

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
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 2029 P STREET NW SUITE 302
 Check if different than previously reported. (ACC)
WASHINGTON DC 20036

2. **FEC IDENTIFICATION NUMBER** C00300921
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 07 01 2007 through 12 31 2007

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 C.E. Jones

Signature of Treasurer Electronically Filed by C.E. Jones Date 01 26 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		30674.08
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	35923.07									
(c) Total Receipts (from Line 19)	325557.41	722816.77								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	361480.48	753490.85								
7. Total Disbursements (from Line 31)	323001.80	715012.17								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	38478.68	38478.68								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	28295.11									

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
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	90902.62	158949.62
(i) Itemized (use Schedule A)		
(ii) Unitemized	234654.79	563867.15
(iii) TOTAL (add Lines 11(a)(i) and (ii)	325557.41	722816.77
(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)	325557.41	722816.77
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))	325557.41	722816.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	325557.41	722816.77

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	322001.80	708512.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	322001.80	708512.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	2000.00
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.....	1000.00	4500.00
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))..	323001.80	715012.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	323001.80	715012.17

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)	325557.41	722816.77
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	325557.41	722816.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	322001.80	708512.17
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	322001.80	708512.17

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR & MRS ROGER & DONNE ABERNATHY		Date of Receipt																					
	Mailing Address 111 DUGAR CT		<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>8</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	2		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	8		2	2		2	0	0	7														
City State Zip Code GASTONIA NC 28056		Transaction ID: SA11AI.33011																						
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00																						
Name of Employer Retired		Occupation Retired																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 216.00																						

B.	Full Name (Last, First, Middle Initial) MR & MRS ROGER & DONNE ABERNATHY		Date of Receipt																					
	Mailing Address 111 DUGAR CT		<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>1</td><td>1</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	9		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		1	9		2	0	0	7														
City State Zip Code GASTONIA NC 28056		Transaction ID: SA11AI.33012																						
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00																						
Name of Employer Retired		Occupation Retired																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 266.00																						

C.	Full Name (Last, First, Middle Initial) MR CHUCK ACKER		Date of Receipt																					
	Mailing Address 2 WATER ST		<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>1</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	1		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		1	1		2	0	0	7														
City State Zip Code COLUMBUS GA 31907		Transaction ID: SA11AI.33016																						
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00																						
Name of Employer RETIRED		Occupation RETIRED																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.00																						

SUBTOTAL of Receipts This Page (optional) ▶

225.00

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 7 / 307
	<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR JAY ADAMS	Date of Receipt MM / DD / YYYY 10 / 15 / 2007
	Mailing Address 1616 PENINSULA DR	Transaction ID: SA11AI.33018
	City State Zip Code DAYTONA BEACH FL 32118-4948	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) R JOHN ALEXANDER, MR	Date of Receipt MM / DD / YYYY 09 / 28 / 2007
	Mailing Address 1447 17TH ST APT 76B	Transaction ID: SA11AI.33044
	City State Zip Code SANTA MONICA CA 90404-2848	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

C.	Full Name (Last, First, Middle Initial) R JOHN ALEXANDER, MR	Date of Receipt MM / DD / YYYY 11 / 16 / 2007
	Mailing Address 1447 17TH ST APT 76B	Transaction ID: SA11AI.33045
	City State Zip Code SANTA MONICA CA 90404-2848	Amount of Each Receipt this Period 261.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 586.00	

SUBTOTAL of Receipts This Page (optional)	761.00
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 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. JEAN ANDERSON
 Mailing Address 1380 MIDDLE FORK RD
 City State Zip Code
 WITTS SPRINGS AR 72686-1205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SUNSHINE MORTGAGE LOAN OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00
 Date of Receipt: MM / DD / YYYY
 07 / 20 / 2007
Transaction ID: SA11AI.33069
 Amount of Each Receipt this Period: 75.00

B. Full Name (Last, First, Middle Initial)
MRS. JEAN ANDERSON
 Mailing Address 1380 MIDDLE FORK RD
 City State Zip Code
 WITTS SPRINGS AR 72686-1205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SUNSHINE MORTGAGE LOAN OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00
 Date of Receipt: MM / DD / YYYY
 08 / 24 / 2007
Transaction ID: SA11AI.33071
 Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
MRS. JEAN ANDERSON
 Mailing Address 1380 MIDDLE FORK RD
 City State Zip Code
 WITTS SPRINGS AR 72686-1205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SUNSHINE MORTGAGE LOAN OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00
 Date of Receipt: MM / DD / YYYY
 09 / 28 / 2007
Transaction ID: SA11AI.33068
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 225.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 307
	<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS. JEAN ANDERSON	Date of Receipt MM / DD / YYYY 11 / 16 / 2007
	Mailing Address 1380 MIDDLE FORK RD	Transaction ID: SA11AI.33070
	City State Zip Code WITTS SPRINGS AR 72686-1205	Amount of Each Receipt this Period 81.00
	FEC ID number of contributing federal political committee. C	
Name of Employer SUNSHINE MORTGAGE	Occupation LOAN OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 556.00	

B.	Full Name (Last, First, Middle Initial) C Victor Anderson, Mr	Date of Receipt MM / DD / YYYY 08 / 20 / 2007
	Mailing Address 1562 Viejas Creek Trl	Transaction ID: SA11AI.33076
	City State Zip Code Alpine CA 91901	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mrs Agnes Annen	Date of Receipt MM / DD / YYYY 08 / 01 / 2007
	Mailing Address 705 Taylor St	Transaction ID: SA11AI.33085
	City State Zip Code Mt Angel OR 97362	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

SUBTOTAL of Receipts This Page (optional)	176.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR EDWARD ANNIS

Mailing Address 422 NE 93RD ST

City State Zip Code
MIAMI SHORES FL 33138

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

Name of Employer SELF EMPLOYED Occupation SELF EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	0	7

Transaction ID: SA11AI.33086

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
DR EDWARD ANNIS

Mailing Address 422 NE 93RD ST

City State Zip Code
MIAMI SHORES FL 33138

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

Name of Employer SELF EMPLOYED Occupation SELF EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	7

Transaction ID: SA11AI.33087

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
MR ALBERT ANSEMAN

Mailing Address 205 E JOPPA RD #2502

City State Zip Code
BOCA RATON FL 33433

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 ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	0	7

Transaction ID: SA11AI.33088

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **325.00**

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

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

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FOR LINE NUMBER: PAGE 11 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
A Robert Aquadro, Mr
Mailing Address 212 Chestnut St
City Florence State MA Zip Code 01062-1438
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 ▼ 205.00
Date of Receipt 12 / 27 / 2007
Transaction ID: SA11AI.33094
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
E Matthias Bachman, Mr
Mailing Address PO Box 493
City Midland State TX Zip Code 79702-0493
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 ▼ 646.00
Date of Receipt 08 / 17 / 2007
Transaction ID: SA11AI.33136
Amount of Each Receipt this Period 120.00

C. Full Name (Last, First, Middle Initial)
E Matthias Bachman, Mr
Mailing Address PO Box 493
City Midland State TX Zip Code 79702-0493
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 ▼ 712.00
Date of Receipt 09 / 07 / 2007
Transaction ID: SA11AI.33134
Amount of Each Receipt this Period 66.00

SUBTOTAL of Receipts This Page (optional) ► 236.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 12 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
E MATTHIAS BACHMAN, MR.
Mailing Address PO BOX 493

City MIDLAND State TX Zip Code 79702-0493

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 ▼ 240.00

Date of Receipt: 09 / 24 / 2007
Transaction ID: SA11AI.33133
Amount of Each Receipt this Period: 120.00

B. Full Name (Last, First, Middle Initial)
E Matthias Bachman, Mr
Mailing Address PO Box 493

City Midland State TX Zip Code 79702-0493

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 ▼ 812.00

Date of Receipt: 11 / 19 / 2007
Transaction ID: SA11AI.33135
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
H ALLAN BAILEY, MR
Mailing Address 1032 LYNNWOOD BLVD

City NASHVILLE State TN Zip Code 37215-4512

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

Name of Employer ROLLS-ROYCE Occupation ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 12 / 28 / 2007
Transaction ID: SA11AI.33143
Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ► 420.00

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 13 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
A ELLIOT BAINES, MR

Mailing Address 360 INDIAN HARBOR RD

City State Zip Code
VERO BEACH FL 32963-3509

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 ▼ 2100.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 24 / 2007

Transaction ID: SA11AI.33144

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MRS ANN BAKER

Mailing Address 2093 GRAPE LAWN DR

City State Zip Code
IRVINE CA 92612

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

Name of Employer Occupation
RETIRED RETIRED TEACHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 27 / 2007

Transaction ID: SA11AI.33146

Amount of Each Receipt this Period
210.00

C. Full Name (Last, First, Middle Initial)
MRS ANN BAKER

Mailing Address 2093 GRAPE LAWN DR

City State Zip Code
IRVINE CA 92612

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

Name of Employer Occupation
RETIRED RETIRED TEACHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 07 / 2007

Transaction ID: SA11AI.33145

Amount of Each Receipt this Period
66.00

SUBTOTAL of Receipts This Page (optional) ► **776.00**

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 14 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

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

Mailing Address 22 ARANA CIR

City MATTOON State IL Zip Code 61938

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 ▼ 445.00

Date of Receipt: 07 / 18 / 2007
Transaction ID: SA11AI.33150
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES BAKER

Mailing Address 22 ARANA CIR

City MATTOON State IL Zip Code 61938

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 ▼ 545.00

Date of Receipt: 08 / 17 / 2007
Transaction ID: SA11AI.33151
 Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
MR. JAMES BAKER

Mailing Address 22 ARANA CIR

City MATTOON State IL Zip Code 61938

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 ▼ 596.00

Date of Receipt: 11 / 16 / 2007
Transaction ID: SA11AI.33148
 Amount of Each Receipt this Period: 51.00

SUBTOTAL of Receipts This Page (optional) ► 251.00

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 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

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

Mailing Address 22 ARANA CIR

City State Zip Code
MATTOON IL 61938

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 ▼ 676.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.33149

Amount of Each Receipt this Period
80.00

B. Full Name (Last, First, Middle Initial)
A Kenneth Baker, Mr

Mailing Address 10166 Winding Ridge Rd

City State Zip Code
Saint Louis MO 63124-1158

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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.33152

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MS LOUISE BARBECK

Mailing Address 3301 GREENBRIER DR

City State Zip Code
DALLAS TX 75225-4818

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 ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.33163

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► **330.00**

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 16 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS LOUISE BARBECK

Mailing Address 3301 GREENBRIER DR

City State Zip Code
DALLAS TX 75225-4818

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 ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 03 / 2007

Transaction ID: SA11AI.33162

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
MR PIERRE BARES

Mailing Address 214 SE ST
PO BOX 742

City State Zip Code
VIRGINIA CITY NV 89440

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 ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 20 / 2007

Transaction ID: SA11AI.33165

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
MRS LAURA BARKER

Mailing Address 4922 W CNTY RD 300 N

City State Zip Code
GREENSBURG IN 47240

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

Name of Employer Occupation
MDB INC PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 249.50

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 10 / 2007

Transaction ID: SA11AI.33166

Amount of Each Receipt this Period
49.50

SUBTOTAL of Receipts This Page (optional) ► 199.50

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 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS LAURA BARKER

Mailing Address 4922 W CNTY RD 300 N

City Greensburg State IN Zip Code 47240

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

Name of Employer MDB INC Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 299.50

Date of Receipt 11 / 16 / 2007
Transaction ID: SA11AI.33167
 Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
MS MARTHA BARNHARDT

Mailing Address 2220 S OCEAN BLVD #8208

City BUCKLIN State KS Zip Code 67834

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

Name of Employer HOUSEWIFE Occupation HOUSEWIFE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 23 / 2007
Transaction ID: SA11AI.33172
 Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
MR BERNARD BARTSON

Mailing Address 760 MICHAELS RD

City FREMONT State OH Zip Code 43420

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 ▼ 250.00

Date of Receipt 12 / 24 / 2007
Transaction ID: SA11AI.33186
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 600.00

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 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. HARRY BAUERLE

Mailing Address 3261 SANTA MARIA AVENUE

City State Zip Code
SANTA CLARA CA 95051

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

Name of Employer Occupation
GRANT ROAD LUMBER CO RETAIL LUMBER B

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 356.00

Date of Receipt
MM / DD / YYYY
07 / 30 / 2007

Transaction ID: SA11AI.33193

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
MRS DIANNE BEACH

Mailing Address 720 W END AVE # 1411

City State Zip Code
NEW YORK NY 10025-6299

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 ▼ 233.00

Date of Receipt
MM / DD / YYYY
11 / 21 / 2007

Transaction ID: SA11AI.33201

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
MRS DIANNE BEACH

Mailing Address 720 W END AVE # 1411

City State Zip Code
NEW YORK NY 10025-6299

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 ▼ 268.00

Date of Receipt
MM / DD / YYYY
12 / 07 / 2007

Transaction ID: SA11AI.33202

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional) ► **220.00**

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 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
J B BECK, MR
Mailing Address PO BOX 5657
City YUMA State AZ Zip Code 85366
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 ▼ 225.00
Date of Receipt 10 / 22 / 2007
Transaction ID: SA11AI.33205
Amount of Each Receipt this Period 125.00

B. Full Name (Last, First, Middle Initial)
MR. LOWELL BEHN
Mailing Address 133 TANGLEWOOD DR W
City ORCHARD PARK State NY Zip Code 14127-3520
FEC ID number of contributing federal political committee. **C**
Name of Employer AMM CO INC Occupation PUBLISHER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 12 / 20 / 2007
Transaction ID: SA11AI.33221
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
F ARCHIE BEIGHLEY, MR
Mailing Address PO BOX 585
City SAINT CHARLES State MN Zip Code 55972-0585
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 09 / 24 / 2007
Transaction ID: SA11AI.33222
Amount of Each Receipt this Period 50.00

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 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR FRANK BEITER

Mailing Address 2327 E LOCUST ST

City State Zip Code
COMMACK NY 11725

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) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.33226

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
H ROBERT BELLAIRS, MR

Mailing Address 5095 TANGLEWOOD BLUFF

City State Zip Code
GRAND BLANC MI 48439

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) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.33230

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
W LOUIS BENECKE, MR

Mailing Address 212 W 6TH AVE

City State Zip Code
GASTONIA NC 28052-4019

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) ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.33232

Amount of Each Receipt this Period
150.00

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 21 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR & MRS GAYLORD & SHIRLEY BENNETT
Mailing Address 25225 SE WALLY RD

City State Zip Code
BORING OR 97009

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 ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 20 / 2007

Transaction ID: SA11AI.33238

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
MR RICHARD BERCIK
Mailing Address 23603 EVALYN AVE

City State Zip Code
INCLINE VILLAGE NV 89452

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 ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 30 / 2007

Transaction ID: SA11AI.33244

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)
MR RICHARD BERCIK
Mailing Address 23603 EVALYN AVE

City State Zip Code
INCLINE VILLAGE NV 89452

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 ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 20 / 2007

Transaction ID: SA11AI.33243

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

450.00

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 22 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR RICHARD BERCIK

Mailing Address 23603 EVALYN AVE

City State Zip Code
INCLINE VILLAGE NV 89452

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 ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.33242

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MR SHERIDAN BIGGS

Mailing Address PO BOX 160

City State Zip Code
QUAKER STREET NY 12141-0160

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

Name of Employer Occupation
TREE OF LIFE CHURCH RETIRED CLERGY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.33265

Amount of Each Receipt this Period
375.00

C.

