY P FRIEND

Mailing Address 1639 N BURNS ST

City State Zip Code  
WICHITA KS 67203

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 0 8

**Transaction ID:** SA11AI.41878

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
MR ROBERT GANNETT

Mailing Address 619 PLEASANT VALLEY RD

City State Zip Code  
BRATTLEBORO VT 05301

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 0 8

**Transaction ID:** SA11AI.40963

Amount of Each Receipt this Period  
250.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

**A.** Full Name (Last, First, Middle Initial)  
MR PHILIP O GEIER, JR

Mailing Address 6000 REDBIRD HOLLOW LN

City CINCINNATI State OH Zip Code 45243

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 08 / 2008  
Transaction ID: SA11AI.41277  
Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
MR PHILIP O GEIER, JR

Mailing Address 6000 REDBIRD HOLLOW LN

City CINCINNATI State OH Zip Code 45243

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 12 / 22 / 2008  
Transaction ID: SA11AI.41276  
Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
MR PETER R HARADAR

Mailing Address 2100 S 260TH ST APT N101

City DES MOINES State WA Zip Code 98198

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 12 / 08 / 2008  
Transaction ID: SA11AI.41674  
Amount of Each Receipt this Period: 15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 215.00

**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 14 / 33
	<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)  
Republican Member Senate Fund

**A.** Full Name (Last, First, Middle Initial)  
Anne Harper

Mailing Address 85 Scottsdale Dr

City State Zip Code  
Troy MI 48084

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

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      202.00

Date of Receipt  
MM / DD / YYYY  
12 / 01 / 2008

**Transaction ID:** SA11AI.41299

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Anne Harper

Mailing Address 85 Scottsdale Dr

City State Zip Code  
Troy MI 48084

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

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      302.00

Date of Receipt  
MM / DD / YYYY  
12 / 18 / 2008

**Transaction ID:** SA11AI.41298

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR JAIME HERNANDEZ

Mailing Address 2200 S ISABELLA AVE

City State Zip Code  
MONTEREY PARK CA 91754

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

Name of Employer LAUSD      Occupation TEACHER

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  
MM / DD / YYYY  
12 / 03 / 2008

**Transaction ID:** SA11AI.41577

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **300.00**

**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 15 / 33  
(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)  
Republican Member Senate Fund

**A.**

Full Name (Last, First, Middle Initial)  
Ruth Hiatt

Mailing Address 610 W Mai St

City Danville State IN Zip Code 46122

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 12 / 09 / 2008  
**Transaction ID:** SA11AI.41285  
 Amount of Each Receipt this Period: 50.00

**B.**

Full Name (Last, First, Middle Initial)  
MR JAMES HOUSTON

Mailing Address 345 N VIA LAS PALMAS

City PALM SPRINGS State CA Zip Code 92262

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 12 / 29 / 2008  
**Transaction ID:** SA11AI.41591  
 Amount of Each Receipt this Period: 1000.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS CONSTANCE D HUNTER

Mailing Address 4329 S ATLANTIC AVE

City PONCE INLET State FL Zip Code 32127

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 12 / 02 / 2008  
**Transaction ID:** SA11AI.41192  
 Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1100.00

**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 16 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

**A.** Full Name (Last, First, Middle Initial)  
MR MICHAEL HURT

Mailing Address PO BOX 8084

City State Zip Code  
AMARILLO TX 79114

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 0 8

**Transaction ID:** SA11AI.41820

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
MRS REBECCA P IVANS

Mailing Address 807 LA JOLLA RANCHO RD

City State Zip Code  
LA JOLLA CA 92037

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 3 / 2 0 0 8

**Transaction ID:** SA11AI.41584

Amount of Each Receipt this Period  
80.00

**C.** Full Name (Last, First, Middle Initial)  
MRS MARIAN JENSEN

Mailing Address 171 3RD AVE APT 612

City State Zip Code  
SALT LAKE CITY UT 84103

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 0 8

**Transaction ID:** SA11AI.41526

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **180.00**

**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 17 / 33  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

**A.** Full Name (Last, First, Middle Initial)  
Jacqueline Keith  
Mailing Address 5602 Lockwood  
City State Zip Code  
Cheverly MD 20785  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 203.00  
Date of Receipt 12 / 15 / 2008  
Transaction ID: SA11AI.41126  
Amount of Each Receipt this Period 35.00

