

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

ADDRESS (number and street) 4246 CHAIN BRIDGE RD  
 Check if different than previously reported. (ACC)  
FAIRFAX VA 22030

2. **FEC IDENTIFICATION NUMBER** C00277335  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 03 01 2010 through 03 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Michael Rumberg

Signature of Treasurer Electronically Filed by Michael Rumberg Date 04 16 2010

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

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" 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>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		6398.37
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	7353.53									
(c) Total Receipts (from Line 19) .....	39150.00	46201.80								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	46503.53	52600.17								
7. Total Disbursements (from Line 31) .....	7709.18	13805.82								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	38794.35	38794.35								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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) .....	2015.00	3730.00
(ii) Unitemized .....	37135.00	42471.80
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	39150.00	46201.80
(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) .....	39150.00	46201.80
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.) .....	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)) .....	39150.00	46201.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	39150.00	46201.80

**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.....	7709.18	13805.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	7709.18	13805.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	7709.18	13805.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7709.18	13805.82

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 17

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) .....	39150.00	46201.80
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	39150.00	46201.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7709.18	13805.82
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7709.18	13805.82

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 17

(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)  
**FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)**

**A.**

Full Name (Last, First, Middle Initial)  
Juanita Balenger

Mailing Address 4302 Greenberry Lane

City State Zip Code  
**Annandale VA 22003**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
VA Attorney General Community Outreach Coord.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 15 / 2010

**Transaction ID: SA11AI.12756**

Amount of Each Receipt this Period 105.00

contribution

**B.**

Full Name (Last, First, Middle Initial)  
Mrs Linda L Bartlett

Mailing Address 4316 Wakefield Dr.

City State Zip Code  
**Annandale VA 22003**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
N/A retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 03 / 15 / 2010

**Transaction ID: SA11AI.12763**

Amount of Each Receipt this Period 145.00

contribution

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Kerry D. Bolognese

Mailing Address 8606 James Creek Dr.

City State Zip Code  
**Springfield VA 22152**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
American Public LandGrant Univ VP Intl Programs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt 03 / 15 / 2010

**Transaction ID: SA11AI.12796**

Amount of Each Receipt this Period 105.00

contribution

**SUBTOTAL** of Receipts This Page (optional) ..... 355.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 17  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Mary W. Campbell

Mailing Address 6410  
Noble Rock Ct.

City Clifton State VA Zip Code 20124

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

Name of Employer N/A Occupation retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	0

**Transaction ID:** SA11AI.12864

Amount of Each Receipt this Period  
95.00

contribution

**B.** Full Name (Last, First, Middle Initial)  
Charles R. Feldmayer

Mailing Address 4309  
Southwood Dr.

City Alexandria State VA Zip Code 22309

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

Name of Employer Nammo Talley Occupation VP

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	0

**Transaction ID:** SA11AI.12990

Amount of Each Receipt this Period  
205.00

contribution

**C.** Full Name (Last, First, Middle Initial)  
Lana D Hampton

Mailing Address 5990 Richmond Hwy #106

City Alexandria State VA Zip Code 22303

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

Name of Employer US Navy Occupation Public Affairs

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	0

**Transaction ID:** SA11AI.13068

Amount of Each Receipt this Period  
245.00

contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **545.00**

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

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NAME OF COMMITTEE (In Full)  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harry Lowcock

Mailing Address 1169  
Reston Ave

City Herndon State VA Zip Code 20170

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 15 / 2010

**Transaction ID:** SA11AI.13237

Amount of Each Receipt this Period  
115.00

contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. James Edward McConville

Mailing Address 1003  
Emerald Dr.

City Alexandria State VA Zip Code 22308

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

Name of Employer Chandler/May Occupation Manufacturing

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 15 / 2010

**Transaction ID:** SA11AI.13277

Amount of Each Receipt this Period  
205.00

contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert T. McMahan, Jr.