Full Name (Last, First, Middle Initial)
MR SHERIDAN BIGGS

Mailing Address PO BOX 160

City State Zip Code
QUAKER STREET NY 12141-0160

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

Name of Employer Occupation
TREE OF LIFE CHURCH RETIRED CLERGY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.33263

Amount of Each Receipt this Period
275.00

SUBTOTAL of Receipts This Page (optional) ▶

700.00

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 23 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR SHERIDAN BIGGS

Mailing Address PO BOX 160

City State Zip Code
QUAKER STREET NY 12141-0160

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
TREE OF LIFE CHURCH RETIRED CLERGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt MM / DD / YYYY
12 / 12 / 2007

Transaction ID: SA11AI.33264

Amount of Each Receipt this Period 300.00

B.

Full Name (Last, First, Middle Initial)
M JOSEPH BILLIOU, MR

Mailing Address PO BOX 98

City State Zip Code
HAMILTON CITY CA 95951

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF EMPLOYED FARMER- RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt MM / DD / YYYY
11 / 21 / 2007

Transaction ID: SA11AI.33270

Amount of Each Receipt this Period 100.00

C.

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

Mailing Address 2028 S AUSTIN ST

City State Zip Code
AMARILLO TX 79109-1934

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 ▼ 800.00

Date of Receipt MM / DD / YYYY
09 / 26 / 2007

Transaction ID: SA11AI.33275

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) 900.00

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 / 307
(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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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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

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

Mailing Address 2028 S AUSTIN ST

City State Zip Code
AMARILLO TX 79109-1934

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 ▼ **1000.00**

Date of Receipt
MM / DD / YYYY
12 / 17 / 2007

Transaction ID: SA11AI.33274

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
MR RICHARD BLACKBURN

Mailing Address 2055 EMORY ST

City State Zip Code
SAN JOSE CA 95128-1418

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

Name of Employer Occupation
SMITH ROWE INC HIGHWAY CONSTRU

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **232.00**

Date of Receipt
MM / DD / YYYY
09 / 10 / 2007

Transaction ID: SA11AI.33277

Amount of Each Receipt this Period
66.00

C.

Full Name (Last, First, Middle Initial)
MR WILEY BLAIR, III

Mailing Address 300 HOT SPRINGS RD # 200

City State Zip Code
SANT BARBARA CA 93108

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 ▼ **300.00**

Date of Receipt
MM / DD / YYYY
09 / 28 / 2007

Transaction ID: SA11AI.33279

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **466.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS CHARLES BLAYLOCK

Mailing Address 19621 BUTTERBAUGH FORD RD

City State Zip Code
SEDALIA MO 65301

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

Name of Employer SELF Occupation SELF EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt MM / DD / YYYY
07 / 30 / 2007

Transaction ID: SA11AI.33281

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
MRS CHARLES BLAYLOCK

Mailing Address 19621 BUTTERBAUGH FORD RD

City State Zip Code
SEDALIA MO 65301

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

Name of Employer SELF Occupation SELF EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt MM / DD / YYYY
09 / 26 / 2007

Transaction ID: SA11AI.33284

Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
MRS CHARLES BLAYLOCK

Mailing Address 19621 BUTTERBAUGH FORD RD

City State Zip Code
SEDALIA MO 65301

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

Name of Employer SELF Occupation SELF EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt MM / DD / YYYY
12 / 12 / 2007

Transaction ID: SA11AI.33282

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 250.00

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 26 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS CHARLES BLAYLOCK

Mailing Address 19621 BUTTERBAUGH FORD RD

City State Zip Code
SEDALIA MO 65301

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

Name of Employer SELF Occupation SELF EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 17 / 2007

Transaction ID: SA11AI.33280

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
MRS CHARLES BLAYLOCK

Mailing Address 19621 BUTTERBAUGH FORD RD

City State Zip Code
SEDALIA MO 65301

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

Name of Employer SELF Occupation SELF EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 610.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 20 / 2007

Transaction ID: SA11AI.33283

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MS LEONORE BLAZO

Mailing Address 30 LAKE ST

City State Zip Code
STAMFORD NY 12167-1036

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 ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 19 / 2007

Transaction ID: SA11AI.33287

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► 290.00

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 27 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
R RONDA BLEHM-KUK, MRS

Mailing Address 32265 WEEPING WILLOW ST

City State Zip Code
TRABUCO CANYON CA 92679

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 ▼ 400.00

Date of Receipt
MM / DD / YYYY
07 / 12 / 2007

Transaction ID: SA11AI.33293

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
R RONDA BLEHM-KUK, MRS

Mailing Address 32265 WEEPING WILLOW ST

City State Zip Code
TRABUCO CANYON CA 92679

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 ▼ 450.00

Date of Receipt
MM / DD / YYYY
08 / 24 / 2007

Transaction ID: SA11AI.33288

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
R RONDA BLEHM-KUK, MRS

Mailing Address 32265 WEEPING WILLOW ST

City State Zip Code
TRABUCO CANYON CA 92679

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 ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2007

Transaction ID: SA11AI.33289

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶ 200.00

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 28 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
R RONDA BLEHM-KUK, MRS

Mailing Address 32265 WEEPING WILLOW ST

City State Zip Code
TRABUCO CANYON CA 92679

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 ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.33290

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
R RONDA BLEHM-KUK, MRS

Mailing Address 32265 WEEPING WILLOW ST

City State Zip Code
TRABUCO CANYON CA 92679

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 ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.33291

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
R RONDA BLEHM-KUK, MRS

Mailing Address 32265 WEEPING WILLOW ST

City State Zip Code
TRABUCO CANYON CA 92679

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 ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.33292

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR FRANCIS BLESSING

Mailing Address 234 E 53RD ST

City State Zip Code
NEW YORK NY 10022

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

Name of Employer Occupation
FEMA CIVIL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2007

Transaction ID: SA11AI.33297

Amount of Each Receipt this Period
49.00

B. Full Name (Last, First, Middle Initial)
MR FRANCIS BLESSING

Mailing Address 234 E 53RD ST

City State Zip Code
NEW YORK NY 10022

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

Name of Employer Occupation
FEMA CIVIL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 244.00

Date of Receipt
MM / DD / YYYY
08 / 27 / 2007

Transaction ID: SA11AI.33296

Amount of Each Receipt this Period
42.00

C. Full Name (Last, First, Middle Initial)
MR FRANCIS BLESSING

Mailing Address 234 E 53RD ST

City State Zip Code
NEW YORK NY 10022

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

Name of Employer Occupation
FEMA CIVIL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 284.00

Date of Receipt
MM / DD / YYYY
10 / 03 / 2007

Transaction ID: SA11AI.33295

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **131.00**

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 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR FRANCIS BLESSING

Mailing Address 234 E 53RD ST

City State Zip Code
NEW YORK NY 10022

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

Name of Employer Occupation
FEMA CIVIL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2007

Transaction ID: SA11AI.33294

Amount of Each Receipt this Period
37.00

B. Full Name (Last, First, Middle Initial)
MR FRANCIS BLESSING

Mailing Address 234 E 53RD ST

City State Zip Code
NEW YORK NY 10022

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

Name of Employer Occupation
FEMA CIVIL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 394.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2007

Transaction ID: SA11AI.33299

Amount of Each Receipt this Period
73.00

C. Full Name (Last, First, Middle Initial)
MR FRANCIS BLESSING

Mailing Address 234 E 53RD ST

City State Zip Code
NEW YORK NY 10022

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

Name of Employer Occupation
FEMA CIVIL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2007

Transaction ID: SA11AI.33298

Amount of Each Receipt this Period
66.00

SUBTOTAL of Receipts This Page (optional) ► 176.00

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 31 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
W TED BLUE, MR
Mailing Address PO BOX 334
City LAS CRUCES State NM Zip Code 88004-0334
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 ▼ 270.00
Date of Receipt 08 / 17 / 2007
Transaction ID: SA11AI.33300
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
H ROBERT BOEMER, MR
Mailing Address 1160 E PALO VERDE ST
City YUMA State AZ Zip Code 85365-3445
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RET
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 07 / 30 / 2007
Transaction ID: SA11AI.33301
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
MRS HERBERT BOWEN
Mailing Address 343 DON ST SE
City LOS LUNAS State NM Zip Code 87031-6729
FEC ID number of contributing federal political committee. **C**
Name of Employer VALLEY INDEPENDENT BANK Occupation ACCOUNTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00
Date of Receipt 08 / 17 / 2007
Transaction ID: SA11AI.33332
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 250.00
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 32 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS HERBERT BOWEN

Mailing Address 343 DON ST SE

City State Zip Code
LOS LUNAS NM 87031-6729

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

Name of Employer Occupation
VALLEY INDEPENDENT BANK ACCOUNTANT

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 0 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.33333

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
L HAROLD BRANDT, MR

Mailing Address 4224 E PRAIRIE LN CT

City State Zip Code
SPOKANE WA 99223-5025

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

Name of Employer Occupation
US ARMY/RETIRED PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.33352

Amount of Each Receipt this Period

80.00

C.

Full Name (Last, First, Middle Initial)
R JOHN BREHMER, MR

Mailing Address 201 SEABREEZE CT

City State Zip Code
ORCHID FL 32963

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

Name of Employer Occupation
RETIRED PRESIDENT

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

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.33354

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
S OSCAR BREWER, MR
Mailing Address 5335 MISSION WOODS RD
City MISSION State KS Zip Code 66205
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 ▼ 300.00
Date of Receipt 11 / 19 / 2007
Transaction ID: SA11AI.33360
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
H EDWARD BRINFIELD, MR
Mailing Address 1134 CONCORD DR
City HADDONFIELD State NJ Zip Code 08033-3503
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 ▼ 230.00
Date of Receipt 10 / 22 / 2007
Transaction ID: SA11AI.33369
Amount of Each Receipt this Period 60.00

C. Full Name (Last, First, Middle Initial)
H EDWARD BRINFIELD, MR
Mailing Address 1134 CONCORD DR
City HADDONFIELD State NJ Zip Code 08033-3503
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 ▼ 330.00
Date of Receipt 11 / 19 / 2007
Transaction ID: SA11AI.33371
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 260.00
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 34 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS NANCY BRINKER

Mailing Address 2540 WALNUT LAKE RD

City State Zip Code
SAN ANTONIO TX 78239

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 ▼ 275.00

Date of Receipt
MM / DD / YYYY
12 / 07 / 2007

Transaction ID: SA11AI.33376

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID BRITTAIN

Mailing Address 2552 E ALAMEDA AVE UNIT 74

City State Zip Code
FAYETTEVILLE NY 13066

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

Name of Employer Occupation
HEALTH SYSTEMS MGMNT HEALTH QUALITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
MM / DD / YYYY
10 / 24 / 2007

Transaction ID: SA11AI.33379

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
J JOHN BROGAN, MR

Mailing Address 400 N FLAGLER DR APT 1906

City State Zip Code
WEST PALM BEACH FL 33401-4316

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 ▼ 340.00

Date of Receipt
MM / DD / YYYY
10 / 05 / 2007

Transaction ID: SA11AI.33384

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ▶ **400.00**

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

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 35 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
J JOHN BROGAN, MR
Mailing Address 400 N FLAGLER DR APT 1906
City WEST PALM BEACH State FL Zip Code 33401-4316
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 ▼ 565.00
Date of Receipt 12 / 12 / 2007
Transaction ID: SA11AI.33385
Amount of Each Receipt this Period 225.00

B. Full Name (Last, First, Middle Initial)
MR TODD BROPHY
Mailing Address PO BOX 460363
City AURORA State CO Zip Code 80046-0363
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF CHERRY CREEK MARINA INC Occupation COURT APPOINTED RECEIVER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 11 / 26 / 2007
Transaction ID: SA11AI.33391
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Mrs Gus Brown
Mailing Address 603 Millville Dr
City Henderson State TX Zip Code 75652-5237
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 ▼ 400.00
Date of Receipt 08 / 01 / 2007
Transaction ID: SA11AI.33392
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 345.00
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 36 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
L JOHNNIE BROWN, MR.
Mailing Address 3838 S EDMUNDS STREET APT. 205
City SEATTLE State WA Zip Code 98118
FEC ID number of contributing federal political committee. **C**
Name of Employer ELECTRICAL CONSTRUCTION B Occupation ELECTRICAL SUPE
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 812.00
Date of Receipt 08 / 17 / 2007
Transaction ID: SA11AI.33393
Amount of Each Receipt this Period 210.00