**B.** Full Name (Last, First, Middle Initial)  
MR DONALD E KELLEY  
Mailing Address 221 E ROCKWOOD BLVD APT 320  
City State Zip Code  
SPOKANE WA 99202  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 476.00  
Date of Receipt 12 / 24 / 2008  
Transaction ID: SA11AI.41687  
Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
MR WILLIAM R KENDALL  
Mailing Address 255 AMOUR CIR  
City State Zip Code  
BLUE BELL PA 19422  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SELF Occupation ATTORNEY  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 800.00  
Date of Receipt 11 / 26 / 2008  
Transaction ID: SA11AI.41839  
Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 285.00  
**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 18 / 33

(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)  
Republican Member Senate Fund

**A.**

Full Name (Last, First, Middle Initial)  
MR DALLAS L KRAPP

Mailing Address 407 JACOBS CT

City State Zip Code  
EXTON PA 19341

FEC ID number of contributing federal political committee. C

Name of Employer Requested Occupation Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt M M / D D / Y Y Y Y  
12 / 15 / 2008

**Transaction ID:** SA11AI.41108

Amount of Each Receipt this Period 200.00

**B.**

Full Name (Last, First, Middle Initial)  
MR CARL KROENING

Mailing Address 999 41ST AVE NE APT 302

City State Zip Code  
MINNEAPOLIS MN 55421

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt M M / D D / Y Y Y Y  
12 / 01 / 2008

**Transaction ID:** SA11AI.41350

Amount of Each Receipt this Period 50.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Lambert

Mailing Address 5674 Ashland Ave

City State Zip Code  
San Diego CA 92120

FEC ID number of contributing federal political committee. C

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt M M / D D / Y Y Y Y  
12 / 04 / 2008

**Transaction ID:** SA11AI.41588

Amount of Each Receipt this Period 35.00

**SUBTOTAL** of Receipts This Page (optional) ..... 285.00

**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 19 / 33
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

**A.** Full Name (Last, First, Middle Initial)  
MR ATLAS T LANGFORD

Mailing Address 1834 MANDISON ST  
# J69

City State Zip Code  
CLARKSVILLE TN 37043

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.41239

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
MR ERNEST LEZOCHÉ

Mailing Address 2722 N 22ND ST

City State Zip Code  
PHILADELPHIA PA 19132

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.41107

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
MR WILBURN L LUNA

Mailing Address 1720 S 3135 W

City State Zip Code  
VERNAL UT 84078

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.41523

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 275.00

**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 20 / 33  
(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)  
Republican Member Senate Fund

**A.**

Full Name (Last, First, Middle Initial)  
MR WILBURN L LUNA

Mailing Address 1720 S 3135 W

City State Zip Code  
VERNAL UT 84078

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 8

**Transaction ID:** SA11AI.41524

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS ANN MACTIER

Mailing Address 3811 N POST RD

City State Zip Code  
OMAHA NE 68112

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 0 8

**Transaction ID:** SA11AI.41748

Amount of Each Receipt this Period  
150.00

**C.**

Full Name (Last, First, Middle Initial)  
MR MICHAEL B MAY

Mailing Address 3304 RHODES AVE

City State Zip Code  
NEW BOSTON OH 45662

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 8

**Transaction ID:** SA11AI.41845

Amount of Each Receipt this Period  
100.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

**A.**

Full Name (Last, First, Middle Initial)  
MR PAUL MCGOLDRICK

Mailing Address 106 MAIN ST

City LITTLETON State NH Zip Code 03561

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

Name of Employer REQUESTED Occupation SALESMAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 18 / 2008

Transaction ID: SA11AI.41697

Amount of Each Receipt this Period 50.00

**B.**

Full Name (Last, First, Middle Initial)  
MR CALVIN OLIVER

Mailing Address 1722 TANNER BRIDGE RD

City JEFFERSON CITY State MO Zip Code 65101

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

Name of Employer Requested Occupation Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 386.00

Date of Receipt 12 / 09 / 2008

Transaction ID: SA11AI.41406

Amount of Each Receipt this Period 20.00

**C.**

Full Name (Last, First, Middle Initial)  
MS CLAIRE L RAINS

Mailing Address 420 41ST AVE

City SAN FRANCISCO State CA Zip Code 94121

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 01 / 2008

Transaction ID: SA11AI.41751

Amount of Each Receipt this Period 30.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 100.00