Mailing Address 7115  
Penguin Place

City Falls Church State VA Zip Code 22043

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 ▼  
220.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 15 / 2010

**Transaction ID:** SA11AI.13292

Amount of Each Receipt this Period  
110.00

contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **430.00**

**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 9 / 17
(check only one)	
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

<b>A.</b>	Full Name (Last, First, Middle Initial) Will P Nance		Date of Receipt	
	Mailing Address 11816 Decour Ct		M M / D D / Y Y Y Y Y 03 / 15 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.13316
	Fairfax	VA	22030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		105.00	
Name of Employer Erickson Retirement Commu- nity		Occupation Exec Director		contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		210.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mrs. Dorothy J.Z. O'Rourke		Date of Receipt	
	Mailing Address 3311 Dairy Lou Dr		M M / D D / Y Y Y Y Y 03 / 15 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.13368
	Herndon	VA	20171	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		90.00	
Name of Employer		Occupation		contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		290.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mrs. Richard L. Raybold		Date of Receipt	
	Mailing Address 10206 Carol Street		M M / D D / Y Y Y Y Y 03 / 15 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.13421
	Great Falls	VA	22066	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		125.00	
Name of Employer N/A		Occupation retired		contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>320.00</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: PAGE 10 / 17  
(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)  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

**A.**

Full Name (Last, First, Middle Initial)  
Jerry H Rich

Mailing Address 10614 John Ayers Dr

City State Zip Code  
Fairfax VA 22031

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	0

**Transaction ID:** SA11AI.13440

Amount of Each Receipt this Period  
155.00

contribution

**B.**

Full Name (Last, First, Middle Initial)  
Brian W Schoeneman

Mailing Address 5579  
Harrington Falls Lane

City State Zip Code  
Alexandria VA 22312

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

Name of Employer Occupation  
Acacia Strategies Political Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
355.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	0

**Transaction ID:** SA11AI.13482

Amount of Each Receipt this Period  
105.00

contribution

**C.**

Full Name (Last, First, Middle Initial)  
Hans Von Spakovsky

Mailing Address 1000 Pruitt Ct

City State Zip Code  
Vienna VA 22180

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  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	0

**Transaction ID:** SA11AI.13599

Amount of Each Receipt this Period  
105.00

contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>365.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>2015.00</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.

Full Name (Last, First, Middle Initial)  
1-800 Flowers.com

Mailing Address 1 Old Country Rd #500

City Carle Place State NY Zip Code 11514

Purpose of Disbursement  
office supplies

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB21B.13675  
Date of Disbursement

02 / 06 / 2010

Amount of Each Disbursement this Period

37.99

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
1-800 Flowers.com

Mailing Address 1 Old Country Rd #500

City Carle Place State NY Zip Code 11514

Purpose of Disbursement  
office supplies

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB21B.13676  
Date of Disbursement

02 / 06 / 2010

Amount of Each Disbursement this Period

54.85

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address PO Box 1279

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
see memo items

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB21B.13656  
Date of Disbursement

03 / 04 / 2010

Amount of Each Disbursement this Period

793.95

SUBTOTAL of Disbursements This Page (optional) ▶

793.95

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.

Full Name (Last, First, Middle Initial)  
American Express

Transaction ID: SB21B.13663  
Date of Disbursement

Mailing Address PO Box 1279

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	0

City Newark State NJ Zip Code 07101

Amount of Each Disbursement this Period

Purpose of Disbursement

001
Category/ Type

603.96
--------

see memo items

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Best Buy, Inc

Transaction ID: SB21B.13669  
Date of Disbursement

Mailing Address 13058 Fairlakes Pkwy

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

City Fairfax State VA Zip Code 22033

Amount of Each Disbursement this Period

Purpose of Disbursement

001
Category/ Type

44.09
-------

office supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Constant Conact

Transaction ID: SB21B.13674  
Date of Disbursement

Mailing Address 1601 Trapelo Road #329

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

City Waltham State MA Zip Code 02451

Amount of Each Disbursement this Period

Purpose of Disbursement

001
Category/ Type

48.50
-------

subscription

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

[MEMO ITEM]

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

603.96
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TOTAL This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: (check only one)

<input 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)  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.	Full Name (Last, First, Middle Initial) Constant Conact	Transaction ID: SB21B.13679 Date of Disbursement
	Mailing Address 1601 Trapelo Road #329	<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City Waltham State MA Zip Code 02451	Amount of Each Disbursement this Period
	Purpose of Disbursement subscription	<input type="text" value="48.50"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Cox Communications Inc	Transaction ID: SB21B.13661 Date of Disbursement
	Mailing Address 4246 Chain Bridge Rd	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Fairfax State VA Zip Code 22033	Amount of Each Disbursement this Period
	Purpose of Disbursement internet	<input type="text" value="316.10"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) DeLage Landen Financial Services	Transaction ID: SB21B.13662 Date of Disbursement
	Mailing Address P.O. Box 41601	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Philadelphia State PA Zip Code 19101	Amount of Each Disbursement this Period
	Purpose of Disbursement equipment lease	<input type="text" value="383.48"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="699.58"/>
<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)  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