B. Full Name (Last, First, Middle Initial)
S DAVID BROWNING, MR.
Mailing Address 8437 TUTTLE AVE # 310
City SARASOTA State FL Zip Code 34243-2868
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 ▼ 260.00
Date of Receipt 11 / 23 / 2007
Transaction ID: SA11AI.33400
Amount of Each Receipt this Period 40.00

C. Full Name (Last, First, Middle Initial)
K MAX BUCHMILLER, MR.
Mailing Address 8954 CHERRY AVE
City ORANGEVALE State CA Zip Code 95662
FEC ID number of contributing federal political committee. **C**
Name of Employer CATERPILLAR DEALER/CAT IN Occupation MANAGEMENT TRAI
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 351.00
Date of Receipt 07 / 03 / 2007
Transaction ID: SA11AI.33406
Amount of Each Receipt this Period 50.00

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 37 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
K MAX BUCHMILLER, MR

Mailing Address 8954 CHERRY AVE

City State Zip Code
ORANGEVALE CA 95662

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

Name of Employer Occupation
CATERPILLAR DEALER/CAT IN MANAGEMENT TRAI

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 401.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 20 / 2007

Transaction ID: SA11AI.33407

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
K MAX BUCHMILLER, MR

Mailing Address 8954 CHERRY AVE

City State Zip Code
ORANGEVALE CA 95662

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

Name of Employer Occupation
CATERPILLAR DEALER/CAT IN MANAGEMENT TRAI

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 451.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 24 / 2007

Transaction ID: SA11AI.33408

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
K MAX BUCHMILLER, MR

Mailing Address 8954 CHERRY AVE

City State Zip Code
ORANGEVALE CA 95662

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

Name of Employer Occupation
CATERPILLAR DEALER/CAT IN MANAGEMENT TRAI

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.50

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2007

Transaction ID: SA11AI.33405

Amount of Each Receipt this Period
49.50

SUBTOTAL of Receipts This Page (optional) ▶

149.50

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 38 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
K MAX BUCHMILLER, MR
Mailing Address 8954 CHERRY AVE
City ORANGEVALE State CA Zip Code 95662
FEC ID number of contributing federal political committee. **C**
Name of Employer CATERPILLAR DEALER/CAT IN Occupation MANAGEMENT TRAI
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.50
Date of Receipt 09 / 28 / 2007
Transaction ID: SA11AI.33409
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
F Keith Bullen, Mr
Mailing Address 151 W Avenida Ramona
City San Clememte State CA Zip Code 92672-4353
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRD
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00
Date of Receipt 10 / 22 / 2007
Transaction ID: SA11AI.33417
Amount of Each Receipt this Period 40.00

C. Full Name (Last, First, Middle Initial)
F Keith Bullen, Mr
Mailing Address 151 W Avenida Ramona
City San Clememte State CA Zip Code 92672-4353
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRD
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00
Date of Receipt 11 / 19 / 2007
Transaction ID: SA11AI.33415
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 160.00
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 39 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
F Keith Bullen, Mr
Mailing Address 151 W Avenida Ramona
City San Clemente State CA Zip Code 92672-4353
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRD
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt 12 / 27 / 2007
Transaction ID: SA11AI.33416
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
MR JACK BURGER
Mailing Address 22300 RICHTON SQ RD
City RICHTON PARK State IL Zip Code 60471-2060
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 ▼ 240.00
Date of Receipt 10 / 09 / 2007
Transaction ID: SA11AI.33422
Amount of Each Receipt this Period 40.00

C. Full Name (Last, First, Middle Initial)
MR JACK BURGER
Mailing Address 22300 RICHTON SQ RD
City RICHTON PARK State IL Zip Code 60471-2060
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 ▼ 290.00
Date of Receipt 11 / 01 / 2007
Transaction ID: SA11AI.33425
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 110.00
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 40 / 307
(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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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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR JACK BURGER

Mailing Address 22300 RICHTON SQ RD

City State Zip Code
RICHTON PARK IL 60471-2060

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 ▼ 340.00

Date of Receipt
MM / DD / YYYY
11 / 16 / 2007

Transaction ID: SA11AI.33426

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR KERMIT CAIN

Mailing Address 278 STONE RD

City State Zip Code
NATIONAL CITY CA 91950

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

Name of Employer Occupation
NAS NORTH ISLAND U S NAVY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2007

Transaction ID: SA11AI.33453

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
J MELVIN CAMP, MR.

Mailing Address PO BOX 127

City State Zip Code
PLATTEVILLE CO 80651-0127

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

Name of Employer Occupation
107 GILLICAN CIRCLE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
09 / 10 / 2007

Transaction ID: SA11AI.33467

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **175.00**

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 41 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
D COLIN CAMPBELL, MR
Mailing Address 621 ARMADA RD S
City VENICE State FL Zip Code 34285
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 ▼ 225.00
Date of Receipt 08 / 20 / 2007
Transaction ID: SA11AI.33468
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
W CHESTER CARLOCK, MR
Mailing Address PO BOX 472
City FORT WORTH State TX Zip Code 76102-3105
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation LAWYER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 11 / 16 / 2007
Transaction ID: SA11AI.33482
Amount of Each Receipt this Period 600.00

C. Full Name (Last, First, Middle Initial)
J WILLIAM CARTER, MR
Mailing Address 4700 LAVISTA RD
City TUCKER State GA Zip Code 30084-4315
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 ▼ 400.00
Date of Receipt 09 / 28 / 2007
Transaction ID: SA11AI.33492
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 850.00
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 42 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
E JACK CAVENEY, MR

Mailing Address 201 MAIN ST

City State Zip Code
HINSDALE IL 60521-4731

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

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **11 / 30 / 2007**

Transaction ID: SA11AI.33502

Amount of Each Receipt this Period **500.00**

B. Full Name (Last, First, Middle Initial)
W WOODROW CHESHIRE, MR

Mailing Address 732 NE 3RD ST

City State Zip Code
POMPANO BEACH FL 33060-6320

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

Name of Employer Occupation
COAST ROOFING ROOFING SUPERVI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **243.00**

Date of Receipt **11 / 15 / 2007**

Transaction ID: SA11AI.33528

Amount of Each Receipt this Period **75.00**

C. Full Name (Last, First, Middle Initial)
R EDWARD CHILCOTT, MR

Mailing Address 444 E AVE APT C

City State Zip Code
CORONADO CA 92118-1765

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

Name of Employer Occupation
BAJW CAPITAL INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **11 / 13 / 2007**

Transaction ID: SA11AI.33532

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional) ► **675.00**

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 43 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS DOROTHY CLAPP

Mailing Address 2225 DEVONSHIRE WAY

City State Zip Code
PALM BCH GDNS FL 33418-6874

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 ▼ 300.00

Date of Receipt
MM / DD / YYYY
07 / 30 / 2007

Transaction ID: SA11AI.33546

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
C ROBERT COATS, MR

Mailing Address 4211 GARIBALDI AVE

City State Zip Code
JACKSONVILLE FL 32210-8513

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 ▼ 210.00

Date of Receipt
MM / DD / YYYY
08 / 27 / 2007

Transaction ID: SA11AI.33577

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
C ROBERT COATS, MR

Mailing Address 4211 GARIBALDI AVE

City State Zip Code
JACKSONVILLE FL 32210-8513

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 ▼ 245.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2007

Transaction ID: SA11AI.33576

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional) ► 185.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
K GRACE COHANE, MRS
Mailing Address 3335 UTOPIA PKWY
City FLUSHING State NY Zip Code 11358-1921
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 ▼ 218.00
Date of Receipt 08 / 27 / 2007
Transaction ID: SA11AI.33589
Amount of Each Receipt this Period 40.00

B. Full Name (Last, First, Middle Initial)
K GRACE COHANE, MRS
Mailing Address 3335 UTOPIA PKWY
City FLUSHING State NY Zip Code 11358-1921
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 ▼ 318.00
Date of Receipt 11 / 16 / 2007
Transaction ID: SA11AI.33591
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
M FRANCINE COHN, MRS
Mailing Address 49381 VISTA MIRASOL
City LA QUINTA State CA Zip Code 92253
FEC ID number of contributing federal political committee. **C**
Name of Employer HOMEMAKER Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 339.00
Date of Receipt 12 / 12 / 2007
Transaction ID: SA11AI.33593
Amount of Each Receipt this Period 339.00

SUBTOTAL of Receipts This Page (optional) ► 479.00
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 45 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR COLEMAN

Mailing Address 680 E 100 S APT 109

City State Zip Code
SALT LAKE CITY UT 84102-1128

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

Name of Employer Retired Occupation ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2007

Transaction ID: SA11AI.33597

Amount of Each Receipt this Period
101.00

B. Full Name (Last, First, Middle Initial)
C M CONKLIN, MRS

Mailing Address 2796 S MONA RD

City State Zip Code
LEBANON OR 97355

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 ▼ 235.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2007

Transaction ID: SA11AI.33611

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
C M CONKLIN, MRS

Mailing Address 2796 S MONA RD

City State Zip Code
LEBANON OR 97355

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 ▼ 300.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2007

Transaction ID: SA11AI.33613

Amount of Each Receipt this Period
65.00

SUBTOTAL of Receipts This Page (optional) ► **216.00**

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 46 / 307
(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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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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
C M CONKLIN, MRS

Mailing Address 2796 S MONA RD

City State Zip Code
LEBANON OR 97355

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 ▼ **350.00**

Date of Receipt **09 / 07 / 2007**

Transaction ID: SA11AI.33612

Amount of Each Receipt this Period **50.00**

B. Full Name (Last, First, Middle Initial)
J HUGH CONNAGHAN, FATHER

Mailing Address PO BOX 428

City State Zip Code
CARTHAGE NY 13619-0428

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 ▼ **240.00**

Date of Receipt **12 / 19 / 2007**

Transaction ID: SA11AI.33614

Amount of Each Receipt this Period **50.00**

C. Full Name (Last, First, Middle Initial)
MR JOE COOK, JR

Mailing Address 1600 DIVISION ST STE 630

City State Zip Code
NASHVILLE TN 37203

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 ▼ **300.00**

Date of Receipt **11 / 26 / 2007**

Transaction ID: SA11AI.33623

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional) **200.00**

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 47 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR SOLOMON COOK
Mailing Address 303 STATE RTE 37
City HOGANSBURG State NY Zip Code 13655
FEC ID number of contributing federal political committee. **C**
Name of Employer COLDWELL BANKER BURNET RE Occupation REAL ESTATE AGE
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 473.00
Date of Receipt 11 / 02 / 2007
Transaction ID: SA11AI.33625
Amount of Each Receipt this Period 220.00

B. Full Name (Last, First, Middle Initial)
MR SOLOMON COOK
Mailing Address 303 STATE RTE 37
City HOGANSBURG State NY Zip Code 13655
FEC ID number of contributing federal political committee. **C**
Name of Employer COLDWELL BANKER BURNET RE Occupation REAL ESTATE AGE
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 573.00
Date of Receipt 12 / 07 / 2007
Transaction ID: SA11AI.33624
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
MR GEORFFREY COOPER
Mailing Address P O BOX 550
City BRYN ATHYN State PA Zip Code 19009
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RET
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
Date of Receipt 09 / 07 / 2007
Transaction ID: SA11AI.33627
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 420.00
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 48 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MRS MICHELE COPPOC	Date of Receipt MM / DD / YYYY 11 / 05 / 2007
	Mailing Address 921 SHADY GROVE RD APT F3	Transaction ID: SA11AI.33631
	City State Zip Code HOT SPRINGS NATION AR 71901-8083	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.50	

B.	Full Name (Last, First, Middle Initial) MRS MICHELE COPPOC	Date of Receipt MM / DD / YYYY 11 / 09 / 2007
	Mailing Address 921 SHADY GROVE RD APT F3	Transaction ID: SA11AI.33632
	City State Zip Code HOT SPRINGS NATION AR 71901-8083	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.50	

C.	Full Name (Last, First, Middle Initial) MRS SUZANNE COSMAN	Date of Receipt MM / DD / YYYY 08 / 27 / 2007
	Mailing Address 3051 W STATE RD 84	Transaction ID: SA11AI.33635
	City State Zip Code FORT LAUDERDALE FL 33312-4821	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional) ▶

250.00

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 49 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR WILLIAM COUSINS, JR		Date of Receipt MM / DD / YYYY 07 / 12 / 2007		
	Mailing Address PO BOX 654		Transaction ID: SA11AI.33638		
	City NAPLES	State FL	Zip Code 34108-8172	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer RETIRED	Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

B.	Full Name (Last, First, Middle Initial) V BETTY COVELL, MISS		Date of Receipt MM / DD / YYYY 10 / 01 / 2007		
	Mailing Address 15707 BRADFORD DR		Transaction ID: SA11AI.33648		
	City LAUREL	State MD	Zip Code 20707-3260	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer RETIRED	Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

C.	Full Name (Last, First, Middle Initial) V BETTY COVELL, MISS		Date of Receipt MM / DD / YYYY 11 / 07 / 2007		
	Mailing Address 15707 BRADFORD DR		Transaction ID: SA11AI.33649		
	City LAUREL	State MD	Zip Code 20707-3260	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer RETIRED	Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00			

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 50 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
V BETTY COVELL, MISS

Mailing Address 15707 BRADFORD DR

City LAUREL State MD Zip Code 20707-3260

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 ▼ 550.00

Date of Receipt 12 / 20 / 2007

Transaction ID: SA11AI.33650

Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
E CHARLES CRAIG, MR & MRS

Mailing Address 10123 METRONOME DR

City HOUSTON State TX Zip Code 77080-6311

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

Name of Employer RETIRED Occupation RET

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 07 / 2007

Transaction ID: SA11AI.33651

Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
DR CHRISTIAN CRETEUR

Mailing Address 3083 TYRE NECK RD

City CHESAPEAKE State VA Zip Code 23321-4503

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 ▼ 300.00

Date of Receipt 11 / 05 / 2007

Transaction ID: SA11AI.33663

Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 450.00

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 51 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MISS ESTELLE CROCKETT
Mailing Address 1203 1ST AVE E

City State Zip Code
BIG STONE GAP VA 24219-3161

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

Name of Employer Occupation
RETIRED RET

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 07 / 2007

Transaction ID: SA11AI.33667

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
MRS FRANCES CULLOM
Mailing Address 2515 SPRING HILL DR

City State Zip Code
ASHLAND OR 97520-1453

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

Name of Employer Occupation
RETIRED ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2156.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 01 / 2007

Transaction ID: SA11AI.33676

Amount of Each Receipt this Period
1350.00

C.