**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 22 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) DR K DEAN REEVES, MD		Date of Receipt MM / DD / YYYY 12 / 22 / 2008		
	Mailing Address 4740 EL MONTE ST		<b>Transaction ID:</b> SA11AI.41414		
	City SHAWNEE MISSION	State KS	Zip Code 66205	Amount of Each Receipt this Period 150.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer SELF EMPLOYED	Occupation PHYSICIAN			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) MR WILLIAM B RICE		Date of Receipt MM / DD / YYYY 11 / 26 / 2008		
	Mailing Address 6910 HOPEFUL RD #2112		<b>Transaction ID:</b> SA11AI.41257		
	City FLORENCE	State KY	Zip Code 41042	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer REQUESTED	Occupation REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) MR THOMAS C RIGLER		Date of Receipt MM / DD / YYYY 12 / 18 / 2008		
	Mailing Address 104 TWIN OAKS DR		<b>Transaction ID:</b> SA11AI.41633		
	City LOS GATOS	State CA	Zip Code 95032	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NONE	Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	290.00
<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: (check only one)	PAGE 23 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

**A.**

Full Name (Last, First, Middle Initial)  
MR EDWARD B ROGERS, JR

Mailing Address 511 1ST ST

City State Zip Code  
CORONADO CA 92118

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

Name of Employer Requested Occupation Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 0 8

**Transaction ID:** SA11AI.41587

Amount of Each Receipt this Period  
150.00

**B.**

Full Name (Last, First, Middle Initial)  
ANNA P RUSSELL

Mailing Address 268 WOODLANDS DR

City State Zip Code  
VERONA PA 15147

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 6 / 2 0 0 8

**Transaction ID:** SA11AI.41052

Amount of Each Receipt this Period  
35.00

**C.**

Full Name (Last, First, Middle Initial)  
Alyce Schlech

Mailing Address 611 NE Alsbury Blvd

City State Zip Code  
Burleson TX 76028

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 0 8

**Transaction ID:** SA11AI.41476

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 210.00

**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 24 / 33  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

**A.** Full Name (Last, First, Middle Initial)  
MR THOMAS SCHULSTAD

Mailing Address PO BOX 279

City State Zip Code  
EDMONDS WA 98020

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

Name of Employer Requested Occupation Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 0 8

**Transaction ID:** SA11AI.41667

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
MR. JAMES J SHEA, JR

Mailing Address 70168 SONORA RD

City State Zip Code  
RANCHO MIRAGE CA 92270

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 4 / 2 0 0 8

**Transaction ID:** SA11AI.41592

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR JAMES W SHIELDS

Mailing Address 15115 INTERLACHEN DR APT 507

City State Zip Code  
SILVER SPRING MD 20906

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 5 / 2 0 0 8

**Transaction ID:** SA11AI.41130

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **650.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 33
	<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)  
Republican Member Senate Fund

**A.** Full Name (Last, First, Middle Initial)  
Jerry Simpson

Mailing Address 210 E Lisburn Rd

City Mechanicsburg State PA Zip Code 17055

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

Name of Employer Requested Occupation Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 31 / 2008

Transaction ID: SA11AI.41073

Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
Beverly Smith

Mailing Address 337 Marcy St

City West Babylon State NY Zip Code 11704

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

Name of Employer Requested Occupation Requested  
VA H NORTHPORT NY RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 526.00

Date of Receipt 11 / 25 / 2008

Transaction ID: SA11AI.41031

Amount of Each Receipt this Period 200.00

**C.** Full Name (Last, First, Middle Initial)  
Helen Smith

Mailing Address 5954 Country Rd X40

City Anamosa State IA Zip Code 52205

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

Name of Employer Requested Occupation Requested  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 735.00

Date of Receipt 12 / 29 / 2008

Transaction ID: SA11AI.41329

Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 275.00

**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 26 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

**A.** Full Name (Last, First, Middle Initial)  
MR A B STILL

Mailing Address PO BOX 312

City State Zip Code  
DRUMRIGHT OK 74030

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

Name of Employer NONE Occupation SELF EMPLOYED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 8

**Transaction ID:** SA11AI.41463

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
MRS JOHN STRASENBURG

Mailing Address PO BOX 608

City State Zip Code  
OCEAN VIEW NJ 08230

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 4 / 2 0 0 8

**Transaction ID:** SA11AI.41005

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
MRS JOHN STRASENBURG

Mailing Address PO BOX 608

City State Zip Code  
OCEAN VIEW NJ 08230

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 3 / 2 0 0 8

**Transaction ID:** SA11AI.41004

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **550.00**

**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 27 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) MRS DONNA MAE STROEING		Date of Receipt	
	Mailing Address 1103 33RD AVE N		M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.41356
	SAINT CLOUD	MN	56303	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
Name of Employer REQUESTED		Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) MRS DONNA MAE STROEING		Date of Receipt	
	Mailing Address 1103 33RD AVE N		M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.41357
	SAINT CLOUD	MN	56303	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
Name of Employer REQUESTED		Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) MR GLENN W THOMPSON		Date of Receipt	
	Mailing Address 2874 CRESTHILL DR		M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.41544
	BULLHEAD CITY	AZ	86442	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		53.00	
Name of Employer NONE		Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 226.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	153.00
<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 28 / 33