A.	Full Name (Last, First, Middle Initial) Dominion Virginia Power	Transaction ID: SB21B.13659 Date of Disbursement																			
	Mailing Address P.O. Box 26543	<table border="1"><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>0</td><td>3</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	0		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	0		2	0	1	0												
	City Richmond State VA Zip Code 23290	Amount of Each Disbursement this Period																			
	Purpose of Disbursement utility	<table border="1"><tr><td>153.24</td></tr></table>	153.24																		
153.24																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Fairfax County Public Schools	Transaction ID: SB21B.13657 Date of Disbursement																			
	Mailing Address 8115 Gatehouse Road	<table border="1"><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>0</td><td>3</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	8		2	0	1	0												
	City Falls Church State VA Zip Code 22042	Amount of Each Disbursement this Period																			
	Purpose of Disbursement room rental	<table border="1"><tr><td>962.00</td></tr></table>	962.00																		
962.00																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Fairfax Professional Village	Transaction ID: SB21B.13660 Date of Disbursement																			
	Mailing Address 4240 Chain Bridge Road	<table border="1"><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>0</td><td>3</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	0		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	0		2	0	1	0												
	City Fairfax State VA Zip Code 22030	Amount of Each Disbursement this Period																			
	Purpose of Disbursement condo fee	<table border="1"><tr><td>214.18</td></tr></table>	214.18																		
214.18																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>1329.42</td></tr></table>	1329.42
1329.42		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 17

<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)  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

<b>A.</b> Full Name (Last, First, Middle Initial) Giant Food Mailing Address Lee Highway City Fairfax State VA Zip Code 22030 Purpose of Disbursement food for volunteers Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.13677 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 42.92
	[MEMO ITEM]
	Category/Type 001

<b>B.</b> Full Name (Last, First, Middle Initial) Christopher B Kearny Mailing Address 9711 Ironmaster Dr City Burke State VA Zip Code 22015 Purpose of Disbursement political consultant Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.13664 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 1200.00
	[MEMO ITEM]
	Category/Type 001

<b>C.</b> Full Name (Last, First, Middle Initial) Maid Brigade Mailing Address 4813 EISENHOWER AVE # A City Alexandria State VA Zip Code 22314 Purpose of Disbursement office cleaning Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.13678 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 210.00
	[MEMO ITEM]
	Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1200.00
<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 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)  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Neighborhood Plumber Inc</p> <p>Mailing Address 9756 Rehanek Cour</p> <p>City Burke State VA Zip Code 22015</p> <p>Purpose of Disbursement plumbing repair 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.13680 <b>Date of Disbursement</b> 03 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 209.70</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Kerry O'Brien</p> <p>Mailing Address 7903 Clifton Hunt Ct</p> <p>City Clifton State VA Zip Code 20124</p> <p>Purpose of Disbursement political director fee 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.13654 <b>Date of Disbursement</b> 03 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kerry O'Brien</p> <p>Mailing Address 7903 Clifton Hunt Ct</p> <p>City Clifton State VA Zip Code 20124</p> <p>Purpose of Disbursement political director fee &amp; office supplies 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.13666 <b>Date of Disbursement</b> 03 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1514.50</p>

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

3014.50

**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 17 / 17

<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)  
FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Safeway Stores</p> <p>Mailing Address Chain Bridge Rd</p> <p>City Fairfax State VA Zip Code 22030</p> <p>Purpose of Disbursement food for volunteers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.13673</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="33.76"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The Examiner Newspaper</p> <p>Mailing Address 6850 Versar Ctr # 300</p> <p>City Springfield State VA Zip Code 22150</p> <p>Purpose of Disbursement publish convention call</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.13671</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="447.60"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address 10660 Page Street</p> <p>City Fairfax State VA Zip Code 22030</p> <p>Purpose of Disbursement postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.13668</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="220.00"/></p> <p><b>[MEMO ITEM]</b></p>

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

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