Full Name (Last, First, Middle Initial)
MRS FRANCES CULLOM
Mailing Address 2515 SPRING HILL DR

City State Zip Code
ASHLAND OR 97520-1453

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

Name of Employer Occupation
RETIRED ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2231.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 19 / 2007

Transaction ID: SA11AI.33675

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)

1675.00

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 52 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR WILLARD CURTISS, JR

Mailing Address 3288 ALBANY ST

City Tampa State FL Zip Code 33611

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 ▼ 210.00

Date of Receipt: 09 / 24 / 2007
Transaction ID: SA11AI.33679
Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
MR WILLARD CURTISS, JR

Mailing Address 3288 ALBANY ST

City Tampa State FL Zip Code 33611

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 ▼ 260.00

Date of Receipt: 11 / 15 / 2007
Transaction ID: SA11AI.33678
Amount of Each Receipt this Period: 50.00

C.

Full Name (Last, First, Middle Initial)
MR WILLARD CURTISS, JR

Mailing Address 3288 ALBANY ST

City Tampa State FL Zip Code 33611

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 ▼ 360.00

Date of Receipt: 12 / 28 / 2007
Transaction ID: SA11AI.33680
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► **250.00**

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 53 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
J HELEN DALHBY, MS

Mailing Address 2967 WOODLAND RD

City State Zip Code
LOS ALAMOS NM 87544-1507

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 ▼ **280.00**

Date of Receipt
MM / DD / YYYY
08 / 22 / 2007

Transaction ID: SA11AI.33687

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
MS MARJORIE DAVIS

Mailing Address 6 HUCKLEBERRY LN

City State Zip Code
AUGUSTA ME 04330-6022

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

Name of Employer Occupation
RETIRED RET

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
MM / DD / YYYY
07 / 27 / 2007

Transaction ID: SA11AI.33709

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
MS MARJORIE DAVIS

Mailing Address 6 HUCKLEBERRY LN

City State Zip Code
AUGUSTA ME 04330-6022

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

Name of Employer Occupation
RETIRED RET

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
MM / DD / YYYY
09 / 17 / 2007

Transaction ID: SA11AI.33710

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **600.00**

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 54 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS MARJORIE DAVIS

Mailing Address 6 HUCKLEBERRY LN

City State Zip Code
AUGUSTA ME 04330-6022

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

Name of Employer RETIRED Occupation RET

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.33711

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MS MARJORIE DAVIS

Mailing Address 6 HUCKLEBERRY LN

City State Zip Code
AUGUSTA ME 04330-6022

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

Name of Employer RETIRED Occupation RET

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.33713

Amount of Each Receipt this Period
600.00

C. Full Name (Last, First, Middle Initial)
MS MARJORIE DAVIS

Mailing Address 6 HUCKLEBERRY LN

City State Zip Code
AUGUSTA ME 04330-6022

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

Name of Employer RETIRED Occupation RET

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.33712

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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 55 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
NANCY DAY

Mailing Address 34 WATERCLIFF ST

City State Zip Code
SAN DIEGO CA 92103

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 ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	6	/	2	0	0	7

Transaction ID: SA11AI.33721

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
NANCY DAY

Mailing Address 34 WATERCLIFF ST

City State Zip Code
SAN DIEGO CA 92103

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 ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	0	7

Transaction ID: SA11AI.33722

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
NANCY DAY

Mailing Address 34 WATERCLIFF ST

City State Zip Code
SAN DIEGO CA 92103

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 ▼
335.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.33720

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional) ► **135.00**

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 56 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR PAUL DE CLEVA

Mailing Address 3404 W LYKESAVE

City State Zip Code
DALLAS TX 75201

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

Name of Employer SELF EMPLOYED Occupation SELF EMPLOYED

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	7

Transaction ID: SA11AI.33726

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR PAUL DE CLEVA

Mailing Address 3404 W LYKESAVE

City State Zip Code
DALLAS TX 75201

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

Name of Employer SELF EMPLOYED Occupation SELF EMPLOYED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	7	/	2	0	0	7

Transaction ID: SA11AI.33725

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
MR RAYMOND DEENY

Mailing Address 90 S S CASCADE AVE

City State Zip Code
COLORADO SPRINGS CO 80903-1611

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

Name of Employer FOOD SUE Occupation MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	1	/	2	0	0	7

Transaction ID: SA11AI.33756

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 57 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS JEANNE DEUTSCH

Mailing Address 12328 FEDERAL DR

City State Zip Code
SAINT LOUIS MO 63131

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 ▼ 207.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.33776

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
MRS JEANNE DEUTSCH

Mailing Address 12328 FEDERAL DR

City State Zip Code
SAINT LOUIS MO 63131

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 ▼ 357.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.33777

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
V EVELYN DE WITT, MRS

Mailing Address 1268 W KILDARE ST

City State Zip Code
LANCASTER CA 93534-2233

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

Name of Employer Occupation
TOT-TIME CHILD DEVEL.CTR. CEO

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 0 / 1 1 / 2 0 0 7

Transaction ID: SA11AI.33738

Amount of Each Receipt this Period
75.00

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 58 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
C JACK DILTS, MR

Mailing Address 8100 WYO M-4 #507

City ABQ State NM Zip Code 87113

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 ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.33787

Amount of Each Receipt this Period 50.00

B.

Full Name (Last, First, Middle Initial)
J JOSEPH DIOGUARDI, MR

Mailing Address PO BOX 70

City OSSINING State NY Zip Code 10562-0070

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 ▼ 400.00

Date of Receipt M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.33792

Amount of Each Receipt this Period 200.00

C.

Full Name (Last, First, Middle Initial)
A PATRICK DOHENY, MR

Mailing Address 136 EL CAMINO DR

City BEVERLY HILLS State CA Zip Code 90212

FEC ID number of contributing federal political committee. C

Name of Employer VANDERBILT UNIVERSITY Occupation ACCOUNT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.33801

Amount of Each Receipt this Period 300.00

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: PAGE 59 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
G Russell Douglas, Mr
Mailing Address 400 NE 47th St

City State Zip Code
Boca Raton FL 33431

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 ▼ **260.00**

Date of Receipt
M M / D D / Y Y Y Y Y
09 28 2007

Transaction ID: SA11AI.33823

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
G Russell Douglas, Mr
Mailing Address 400 NE 47th St

City State Zip Code
Boca Raton FL 33431

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 ▼ **360.00**

Date of Receipt
M M / D D / Y Y Y Y Y
11 19 2007

Transaction ID: SA11AI.33824

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
G Russell Douglas, Mr
Mailing Address 400 NE 47th St

City State Zip Code
Boca Raton FL 33431

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 ▼ **560.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 24 2007

Transaction ID: SA11AI.33825

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
J TERRENCE DOYLE, MR

Mailing Address 1041 S AHRENS AVE

City State Zip Code
LOMBARD IL 60148

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 ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.33830

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MR JOHN DRAGHI

Mailing Address 473 W END AVE APT 13B

City State Zip Code
NEW YORK NY 10024

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

Name of Employer Occupation
ORUNTAL AND CO INC INVESTMENTS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2045.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.33831

Amount of Each Receipt this Period
225.00

C.

Full Name (Last, First, Middle Initial)
Rev Horald Drexler

Mailing Address 2215 Windsor Ave

City State Zip Code
Dubuque IA 52001-0623

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

Name of Employer Occupation
RETIRED ARMY OFFICER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.33837

Amount of Each Receipt this Period
130.00

SUBTOTAL of Receipts This Page (optional) ▶

405.00

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 61 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Rev Horald Drexler
Mailing Address 2215 Windsor Ave
City State Zip Code
Dubuque IA 52001-0623
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation ARMY OFFICER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 295.00
Date of Receipt 09 / 14 / 2007
Transaction ID: SA11AI.33836
Amount of Each Receipt this Period 65.00

B. Full Name (Last, First, Middle Initial)
J Brewster Durkee, Mr
Mailing Address 5027 River Point Rd
City State Zip Code
Jacksonville FL 32207
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 ▼ 300.00
Date of Receipt 08 / 03 / 2007
Transaction ID: SA11AI.33849
Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
J Brewster Durkee, Mr
Mailing Address 5027 River Point Rd
City State Zip Code
Jacksonville FL 32207
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 ▼ 600.00
Date of Receipt 09 / 12 / 2007
Transaction ID: SA11AI.33850
Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) ► 665.00
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 62 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
J Brewster Durkee, Mr
Mailing Address 5027 River Point Rd
City Jacksonville State FL Zip Code 32207
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 ▼ 800.00
Date of Receipt 10 / 15 / 2007
Transaction ID: SA11AI.33848
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
MR DON ECKERT
Mailing Address 3665 S COUNTY ROAD 300 E
City JANESVILLE State WI Zip Code 53545
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 ▼ 250.00
Date of Receipt 08 / 01 / 2007
Transaction ID: SA11AI.33862
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
F William Edmonds, Mr
Mailing Address 2600 Arlington Ave S Apt 60
City Birmingham State AL Zip Code 35205-4160
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 ▼ 350.00
Date of Receipt 08 / 27 / 2007
Transaction ID: SA11AI.33864
Amount of Each Receipt this Period 50.00

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: PAGE 63 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
F William Edmonds, Mr
Mailing Address 2600 Arlington Ave S Apt 60
City Birmingham State AL Zip Code 35205-4160
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 ▼ 400.00
Date of Receipt 11 / 13 / 2007
Transaction ID: SA11AI.33865
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
P BERNIS ELVERUM, MS
Mailing Address 501 ST ST SE
City FARIBAULT State MN Zip Code 55021-6352
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation DESIGN ENGINEER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 213.00
Date of Receipt 09 / 26 / 2007
Transaction ID: SA11AI.33885
Amount of Each Receipt this Period 120.00

C. Full Name (Last, First, Middle Initial)
P BERNIS ELVERUM, MS
Mailing Address 501 ST ST SE
City FARIBAULT State MN Zip Code 55021-6352
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation DESIGN ENGINEER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 263.00
Date of Receipt 11 / 19 / 2007
Transaction ID: SA11AI.33884
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 220.00
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 64 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS. HERMINE EMMERT

Mailing Address 14400 HOMECREST ROAD APT. 137

City State Zip Code
SILVER SPRING MD 20906

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 ▼ 218.00

Date of Receipt MM / DD / YYYY
07 / 30 / 2007

Transaction ID: SA11AI.33890

Amount of Each Receipt this Period 40.00

B.

Full Name (Last, First, Middle Initial)
MRS. HERMINE EMMERT

Mailing Address 14400 HOMECREST ROAD APT. 137

City State Zip Code
SILVER SPRING MD 20906

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 ▼ 258.00

Date of Receipt MM / DD / YYYY
08 / 27 / 2007

Transaction ID: SA11AI.33891

Amount of Each Receipt this Period 40.00

C.

Full Name (Last, First, Middle Initial)
MRS. HERMINE EMMERT

Mailing Address 14400 HOMECREST ROAD APT. 137

City State Zip Code
SILVER SPRING MD 20906

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 ▼ 298.00

Date of Receipt MM / DD / YYYY
11 / 13 / 2007

Transaction ID: SA11AI.33892

Amount of Each Receipt this Period 40.00

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: PAGE 65 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR ROBERT ESCHERICH

Mailing Address 3824 SYCAMORE HEIGHTS PL

City MESA State AZ Zip Code 85205

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 ▼ 266.00

Date of Receipt: 11 / 15 / 2007
Transaction ID: SA11AI.33911
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
F N P FANNING, MR

Mailing Address PO BOX 607

City UNIONVILLE State PA Zip Code 19375

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

Name of Employer SELF EMPLOYED Occupation FINANCIAL MANAG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1700.00

Date of Receipt: 08 / 03 / 2007
Transaction ID: SA11AI.33926
 Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
F N P FANNING, MR

Mailing Address PO BOX 607

City UNIONVILLE State PA Zip Code 19375

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

Name of Employer SELF EMPLOYED Occupation FINANCIAL MANAG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2200.00

Date of Receipt: 08 / 24 / 2007
Transaction ID: SA11AI.33927
 Amount of Each Receipt this Period: 500.00

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: PAGE 66 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) F N P FANNING, MR		Date of Receipt M M / D D / Y Y Y Y Y 09 / 07 / 2007		
	Mailing Address PO BOX 607		Transaction ID: SA11AI.33925		
	City UNIONVILLE	State PA	Zip Code 19375	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer SELF EMPLOYED	Occupation FINANCIAL MANAG			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2300.00			

B.	Full Name (Last, First, Middle Initial) E Helen Farson, Mrs		Date of Receipt M M / D D / Y Y Y Y Y 08 / 27 / 2007		
	Mailing Address 211 S 6th St Apt 111		Transaction ID: SA11AI.33930		
	City Alhambra	State CA	Zip Code 91801-3621	Amount of Each Receipt this Period 35.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer RETIRED	Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

C.	Full Name (Last, First, Middle Initial) E Helen Farson, Mrs		Date of Receipt M M / D D / Y Y Y Y Y 11 / 13 / 2007		
	Mailing Address 211 S 6th St Apt 111		Transaction ID: SA11AI.33931		
	City Alhambra	State CA	Zip Code 91801-3621	Amount of Each Receipt this Period 35.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer RETIRED	Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.00			

SUBTOTAL of Receipts This Page (optional) ▶

170.00

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 67 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
E Helen Farson, Mrs
Mailing Address 211 S 6th St Apt 111
City Alhambra State CA Zip Code 91801-3621
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 / 28 / 2007
Transaction ID: SA11AI.33932
Amount of Each Receipt this Period 35.00