(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)  
Republican Member Senate Fund

**A.**

Full Name (Last, First, Middle Initial)  
MR NORMAN W THOMS

Mailing Address 5420 SE 37TH ST

City State Zip Code  
TECUMSEH KS 66542

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

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

Transaction ID: SA11AI.41419

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
MR NORMAN W THOMS

Mailing Address 5420 SE 37TH ST

City State Zip Code  
TECUMSEH KS 66542

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 235.00

Date of Receipt

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

Transaction ID: SA11AI.41418

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
MR WILBUR A TINTELNOT

Mailing Address 2321 ALLENDER AVE

City State Zip Code  
PITTSBURGH PA 15220

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 205.00

Date of Receipt

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

Transaction ID: SA11AI.41733

Amount of Each Receipt this Period  
20.00

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

65.00

**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 29 / 33  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

**A.** Full Name (Last, First, Middle Initial)  
MR GEORGE C TOSTEVIN

Mailing Address 12555 37TH AVE NE

City State Zip Code  
SEATTLE WA 98125

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 877.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 8 / 2 0 0 8

**Transaction ID:** SA11AI.41671

Amount of Each Receipt this Period  
151.00

**B.** Full Name (Last, First, Middle Initial)  
MR GEORGE C TOSTEVIN

Mailing Address 12555 37TH AVE NE

City State Zip Code  
SEATTLE WA 98125

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1028.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 3 / 2 0 0 8

**Transaction ID:** SA11AI.41672

Amount of Each Receipt this Period  
151.00

**C.** Full Name (Last, First, Middle Initial)  
Maurice Willis

Mailing Address PO Box 471451

City State Zip Code  
Lake Monroe FL 32747

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 0 8

**Transaction ID:** SA11AI.41198

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **502.00**

**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 30 / 33	
	(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)  
Republican Member Senate Fund

**A.** Full Name (Last, First, Middle Initial)  
MR PETER F WILSON

Mailing Address 453 CARMARGUE LN

City	State	Zip Code
BILOXI	MS	39531

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

Name of Employer BANCORP SOUTH	Occupation FINANCIAL SERVICES
-----------------------------------	----------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt

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

Transaction ID: SA11AI.41806

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	9446.75

# 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 Member Senate Fund

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) BMW Direct Inc</p> <p>Mailing Address 1155 15th Street NW Ste 614</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Quarterly fee-for no specific candidate</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.42029</p> <p>Date of Disbursement 12 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 39056.68</p> <p>003 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) COLLEGE REPUBLICANS</p> <p>Mailing Address 600 PENNSYLVANIA STE 215</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement CONSULTING</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.40952</p> <p>Date of Disbursement 12 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>001 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) GREAT LAKES TRAVEL</p> <p>Mailing Address 5751 BYRON CENTER AVE STE U-52</p> <p>City WYOMING State MI Zip Code 49509</p> <p>Purpose of Disbursement VOLUNTEER TRAVEL</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.40947</p> <p>Date of Disbursement 11 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 6400.00</p> <p>002 Category/ Type</p>

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

47956.68

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 33

<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 Member Senate Fund

A.

Full Name (Last, First, Middle Initial)  
Sage Consultants, LLC

Transaction ID: SB21B.40950  
Date of Disbursement

Mailing Address 2870 Dobie Rd

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

City State Zip Code  
Mason MI 48854

Amount of Each Disbursement this Period

2000.00
---------

Purpose of Disbursement  
CONSULTING

001
-----

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

2000.00
---------

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

49956.68
----------

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Republican Member Senate Fund

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor BMW Direct Inc	Nature of Debt (Purpose): Fundraising and solicitation
Mailing Address 1155 15th Street NW Ste 614	
City Washington State DC ZIP Code 20005	

Outstanding Balance Beginning This Period 32855.57	<b>Transaction ID: SD10.14211</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 32855.57

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor BMW Direct Inc	Nature of Debt (Purpose): fundraising and solicitation
Mailing Address 1155 15th Street NW Ste 614	
City Washington State DC ZIP Code 20005	

Outstanding Balance Beginning This Period 13772.28	<b>Transaction ID: SD10.30143</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 13772.28

1) <b>SUBTOTALS</b> This Period This Page (optional).....	46627.85
2) <b>TOTALS</b> This Period (last page this line number only).....	46627.85
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)	46627.85