B. Full Name (Last, First, Middle Initial)
B ALBERT FERGUSON, MR
Mailing Address 300 FOX CHAPEL RD
City PITTSBURGH State PA Zip Code 15238-2331
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 ▼ 235.00
Date of Receipt 11 / 15 / 2007
Transaction ID: SA11AI.33936
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
DR JOHN FISCHER
Mailing Address 681 NW 73RD AVE
City PLANTATION State FL Zip Code 33317
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation AUTHOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00
Date of Receipt 07 / 16 / 2007
Transaction ID: SA11AI.33953
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 185.00
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 68 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

D ROBERT FISHER, MR

Mailing Address PO BOX 29147

City

SAN JUAN

State

PR

Zip Code

00929-0147

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RET

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

MM / DD / YYYY
08 / 29 / 2007

Transaction ID: SA11AI.33954

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MS EDITH FLEMINBERG

Mailing Address 805 LONDONDERRY RD

City

SCHENECTADY

State

NY

Zip Code

12309-6419

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 ▼

210.00

Date of Receipt

MM / DD / YYYY
12 / 24 / 2007

Transaction ID: SA11AI.33963

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL FORTIER

Mailing Address 530 WHISPERING WIND CIR

City

CONWAY

State

AR

Zip Code

72034-3480

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 ▼

300.00

Date of Receipt

MM / DD / YYYY
09 / 26 / 2007

Transaction ID: SA11AI.33991

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR MILO FOSTER

Mailing Address 4007 NE SKIDMORE ST

City State Zip Code
NEENAH WI 54957

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

Name of Employer Occupation
KIMBERLY-CLARK CORP GENERAL MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2007

Transaction ID: SA11AI.33993

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MS GAY FRASER

Mailing Address 404 MORNINGSIDE DR

City State Zip Code
SAN FRANCISCO CA 94115

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 ▼ 270.00

Date of Receipt
MM / DD / YYYY
07 / 12 / 2007

Transaction ID: SA11AI.33998

Amount of Each Receipt this Period
150.00

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

Mailing Address 883 CNTRY CLUB DR

City State Zip Code
NORTH PALM BEACH FL 33408-3742

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 ▼ 240.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2007

Transaction ID: SA11AI.34001

Amount of Each Receipt this Period
120.00

SUBTOTAL of Receipts This Page (optional) ► **370.00**

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 70 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
E JANET FROELICH, MRS
Mailing Address 421 MAIN ST # 6
City SAYNER State WI Zip Code 54560-9702
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 ▼ 250.00
Date of Receipt 11 / 19 / 2007
Transaction ID: SA11AI.34011
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Frank H Gaines, Mr
Mailing Address 17506 Northridge Dr
City Neosho State MO Zip Code 64850-8741
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation LAWYER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt 09 / 17 / 2007
Transaction ID: SA11AI.34023
Amount of Each Receipt this Period 35.00

C. Full Name (Last, First, Middle Initial)
Frank H Gaines, Mr
Mailing Address 17506 Northridge Dr
City Neosho State MO Zip Code 64850-8741
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation LAWYER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00
Date of Receipt 10 / 29 / 2007
Transaction ID: SA11AI.34024
Amount of Each Receipt this Period 35.00

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: PAGE 71 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
W JAMES GALLE, MR

Mailing Address 7933 CHADWICK ST

City State Zip Code
PRAIRIE VLG KS 66208-4055

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 265.50

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 05 / 2007

Transaction ID: SA11AI.34032

Amount of Each Receipt this Period
66.00

B.

Full Name (Last, First, Middle Initial)
W JAMES GALLE, MR

Mailing Address 7933 CHADWICK ST

City State Zip Code
PRAIRIE VLG KS 66208-4055

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 365.50

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 24 / 2007

Transaction ID: SA11AI.34034

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
W JAMES GALLE, MR

Mailing Address 7933 CHADWICK ST

City State Zip Code
PRAIRIE VLG KS 66208-4055

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 490.50

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2007

Transaction ID: SA11AI.34035

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional)

291.00

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 72 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
W JAMES GALLE, MR
Mailing Address 7933 CHADWICK ST
City PRAIRIE VLG State KS Zip Code 66208-4055
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 ▼ 690.50
Date of Receipt 11 / 16 / 2007
Transaction ID: SA11AI.34038
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
W JAMES GALLE, MR
Mailing Address 7933 CHADWICK ST
City PRAIRIE VLG State KS Zip Code 66208-4055
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 ▼ 815.50
Date of Receipt 12 / 07 / 2007
Transaction ID: SA11AI.34036
Amount of Each Receipt this Period 125.00

C. Full Name (Last, First, Middle Initial)
W JAMES GALLE, MR
Mailing Address 7933 CHADWICK ST
City PRAIRIE VLG State KS Zip Code 66208-4055
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 ▼ 940.50
Date of Receipt 12 / 20 / 2007
Transaction ID: SA11AI.34037
Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional) ► 450.00
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 73 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
W JAMES GALLE, MR

Mailing Address 7933 CHADWICK ST

City State Zip Code
PRAIRIE VLG KS 66208-4055

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 ▼ 1190.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: SA11AI.34039

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
T Robert Gannett, Mr

Mailing Address 619 Plaesant Vly Rd

City State Zip Code
Brattleboro VT 05301-8828

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 ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.34041

Amount of Each Receipt this Period
75.00

C.

Full Name (Last, First, Middle Initial)
L HERBERT GARDNER, MR

Mailing Address 46 WATERMAN AVE

City State Zip Code
RUMSON NJ 07760-2040

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 Y
0 7 / 2 3 / 2 0 0 7

Transaction ID: SA11AI.34045

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **525.00**

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 74 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) L HERBERT GARDNER, MR Mailing Address 46 WATERMAN AVE City State Zip Code RUMSON NJ 07760-2040 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 7 Transaction ID: SA11AI.34044 Amount of Each Receipt this Period 50.00
	Name of Employer Occupation RETIRED RETIRED Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 270.00	
B.	Full Name (Last, First, Middle Initial) C JAMES GEHRIS, DR Mailing Address 100 W ARCH ST City State Zip Code SHAMOKIN PA 17872-5359 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 7 Transaction ID: SA11AI.34054 Amount of Each Receipt this Period 240.00
	Name of Employer Occupation SELF HOME REPAIR Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 460.00	
C.	Full Name (Last, First, Middle Initial) MR PHILIP GEIER, JR Mailing Address 6000 REDBIRD HOLLOW LN City State Zip Code CINCINNATI OH 45243-3331 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7 Transaction ID: SA11AI.34055 Amount of Each Receipt this Period 100.00
	Name of Employer Occupation RETIRED RETIRED Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 800.00	

SUBTOTAL of Receipts This Page (optional) ▶

390.00

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 75 / 307
	<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR PHILIP GEIER, JR	Date of Receipt MM / DD / YYYY 08 / 15 / 2007
	Mailing Address 6000 REDBIRD HOLLOW LN	Transaction ID: SA11AI.34056
	City State Zip Code CINCINNATI OH 45243-3331	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

B.	Full Name (Last, First, Middle Initial) MR PHILIP GEIER, JR	Date of Receipt MM / DD / YYYY 10 / 22 / 2007
	Mailing Address 6000 REDBIRD HOLLOW LN	Transaction ID: SA11AI.34057
	City State Zip Code CINCINNATI OH 45243-3331	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) MR PHILIP GEIER, JR	Date of Receipt MM / DD / YYYY 11 / 01 / 2007
	Mailing Address 6000 REDBIRD HOLLOW LN	Transaction ID: SA11AI.34058
	City State Zip Code CINCINNATI OH 45243-3331	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

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 76 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
M VERN GIBSON, MR
 Mailing Address 1001 N PASADENA UNIT 27
 City MESA State AZ Zip Code 85201
 Date of Receipt 07 / 20 / 2007
Transaction ID: SA11AI.34078
 Amount of Each Receipt this Period 285.00
 FEC ID number of contributing federal political committee. C
 Name of Employer SILVER ANVIL ENG CORP Occupation CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 662.00

B. Full Name (Last, First, Middle Initial)
M VERN GIBSON, MR
 Mailing Address 1001 N PASADENA UNIT 27
 City MESA State AZ Zip Code 85201
 Date of Receipt 08 / 03 / 2007
Transaction ID: SA11AI.34077
 Amount of Each Receipt this Period 190.00
 FEC ID number of contributing federal political committee. C
 Name of Employer SILVER ANVIL ENG CORP Occupation CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 852.00

C. Full Name (Last, First, Middle Initial)
M VERN GIBSON, MR
 Mailing Address 1001 N PASADENA UNIT 27
 City MESA State AZ Zip Code 85201
 Date of Receipt 10 / 11 / 2007
Transaction ID: SA11AI.34073
 Amount of Each Receipt this Period 66.00
 FEC ID number of contributing federal political committee. C
 Name of Employer SILVER ANVIL ENG CORP Occupation CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 918.00

SUBTOTAL of Receipts This Page (optional) ▶ 541.00
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 77 / 307
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
M VERN GIBSON, MR
 Mailing Address 1001 N PASADENA UNIT 27
 City MESA State AZ Zip Code 85201
 Date of Receipt MM / DD / YYYY: 10 / 19 / 2007
 Transaction ID: SA11AI.34075
 Amount of Each Receipt this Period: 100.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: SILVER ANVIL ENG CORP Occupation: CHEMIST
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 1018.00

B. Full Name (Last, First, Middle Initial)
M VERN GIBSON, MR
 Mailing Address 1001 N PASADENA UNIT 27
 City MESA State AZ Zip Code 85201
 Date of Receipt MM / DD / YYYY: 11 / 13 / 2007
 Transaction ID: SA11AI.34072
 Amount of Each Receipt this Period: 50.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: SILVER ANVIL ENG CORP Occupation: CHEMIST
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 1068.00

C. Full Name (Last, First, Middle Initial)
M VERN GIBSON, MR
 Mailing Address 1001 N PASADENA UNIT 27
 City MESA State AZ Zip Code 85201
 Date of Receipt MM / DD / YYYY: 11 / 21 / 2007
 Transaction ID: SA11AI.34076
 Amount of Each Receipt this Period: 100.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: SILVER ANVIL ENG CORP Occupation: CHEMIST
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 1168.00

SUBTOTAL of Receipts This Page (optional) ► 250.00
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 78 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
M VERN GIBSON, MR
Mailing Address 1001 N PASADENA UNIT 27
City MESA State AZ Zip Code 85201
FEC ID number of contributing federal political committee. **C**
Name of Employer SILVER ANVIL ENG CORP Occupation CHEMIST
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1243.00
Date of Receipt 12 / 20 / 2007
Transaction ID: SA11AI.34074
Amount of Each Receipt this Period 75.00

B. Full Name (Last, First, Middle Initial)
DR HUGH GILBERT
Mailing Address 1535 COLLEGE DR
City OWENSBORO State KY Zip Code 42301
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation SOCIAL WORKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 08 / 31 / 2007
Transaction ID: SA11AI.34080
Amount of Each Receipt this Period 75.00

C. Full Name (Last, First, Middle Initial)
DR HUGH GILBERT
Mailing Address 1535 COLLEGE DR
City OWENSBORO State KY Zip Code 42301
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation SOCIAL WORKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 10 / 26 / 2007
Transaction ID: SA11AI.34079
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 200.00
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 79 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR HAROLD GILMORE

Mailing Address 4288 BIG MEADOWS ST

City LIBERTY State IN Zip Code 47353

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

Name of Employer RETIRED Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 203.00

Date of Receipt: 07 / 20 / 2007
Transaction ID: SA11AI.34084
 Amount of Each Receipt this Period: 65.00

B.

Full Name (Last, First, Middle Initial)
MR HAROLD GILMORE

Mailing Address 4288 BIG MEADOWS ST

City LIBERTY State IN Zip Code 47353

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

Name of Employer RETIRED Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 269.00

Date of Receipt: 09 / 17 / 2007
Transaction ID: SA11AI.34085
 Amount of Each Receipt this Period: 66.00

C.

Full Name (Last, First, Middle Initial)
MR HAROLD GILMORE

Mailing Address 4288 BIG MEADOWS ST

City LIBERTY State IN Zip Code 47353

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

Name of Employer RETIRED Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 294.00

Date of Receipt: 10 / 19 / 2007
Transaction ID: SA11AI.34082
 Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ► **156.00**

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 80 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR HAROLD GILMORE

Mailing Address 4288 BIG MEADOWS ST

City State Zip Code
LIBERTY IN 47353

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

Name of Employer Occupation
RETIRED FARMER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 349.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.34083

Amount of Each Receipt this Period
55.00

B.

Full Name (Last, First, Middle Initial)
MR DELBERT GLASER

Mailing Address 31997 SAND RIDGE RD

City State Zip Code
LEBANON OR 97355

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

Name of Employer Occupation
RETIRED RET/PHYSICIAN

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 801.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.34091

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
MR DELBERT GLASER

Mailing Address 31997 SAND RIDGE RD

City State Zip Code
LEBANON OR 97355

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

Name of Employer Occupation
RETIRED RET/PHYSICIAN

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 901.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.34089

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)

305.00

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 81 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR DELBERT GLASER

Mailing Address 31997 SAND RIDGE RD

City State Zip Code
LEBANON OR 97355

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

Name of Employer Occupation
RETIRED RET/PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1001.00**

Date of Receipt **10 / 29 / 2007**

Transaction ID: SA11AI.34090

Amount of Each Receipt this Period **100.00**

B. Full Name (Last, First, Middle Initial)
A THOMAS GLEESON, MR

Mailing Address 2106 OLD BAINBRIDGE RD

City State Zip Code
TALLAHASSEE FL 32303-3905

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 ▼ **230.00**

Date of Receipt **08 / 17 / 2007**

Transaction ID: SA11AI.34098

Amount of Each Receipt this Period **110.00**

C. Full Name (Last, First, Middle Initial)
A THOMAS GLEESON, MR

Mailing Address 2106 OLD BAINBRIDGE RD

City State Zip Code
TALLAHASSEE FL 32303-3905

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 ▼ **280.00**

Date of Receipt **11 / 19 / 2007**

Transaction ID: SA11AI.34097

Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional) **260.00**

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 82 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
H MARVIN GOEHRING, MR & MRS
Mailing Address 301 W REDWOOD ST # 11
City State Zip Code
PARKSTON SD 57366-2253
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 ▼ 625.00
Date of Receipt: 08 / 27 / 2007
Transaction ID: SA11AI.34106
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
MR JERRY GOOD
Mailing Address 4340 LAHRING RD
City State Zip Code
NARVON PA 17555
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
TYSON FOODS INC TRUCKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 238.00
Date of Receipt: 10 / 03 / 2007
Transaction ID: SA11AI.34120
Amount of Each Receipt this Period: 80.00

C. Full Name (Last, First, Middle Initial)
DR BRIAN GORDON
Mailing Address 7620 NORTH MELISSA LN
City State Zip Code
ANDREWS TX 79714-2708
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
SELF EMPLOYED GENERAL SURGEON
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 08 / 06 / 2007
Transaction ID: SA11AI.34132
Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ► 380.00
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 83 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR BRIAN GORDON

Mailing Address 7620 NORTH MELISSA LN

City State Zip Code
ANDREWS TX 79714-2708

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

Name of Employer Occupation
SELF EMPLOYED GENERAL SURGEON

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2007

Transaction ID: SA11AI.34133

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MS BETH GRAY

Mailing Address 2409 SAINT JOSEPH ST

City State Zip Code
SULPHUR LA 70663-6153

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 ▼ 378.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2007

Transaction ID: SA11AI.34145

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MRS EDITH GRAY

Mailing Address 3446 CNTRY ST 2870

City State Zip Code
NINNEKAH OK 73067

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 ▼ 225.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2007

Transaction ID: SA11AI.34146

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: PAGE 84 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
G MARILYN GRAY, MS

Mailing Address 1808 MEWS DR

City State Zip Code
WILMINGTON NC 28405-4038

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
FEDERAL COURT HOUSE COURT SECURITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
11 / 15 / 2007

Transaction ID: SA11AI.34147

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
Mr John Green

Mailing Address PO Box 4014

City State Zip Code
Monterey CA 93942

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 ▼ 350.00

Date of Receipt MM / DD / YYYY
07 / 23 / 2007

Transaction ID: SA11AI.34150

Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
W WILLIAM GRESHAM, MR

Mailing Address PO BOX 690

City State Zip Code
INDIANOLA MS 38751-0690

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 ▼ 350.00

Date of Receipt MM / DD / YYYY
09 / 24 / 2007

Transaction ID: SA11AI.34161

Amount of Each Receipt this Period 150.00

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: PAGE 85 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
W WILLIAM GRESHAM, MR
Mailing Address PO BOX 690
City INDIANOLA State MS Zip Code 38751-0690
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 ▼ 450.00
Date of Receipt 10 / 19 / 2007
Transaction ID: SA11AI.34160
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
H CARL GRIFFIN, MR & MRS
Mailing Address 1021 MOCKING BIRD CT
City ALLENTOWN State PA Zip Code 18103-4648
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 10 / 29 / 2007
Transaction ID: SA11AI.34166
Amount of Each Receipt this Period 70.00

C. Full Name (Last, First, Middle Initial)
G DOROTHY GRIFFIN, MRS
Mailing Address 4801 18TH ST
City ROME State NY Zip Code 13440
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 ▼ 500.00
Date of Receipt 07 / 20 / 2007
Transaction ID: SA11AI.34168
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 670.00
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 86 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
TYLER J GRIFFIN, MR

Mailing Address 77 MIDDLE RD APT 360

City	State	Zip Code
BRYN MAWR	PA	19010-1779

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

Name of Employer WESTPORT POLICE DEPT	Occupation MECHANIC
--	------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 12 / 2007

Transaction ID: SA11AI.34169

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
TYLER J GRIFFIN, MR

Mailing Address 77 MIDDLE RD APT 360

City	State	Zip Code
BRYN MAWR	PA	19010-1779

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

Name of Employer WESTPORT POLICE DEPT	Occupation MECHANIC
--	------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2007

Transaction ID: SA11AI.34170

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)
Mr Richard Griffith

Mailing Address PO Box 91610

City	State	Zip Code
Lafayette	LA	70509-1610

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 20 / 2007

Transaction ID: SA11AI.34175

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

700.00

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

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

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

FOR LINE NUMBER: PAGE 87 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr Richard Griffith

Mailing Address PO Box 91610

City State Zip Code
Lafayette LA 70509-1610

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 ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.34176

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
G GEORGE GRIMMER, MR.

Mailing Address 3040 ERIC LN

City State Zip Code
DALLAS TX 75234-6418

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 ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.34184

Amount of Each Receipt this Period
116.00

C. Full Name (Last, First, Middle Initial)
R LAWRENCE GROBL, MR

Mailing Address PO BOX 53163

City State Zip Code
PINOS ALTOS NM 88053-3163

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 ▼ 326.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.34187

Amount of Each Receipt this Period
260.00

SUBTOTAL of Receipts This Page (optional) ▶ **476.00**

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 88 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
R LAWRENCE GROBL, MR

Mailing Address PO BOX 53163

City PINOS ALTOS State NM Zip Code 88053-3163

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 ▼ 651.00

Date of Receipt: 07 / 25 / 2007
Transaction ID: SA11AI.34188
Amount of Each Receipt this Period: 325.00

B. Full Name (Last, First, Middle Initial)
MR IVAN GROSSMAN, MD

Mailing Address 102 SEGOLILY CT

City LINCOLN State CA Zip Code 45648-8115

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 ▼ 219.50

Date of Receipt: 07 / 20 / 2007
Transaction ID: SA11AI.34195
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
MR CLIFFORD HALL

Mailing Address 9047 DICKENSON RD

City WINNEBAGO State IL Zip Code 61088-8933

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

Name of Employer RETIRED Occupation RET

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 24 / 2007
Transaction ID: SA11AI.34244
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► **475.00**

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 89 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
E SHIRLEY HALL, MS

Mailing Address 170 NORWOOD DR

City State Zip Code
COUNCIL BLUFFS IA 51503-8400

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 ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 16 / 2007

Transaction ID: SA11AI.34247

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
E SHIRLEY HALL, MS

Mailing Address 170 NORWOOD DR

City State Zip Code
COUNCIL BLUFFS IA 51503-8400

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 ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2007

Transaction ID: SA11AI.34248

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
MRS CAROLYN HAMAN

Mailing Address PO BOX 176
8917 S PALMER RD

City State Zip Code
NEW CARLISLE OH 45344-9668

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 ▼ 299.50

Date of Receipt

M M / D D / Y Y Y Y
07 / 12 / 2007

Transaction ID: SA11AI.34256

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶

250.00

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 90 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS CAROLYN HAMAN

Mailing Address PO BOX 176
8917 S PALMER RD

City State Zip Code
NEW CARLISLE OH 45344-9668

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) ▼ 349.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.34257

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MRS CAROLYN HAMAN

Mailing Address PO BOX 176
8917 S PALMER RD

City State Zip Code
NEW CARLISLE OH 45344-9668

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) ▼ 399.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	7

Transaction ID: SA11AI.34258

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MRS CAROLYN HAMAN

Mailing Address PO BOX 176
8917 S PALMER RD

City State Zip Code
NEW CARLISLE OH 45344-9668

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) ▼ 449.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	0	7

Transaction ID: SA11AI.34259

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **150.00**

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 91 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS DORIS HAMILTON

Mailing Address 1300 NE 16TH AVE APT 1122

City State Zip Code
PORTLAND OR 97232

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 ▼ 393.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 16 / 2007

Transaction ID: SA11AI.34261

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
MS DORIS HAMILTON

Mailing Address 1300 NE 16TH AVE APT 1122

City State Zip Code
PORTLAND OR 97232

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 ▼ 428.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 19 / 2007

Transaction ID: SA11AI.34260

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)
Mr Kern Hamilton

Mailing Address 800 Blossom Hill Rd Unit E324

City State Zip Code
Los Gatos CA 95032

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 ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2007

Transaction ID: SA11AI.34262

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional) ▶

260.00

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 92 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR HOWARD HAMMACK

Mailing Address 454 MARINE VIEW PL

City State Zip Code
TALLAHSSEE FL 32312

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 ▼ 205.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2007

Transaction ID: SA11AI.34266

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR HOWARD HAMMACK

Mailing Address 454 MARINE VIEW PL

City State Zip Code
TALLAHSSEE FL 32312

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 ▼ 238.00

Date of Receipt
MM / DD / YYYY
09 / 07 / 2007

Transaction ID: SA11AI.34264

Amount of Each Receipt this Period
33.00

C. Full Name (Last, First, Middle Initial)
MR HOWARD HAMMACK

Mailing Address 454 MARINE VIEW PL

City State Zip Code
TALLAHSSEE FL 32312

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 ▼ 338.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2007

Transaction ID: SA11AI.34268

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **183.00**

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 93 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR HOWARD HAMMACK

Mailing Address 454 MARINE VIEW PL

City State Zip Code
TALLAHSSEE FL 32312

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 ▼ 388.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.34267

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR LARRY HARSEY

Mailing Address 280 HWY 1 S

City State Zip Code
CHERAW SC 29520-2848

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

Name of Employer Occupation
RETIRED RET

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.34301

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
DR JOHN HARTFORD

Mailing Address 4650 WESTFORD CIR

City State Zip Code
WALNUT CREEK CA 94595

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 ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.34304

Amount of Each Receipt this Period
105.00

SUBTOTAL of Receipts This Page (optional) ► 255.00

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 94 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR JOHN HARTFORD

Mailing Address 4650 WESTFORD CIR

City State Zip Code
WALNUT CREEK CA 94595

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 ▼ 380.00

Date of Receipt
MM / DD / YYYY
07 / 30 / 2007

Transaction ID: SA11AI.34303

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
A JAMES HARTMAN, MR

Mailing Address 4916 JULE DR

City State Zip Code
PANORA IA 50216-8620

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

Name of Employer Occupation
WILLOTTA RANCH FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
11 / 19 / 2007

Transaction ID: SA11AI.34307

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MRS MARGARET HASSENPFUG

Mailing Address 3034 GRAFTON RD

City State Zip Code
MORGANTOWN WV 26508

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 ▼ 300.00

Date of Receipt
MM / DD / YYYY
07 / 12 / 2007

Transaction ID: SA11AI.34318

Amount of Each Receipt this Period
50.00

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 95 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS MARGARET HASSENPFUG

Mailing Address 3034 GRAFTON RD

City State Zip Code
MORGANTOWN WV 26508

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 ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 20 / 2007

Transaction ID: SA11AI.34319

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MRS MARGARET HASSENPFUG

Mailing Address 3034 GRAFTON RD

City State Zip Code
MORGANTOWN WV 26508

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 ▼ 390.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 19 / 2007

Transaction ID: SA11AI.34317

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
MS MADELINE HAVEMAN

Mailing Address 3781 GIDDINGS AVE SE APT 221

City State Zip Code
GRAND RAPIDS MI 49508-5564

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 ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 24 / 2007

Transaction ID: SA11AI.34329

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 140.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
W JACK HAWKINS, MR
Mailing Address 1601 ELM ST STE 300

City State Zip Code
DALLAS TX 75201

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2007

Transaction ID: SA11AI.34336

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
W HENRY HEAPS, REV & MRS
Mailing Address 3964 STREET RD

City State Zip Code
STREET MD 21154

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

Name of Employer Occupation
Pastor Pastor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt
MM / DD / YYYY
07 / 27 / 2007

Transaction ID: SA11AI.34341

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
W HENRY HEAPS, REV & MRS
Mailing Address 3964 STREET RD

City State Zip Code
STREET MD 21154

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

Name of Employer Occupation
Pastor Pastor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2007

Transaction ID: SA11AI.34342

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 97 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
M Ella Helm, Ms
Mailing Address 3385 Hallmark Dr Se
City Marietta State GA Zip Code 30067
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 ▼ 231.00
Date of Receipt MM / DD / YYYY
11 / 15 / 2007
Transaction ID: SA11AI.34367
Amount of Each Receipt this Period 75.00

B. Full Name (Last, First, Middle Initial)
MS MARGARET HELTON
Mailing Address 3350 TAUNBROOK DR
City WALFORD State MD Zip Code 20735
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 ▼ 225.00
Date of Receipt MM / DD / YYYY
08 / 03 / 2007
Transaction ID: SA11AI.34370
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
MS MARGARET HELTON
Mailing Address 3350 TAUNBROOK DR
City WALFORD State MD Zip Code 20735
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 ▼ 325.00
Date of Receipt MM / DD / YYYY
09 / 26 / 2007
Transaction ID: SA11AI.34371
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 98 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS MARGARET HELTON

Mailing Address 3350 TAUNBROOK DR

City State Zip Code
WALFORD MD 20735

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 ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.34369

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)
W John Henderson, Dr

Mailing Address 4001 Glacier Hills Dr

City State Zip Code
Ann Arbor MI 48105

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 Y
0 8 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.34380

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
W John Henderson, Dr

Mailing Address 4001 Glacier Hills Dr

City State Zip Code
Ann Arbor MI 48105

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 ▼ 295.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.34379

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional) ▶

250.00

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 99 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
W John Henderson, Dr

Mailing Address 4001 Glacier Hills Dr

City State Zip Code
Ann Arbor MI 48105

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 ▼ 345.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.34378

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
CARL HERBRANSON

Mailing Address RR 1 BOX 281

City State Zip Code
HENNING MN 56551

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

Name of Employer Occupation
TAX CORPORATION CPA SEMI-RETIRE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.34394

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
MR VUCTIR HERTSLET

Mailing Address 704 THORNWOOD CT

City State Zip Code
TOWSON MD 21286

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 ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 2 / 2 0 0 7

Transaction ID: SA11AI.34402

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional) ▶

400.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 100 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS AUDREY HICKMAN

Mailing Address 109 FLORA DR

City State Zip Code
HAINES CITY FL 33844

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

Name of Employer Occupation
DUFF CO MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2007

Transaction ID: SA11AI.34409

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MRS AUDREY HICKMAN

Mailing Address 109 FLORA DR

City State Zip Code
HAINES CITY FL 33844

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

Name of Employer Occupation
DUFF CO MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2007

Transaction ID: SA11AI.34408

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MS VIOLA HILL

Mailing Address 902 3RD ST E APT B11

City State Zip Code
ROUNDUP MT 59072-2323

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

Name of Employer Occupation
CARDIOVIOSEVLAY CONSULTAN DOCTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 19 / 2007

Transaction ID: SA11AI.34423

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 101 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
G THEODORE HINES, MR
Mailing Address 434 E WASHINGTON BLVD
City GROVE CITY State PA Zip Code 16127
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation INSURANCE SALES
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00
Date of Receipt 10 / 19 / 2007
Transaction ID: SA11AI.34430
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
REV CARL HINRICHSEN
Mailing Address PO BOX 607
City PARK RIDGE State NJ Zip Code 07656-2036
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation DOCTOR
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00
Date of Receipt 11 / 30 / 2007
Transaction ID: SA11AI.34432
Amount of Each Receipt this Period 700.00

C. Full Name (Last, First, Middle Initial)
H R HOFFMANN, MR
Mailing Address 5146 BELDEN AVE
City DOWNERS GROVE State IL Zip Code 60515-4774
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 ▼ 300.00
Date of Receipt 12 / 11 / 2007
Transaction ID: SA11AI.34445
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 900.00
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 102 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR CARL HOLEKAMP, JR

Mailing Address 4958 NE 39TH AVE

City State Zip Code
VALLEY PARK MO 63088

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

Name of Employer RETIRED Occupation REAL ESTATE SAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
MM / DD / YYYY
07 / 03 / 2007

Transaction ID: SA11AI.34448

Amount of Each Receipt this Period
95.00

B.

Full Name (Last, First, Middle Initial)
MR CARL HOLEKAMP, JR

Mailing Address 4958 NE 39TH AVE

City State Zip Code
VALLEY PARK MO 63088

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

Name of Employer RETIRED Occupation REAL ESTATE SAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2007

Transaction ID: SA11AI.34447

Amount of Each Receipt this Period
66.00

C.

Full Name (Last, First, Middle Initial)
MR FRED HOLLENBERG

Mailing Address 801 W MIDDLE ST APT 171

City State Zip Code
CHELSEA MI 48118

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 ▼ 266.00

Date of Receipt
MM / DD / YYYY
09 / 05 / 2007

Transaction ID: SA11AI.34453

Amount of Each Receipt this Period
66.00

SUBTOTAL of Receipts This Page (optional) ▶ **227.00**

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 103 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
H HOWELL HOWARD, MR

Mailing Address 205 WAGNER RD

City NORTHFIELD State IL Zip Code 60093

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

Name of Employer COLUMBUS, OH Occupation FINANC.PLANNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 08 / 06 / 2007
Transaction ID: SA11AI.34475
 Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
H HOWELL HOWARD, MR

Mailing Address 205 WAGNER RD

City NORTHFIELD State IL Zip Code 60093

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

Name of Employer COLUMBUS, OH Occupation FINANC.PLANNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 11 / 01 / 2007
Transaction ID: SA11AI.34476
 Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
H HOWELL HOWARD, MR

Mailing Address 205 WAGNER RD

City NORTHFIELD State IL Zip Code 60093

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

Name of Employer COLUMBUS, OH Occupation FINANC.PLANNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 14 / 2007
Transaction ID: SA11AI.34477
 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 104 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
H James Howe, Mr

Mailing Address 3 Upper Price Rd

City State Zip Code
Saint Louis MO 63132-4470

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

Name of Employer Occupation
DOWNTOWN PHYSICIANS, INC MD

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 491.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.34481

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)
MS. PATRICIA HUGHES

Mailing Address 107 CASA LINDA DR

City State Zip Code
WOODLAND CA 95695-4613

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 ▼ 223.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.34494

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)
R ROBERT HUNTER, MR

Mailing Address 641 NE WYOMING DR

City State Zip Code
PRINEVILLE OR 97754-7907

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 ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.34500

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional) ▶

335.00

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 105 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
R ROBERT HUNTER, MR

Mailing Address 641 NE WYOMING DR

City State Zip Code
PRINEVILLE OR 97754-7907

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 ▼ 450.00

Date of Receipt MM / DD / YYYY
11 / 02 / 2007

Transaction ID: SA11AI.34501

Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Mrs Elizabeth Ivey

Mailing Address 1616 Carl Durham Rd

City State Zip Code
Chapel Hill NC 27516-7617

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 ▼ 275.00

Date of Receipt MM / DD / YYYY
07 / 13 / 2007

Transaction ID: SA11AI.34530

Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mrs Elizabeth Ivey

Mailing Address 1616 Carl Durham Rd

City State Zip Code
Chapel Hill NC 27516-7617

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 ▼ 350.00

Date of Receipt MM / DD / YYYY
10 / 19 / 2007

Transaction ID: SA11AI.34531

Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional) 325.00

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 106 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR BRUCE JACOBS

Mailing Address 5284 REISTERSTOWN RD

City ANACORTES State WA Zip Code 98221

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 ▼ 500.00

Date of Receipt: 08 / 20 / 2007
Transaction ID: SA11AI.34535
 Amount of Each Receipt this Period: 150.00

B. Full Name (Last, First, Middle Initial)
L CARMEN JOHNSON, MRS

Mailing Address 102 HIDDEN BLUFF LN

City CARY State NC Zip Code 27513-5708

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 ▼ 225.00

Date of Receipt: 10 / 22 / 2007
Transaction ID: SA11AI.34564
 Amount of Each Receipt this Period: 75.00

C. Full Name (Last, First, Middle Initial)
L CARMEN JOHNSON, MRS

Mailing Address 102 HIDDEN BLUFF LN

City CARY State NC Zip Code 27513-5708

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 ▼ 325.00

Date of Receipt: 12 / 14 / 2007
Transaction ID: SA11AI.34565
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► **325.00**

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 107 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
EARL HERBERT JOHNSON, MR & MRS

Mailing Address 16 GANDER DR

City State Zip Code
SHERIDAN WY 82801-8648

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

Name of Employer Occupation
RETIRED RETIRED TEACHER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.34575

Amount of Each Receipt this Period
60.00

B.

Full Name (Last, First, Middle Initial)
MR LAVERNE JOHNSON

Mailing Address 53 FOX RUN RD

City State Zip Code
GROSSE POINTE PARK MI 48230-1413

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 ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.34577

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
MR RAYMOND JOHNSON

Mailing Address 495 S TAAFFE ST

City State Zip Code
SUNNYVALE CA 94086-7627

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 ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.34585

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶

610.00

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 108 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
W ROBERT JOHNSON, MR
Mailing Address 22658 FINNELL AVE
City CORNING State CA Zip Code 96021-9760
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 ▼ 270.00
Date of Receipt 10 / 29 / 2007
Transaction ID: SA11AI.34589
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
MR ROBERT JOHNSON
Mailing Address 55 W 84TH ST # 20C
City SAN LUIS OBISPO State CA Zip Code 93405
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 ▼ 250.00
Date of Receipt 12 / 17 / 2007
Transaction ID: SA11AI.34586
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
MR EDWIN JONES, JR
Mailing Address 7035 MARCHING DUCK DR APT E406
City CHARLOTTE State NC Zip Code 28210
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 ▼ 300.00
Date of Receipt 07 / 23 / 2007
Transaction ID: SA11AI.34597
Amount of Each Receipt this Period 200.00

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: PAGE 109 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR EDWIN JONES, JR

Mailing Address 7035 MARCHING DUCK DR APT E406

City State Zip Code
CHARLOTTE NC 28210

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 ▼ 366.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2007

Transaction ID: SA11AI.34596

Amount of Each Receipt this Period
66.00

B. Full Name (Last, First, Middle Initial)
B MARY KASBOHM, MS

Mailing Address 149 FLEETWOOD TER

City State Zip Code
WILLIAMSVILLE NY 14221-4469

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

Name of Employer Occupation
RETIRED RET

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
07 / 03 / 2007

Transaction ID: SA11AI.34625

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
B MARY KASBOHM, MS

Mailing Address 149 FLEETWOOD TER

City State Zip Code
WILLIAMSVILLE NY 14221-4469

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

Name of Employer Occupation
RETIRED RET

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt
MM / DD / YYYY
09 / 07 / 2007

Transaction ID: SA11AI.34626

Amount of Each Receipt this Period
65.00

SUBTOTAL of Receipts This Page (optional) ► **166.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 110 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS WARREN KEINATH, JR
Mailing Address 12342 CREEKHAVEN DR
City SAINT LOUIS State MO Zip Code 63131
FEC ID number of contributing federal political committee. **C**
Name of Employer UNIVERSITY OF RICHMOND Occupation PROFESSOR/RET
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 08 / 14 / 2007
Transaction ID: SA11AI.34637
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
M RICHARD KELLY, MR
Mailing Address 235 E 80TH ST
City NEW YORK State NY Zip Code 10021-0526
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 ▼ 250.00
Date of Receipt 11 / 07 / 2007
Transaction ID: SA11AI.34639
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
MS MARGARET KENNEDY
Mailing Address 1190 GLENWOOD DR
City ABILENE State TX Zip Code 79605
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 ▼ 320.00
Date of Receipt 09 / 26 / 2007
Transaction ID: SA11AI.34643
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 450.00
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 111 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR HARRY KERILL

Mailing Address 48510 WHITAKER RD

City State Zip Code
SAINT INIGOES MD 20684-3125

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.34652

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
L James Kilgore, Mr

Mailing Address PO Box 15175

City State Zip Code
Houston TX 77220

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

Name of Employer Occupation
AM. LAWN MOWER CO. ENGINEER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.34671

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
L James Kilgore, Mr

Mailing Address PO Box 15175

City State Zip Code
Houston TX 77220

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

Name of Employer Occupation
AM. LAWN MOWER CO. ENGINEER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 549.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.34669

Amount of Each Receipt this Period
49.50

SUBTOTAL of Receipts This Page (optional) ► **299.50**

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 112 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

L James Kilgore, Mr

Mailing Address PO Box 15175

City State Zip Code
Houston TX 77220

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

Name of Employer Occupation
AM. LAWN MOWER CO. ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 649.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	0	7

Transaction ID: SA11AI.34670

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

R DAVID KILLINGER, MRS.

Mailing Address 895 EDGEMONT PARK

City State Zip Code
GROSSE POINTE PARK MI 48230-1854

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 ▼ 225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	0	7

Transaction ID: SA11AI.34674

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

R DAVID KILLINGER, MRS.

Mailing Address 895 EDGEMONT PARK

City State Zip Code
GROSSE POINTE PARK MI 48230-1854

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 ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	7

Transaction ID: SA11AI.34673

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional) ▶

325.00

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

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

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FOR LINE NUMBER: PAGE 113 / 307
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR LEONARD KIRK

Mailing Address 6 HUNTER DR

City State Zip Code
BEL AIR MD 21014-3934

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) ▼ 521.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	1	/	2	0	0	7

Transaction ID: SA11AI.34687

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR LEONARD KIRK

Mailing Address 6 HUNTER DR

City State Zip Code
BEL AIR MD 21014-3934

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) ▼ 571.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	0	7

Transaction ID: SA11AI.34688

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR LEONARD KIRK

Mailing Address 6 HUNTER DR

City State Zip Code
BEL AIR MD 21014-3934

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) ▼ 621.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	0	7

Transaction ID: SA11AI.34689

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **150.00**

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 114 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
W ARTHUR KLINKE, MR
Mailing Address 233 BERKLEY AVE
City State Zip Code
BATTLE CREEK MI 49017-4543
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 ▼ 300.00
Date of Receipt: 08 / 29 / 2007
Transaction ID: SA11AI.34697
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
W ARTHUR KLINKE, MR
Mailing Address 233 BERKLEY AVE
City State Zip Code
BATTLE CREEK MI 49017-4543
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 ▼ 400.00
Date of Receipt: 10 / 31 / 2007
Transaction ID: SA11AI.34698
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
W ROY KNIPPER, MR
Mailing Address 441 19 WHITE TAIL DR
City State Zip Code
AURORA OH 44202-7514
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 ▼ 300.00
Date of Receipt: 08 / 17 / 2007
Transaction ID: SA11AI.34710
Amount of Each Receipt this Period: 150.00

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: PAGE 115 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
W ROY KNIPPER, MR

Mailing Address 441 19 WHITE TAIL DR

City State Zip Code
AURORA OH 44202-7514

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 ▼ **450.00**

Date of Receipt
MM / DD / YYYY
11 / 26 / 2007

Transaction ID: SA11AI.34711

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
MR QUENTIN KRAFKA

Mailing Address 921 SANTA ANNA DR

City State Zip Code
ALAMO TX 78516

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

Name of Employer Occupation
BAKER LLP ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **752.00**

Date of Receipt
MM / DD / YYYY
07 / 20 / 2007

Transaction ID: SA11AI.34736

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
F Thomas Kyle, Mrs

Mailing Address 215 Summerhaven Dr S

City State Zip Code
East Syracuse NY 13057

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

Name of Employer Occupation
LAKE RONEL OIL COMPANY CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
MM / DD / YYYY
09 / 07 / 2007

Transaction ID: SA11AI.34763

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 116 / 307
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
F Thomas Kyle, Mrs
 Mailing Address 215 Summerhaven Dr S
 City State Zip Code
 East Syracuse NY 13057
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 9 / 2 0 0 7
 Transaction ID: SA11AI.34764
 Amount of Each Receipt this Period
 75.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LAKE RONEL OIL COMPANY CHAIRMAN
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 425.00

B. Full Name (Last, First, Middle Initial)
MR FRANK LACHOWSKI
 Mailing Address 1254 S MAIN ST
 City State Zip Code
 PALMER MA 88053-3164
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 2 0 / 2 0 0 7
 Transaction ID: SA11AI.34773
 Amount of Each Receipt this Period
 300.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

C. Full Name (Last, First, Middle Initial)
E James Lain, Mr
 Mailing Address 16116 Bonaire Cir
 City State Zip Code
 Huntington Beach CA 92649
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 7 / 1 2 / 2 0 0 7
 Transaction ID: SA11AI.34778
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

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 117 / 307
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
E James Lain, Mr

Mailing Address 16116 Bonaire Cir

City State Zip Code
Huntington Beach CA 92649

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 ▼ 270.00

Date of Receipt
MM / DD / YYYY
08 / 06 / 2007

Transaction ID: SA11AI.34779

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
E James Lain, Mr

Mailing Address 16116 Bonaire Cir

City State Zip Code
Huntington Beach CA 92649

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 ▼ 310.00

Date of Receipt
MM / DD / YYYY
09 / 07 / 2007

Transaction ID: SA11AI.34777

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
E DONALD LAMPMAN, MR

Mailing Address 9126 SAN DIEGO RD

City State Zip Code
ATASCADERO CA 93422-5704

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

Name of Employer BEVERLY HEATING Occupation SALESMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
09 / 07 / 2007

Transaction ID: SA11AI.34788

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **190.00**

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 118 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
R JAMES LANCASTER, MR.
Mailing Address 3 GOOSE LAKE DR.
City BARRINGTON State IL Zip Code 60010-5140
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 08 / 27 / 2007
Transaction ID: SA11AI.34789
Amount of Each Receipt this Period: 500.00

Name of Employer: SELF EMPLOYED Occupation: SELF EMPLOYED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 1000.00

B. Full Name (Last, First, Middle Initial)
MR DORRANCE LANCE
Mailing Address 438 ALLOWAY FREISBURG RD
City BRIDGETON State NJ Zip Code 08302-5532
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 10 / 24 / 2007
Transaction ID: SA11AI.34791
Amount of Each Receipt this Period: 75.00

Name of Employer: RETIRED Occupation: RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 213.00

C. Full Name (Last, First, Middle Initial)
MR DORRANCE LANCE
Mailing Address 438 ALLOWAY FREISBURG RD
City BRIDGETON State NJ Zip Code 08302-5532
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 12 / 19 / 2007
Transaction ID: SA11AI.34792
Amount of Each Receipt this Period: 75.00

Name of Employer: RETIRED Occupation: RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 288.00

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: PAGE 119 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr Richard Larsen

Mailing Address 4305 Erie St Apt 503

City State Zip Code
Racine WI 53402-2861

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

Name of Employer Occupation
BLUE ASH AIRPORT PILOT/RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	0	/	2	0	0	7

Transaction ID: SA11AI.34811

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr Richard Larsen

Mailing Address 4305 Erie St Apt 503

City State Zip Code
Racine WI 53402-2861

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

Name of Employer Occupation
BLUE ASH AIRPORT PILOT/RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	7

Transaction ID: SA11AI.34812

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr Richard Larsen

Mailing Address 4305 Erie St Apt 503

City State Zip Code
Racine WI 53402-2861

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

Name of Employer Occupation
BLUE ASH AIRPORT PILOT/RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	0	7

Transaction ID: SA11AI.34815

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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

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

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

FOR LINE NUMBER: PAGE 120 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr Richard Larsen

Mailing Address 4305 Erie St Apt 503

City State Zip Code
Racine WI 53402-2861

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

Name of Employer Occupation
BLUE ASH AIRPORT PILOT/RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 825.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2007

Transaction ID: SA11AI.34816

Amount of Each Receipt this Period
225.00

B. Full Name (Last, First, Middle Initial)
Mr Richard Larsen

Mailing Address 4305 Erie St Apt 503

City State Zip Code
Racine WI 53402-2861

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

Name of Employer Occupation
BLUE ASH AIRPORT PILOT/RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 925.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2007

Transaction ID: SA11AI.34813

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr Richard Larsen

Mailing Address 4305 Erie St Apt 503

City State Zip Code
Racine WI 53402-2861

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

Name of Employer Occupation
BLUE ASH AIRPORT PILOT/RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
MM / DD / YYYY
12 / 07 / 2007

Transaction ID: SA11AI.34817

Amount of Each Receipt this Period
225.00

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: PAGE 121 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
H KENNETH LARSON, MR

Mailing Address 1860 BAY RD APT 104

City State Zip Code
VERO BEACH FL 32963

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

Name of Employer Occupation
RELIABLE HOME HEALTH SVC RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 20 / 2007

Transaction ID: SA11AI.34822

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
S JERRY LAUSMANN, MR

Mailing Address PO BOX 1608

City State Zip Code
MEDFORD OR 97501

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 ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 29 / 2007

Transaction ID: SA11AI.34835

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms Joan Lee

Mailing Address 15581 Shell Pt Blvd

City State Zip Code
Fort Myers FL 33908-1656

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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 10 / 2007

Transaction ID: SA11AI.34853

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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

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

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

FOR LINE NUMBER: PAGE 122 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR RICHARD LEECH

Mailing Address 2621 TURNBRIDGE CT

City State Zip Code
NORMAN OK 73072

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) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.34854

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
P FRANCIS LEHAR, MR

Mailing Address PO BOX 1482

City State Zip Code
MANCHESTER MA 01944-0856

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

Name of Employer ACTERNA Occupation ENGINEER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 975.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.34857

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr Francis Lehar

Mailing Address 11 Norwood Ave

City State Zip Code
Manchester MA 01944-1507

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) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.34856

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **475.00**

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 123 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR THEODORE LEININGER		Date of Receipt MM / DD / YYYY 12 / 11 / 2007		
	Mailing Address 6807 RICHMOND RD.		Transaction ID: SA11AI.34858		
	City EPHRATA	State PA	Zip Code 17522	Amount of Each Receipt this Period 35.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer RETIRED	Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

B.	Full Name (Last, First, Middle Initial) J MARY LEWIS, MS		Date of Receipt MM / DD / YYYY 10 / 24 / 2007		
	Mailing Address 1414 CONTINENTAL DR APT 1205		Transaction ID: SA11AI.34872		
	City CHATTANOOGA	State TN	Zip Code 37405-1524	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer RETIRED	Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

C.	Full Name (Last, First, Middle Initial) B JANICE LINDBERG, MS		Date of Receipt MM / DD / YYYY 10 / 12 / 2007		
	Mailing Address 1550 MOUNT OLIVET RD		Transaction ID: SA11AI.34882		
	City ZIRCONIA	State NC	Zip Code 28790	Amount of Each Receipt this Period 66.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer RETIRED	Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 266.00			

SUBTOTAL of Receipts This Page (optional)

201.00

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 124 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
B JANICE LINDBERG, MS
Mailing Address 1550 MOUNT OLIVET RD
City State Zip Code
ZIRCONIA NC 28790
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 ▼ 391.00
Date of Receipt: MM / DD / YYYY 10 / 22 / 2007
Transaction ID: SA11AI.34885
Amount of Each Receipt this Period 125.00

B. Full Name (Last, First, Middle Initial)
H JOHN LINDSEY, MR & MRS
Mailing Address 2001 KIRBY DR SUITE 1100
City State Zip Code
HOUSTON TX 77019
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 ▼ 300.00
Date of Receipt: MM / DD / YYYY 07 / 27 / 2007
Transaction ID: SA11AI.34886
Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
A ROBERT LINEBERGER, MRS
Mailing Address 2813 DOMINGO RD
City State Zip Code
FULLERTON CA 92835-2427
FEC ID number of contributing federal political committee. **C**
Name of Employer FAA Occupation ELECTRONIC TECH
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00
Date of Receipt: MM / DD / YYYY 08 / 03 / 2007
Transaction ID: SA11AI.34888
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 475.00
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 125 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
A ROBERT LINEBERGER, MRS
Mailing Address 2813 DOMINGO RD
City FULLERTON State CA Zip Code 92835-2427
FEC ID number of contributing federal political committee. **C**
Name of Employer FAA Occupation ELECTRONIC TECH
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 12 / 24 / 2007
Transaction ID: SA11AI.34889
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
MR DARRELL LOCKWOOD
Mailing Address 12421 SE MOUNT SCOTT BLVD
City HAPPY VALLEY State OR Zip Code 97086
FEC ID number of contributing federal political committee. **C**
Name of Employer GALVESTON Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 09 / 07 / 2007
Transaction ID: SA11AI.34904
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
MR JOHN LONETTI, JR
Mailing Address 694 BRANCH DR
City LAS VEGAS State NV Zip Code 89109
FEC ID number of contributing federal political committee. **C**
Name of Employer LEM INC/WHOLESALE RE Occupation ADMINISTRATOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 07 / 06 / 2007
Transaction ID: SA11AI.34906
Amount of Each Receipt this Period 600.00

SUBTOTAL of Receipts This Page (optional) ► 900.00
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 126 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

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

Mailing Address PO BOX 3003

City State Zip Code
BALTIMORE MD 21229-0003

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 ▼ **325.00**

Date of Receipt **08 / 06 / 2007**

Transaction ID: SA11AI.34907

Amount of Each Receipt this Period **200.00**

B. Full Name (Last, First, Middle Initial)
MRS MARYANN LONG

Mailing Address 1015 WILDER WAY

City State Zip Code
TYLER TX 75703

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

Name of Employer CITY OF MILWAUKEE Occupation RET POLICE OFFI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **07 / 27 / 2007**

Transaction ID: SA11AI.34909

Amount of Each Receipt this Period **50.00**

C. Full Name (Last, First, Middle Initial)
MRS MARYANN LONG

Mailing Address 1015 WILDER WAY

City State Zip Code
TYLER TX 75703

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

Name of Employer CITY OF MILWAUKEE Occupation RET POLICE OFFI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **10 / 22 / 2007**

Transaction ID: SA11AI.34910

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: PAGE 127 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
H ROBERT LONG, MR
Mailing Address 2205 CHANNEL WAY
City N FORT MYERS State FL Zip Code 33917
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 ▼ 600.00
Date of Receipt 09 / 17 / 2007
Transaction ID: SA11AI.34914
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
H ROBERT LONG, MR
Mailing Address 2205 CHANNEL WAY
City N FORT MYERS State FL Zip Code 33917
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 ▼ 700.00
Date of Receipt 09 / 28 / 2007
Transaction ID: SA11AI.34915
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
H ROBERT LONG, MR
Mailing Address 2205 CHANNEL WAY
City N FORT MYERS State FL Zip Code 33917
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 ▼ 825.00
Date of Receipt 10 / 19 / 2007
Transaction ID: SA11AI.34913
Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional) ► 325.00
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 128 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS VIRGINIA LONNING

Mailing Address 286 DESERT LAKES DR

City State Zip Code
PALM SPRINGS CA 92264-5514

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 ▼ 366.00

Date of Receipt
MM / DD / YYYY
08 / 03 / 2007

Transaction ID: SA11AI.34918

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
W CHARLES LOUFEK, MR

Mailing Address 6600 INTERLACHEN BLVD

City State Zip Code
MINNEAPOLIS MN 55436

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

Name of Employer Occupation
MIDWEST NATURAL GAS CORP TREASURER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2007

Transaction ID: SA11AI.34923

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
W ALLAN LUND, MR

Mailing Address 15025 W BECKWITH RD

City State Zip Code
HAYWARD WI 54843-2004

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

Name of Employer Occupation
ENTERPRISE RENT-A-CAR CORPORATE VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
12 / 07 / 2007

Transaction ID: SA11AI.34942

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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 129 / 307
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
E MELVIN LYNN, MR

Mailing Address 28418- 137 ST
PO BOX 296

City State Zip Code
NEW AUBURN WI 54757

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 ▼ 225.00

Date of Receipt
MM / DD / YYYY
08 / 07 / 2007

Transaction ID: SA11AI.34947

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
E MELVIN LYNN, MR

Mailing Address 28418- 137 ST
PO BOX 296

City State Zip Code
NEW AUBURN WI 54757

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 ▼ 275.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2007

Transaction ID: SA11AI.34948

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
A ANTHONY MAAS, MR

Mailing Address 200 SALES AVE

City State Zip Code
HARRISON OH 45030-1485

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

Name of Employer COMPREWARE Occupation SENIOR CONSULTA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 772.00

Date of Receipt
MM / DD / YYYY
08 / 06 / 2007

Transaction ID: SA11AI.34956

Amount of Each Receipt this Period
260.00

SUBTOTAL of Receipts This Page (optional) ▶ **360.00**

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 130 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
A ANTHONY MAAS, MR
Mailing Address 200 SALES AVE
City HARRISON State OH Zip Code 45030-1485
FEC ID number of contributing federal political committee. **C**
Name of Employer COMPREWARE Occupation SENIOR CONSULTA
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1032.00
Date of Receipt 11 / 30 / 2007
Transaction ID: SA11AI.34957
Amount of Each Receipt this Period 260.00

B. Full Name (Last, First, Middle Initial)
MS ELIZABETH MAC INNES
Mailing Address 705 COOPER POINT LP SW UNIT A
City OLYMPIA State WA Zip Code 98502-8164
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation ATTORNEY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00
Date of Receipt 12 / 07 / 2007
Transaction ID: SA11AI.34958
Amount of Each Receipt this Period 75.00

C. Full Name (Last, First, Middle Initial)
MR FRANK MACK
Mailing Address 722 E MADISON AVE
City SHRUB OAK State NY Zip Code 10588
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 ▼ 400.00
Date of Receipt 08 / 27 / 2007
Transaction ID: SA11AI.34962
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 535.00
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 131 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. EARL MADDOX

Mailing Address 8051 S YARROW ST

City LITTLETON State CO Zip Code 80128-5515

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 ▼ 250.00

Date of Receipt: 11 / 19 / 2007
Transaction ID: SA11AI.34965
 Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
MRS HELEN MAHURIN

Mailing Address 501 W107TH ST APT 211

City KANSAS CITY State MO Zip Code 64114

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 ▼ 250.00

Date of Receipt: 09 / 21 / 2007
Transaction ID: SA11AI.34968
 Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
H JAMES MARET, MR

Mailing Address 2410 HWY 243

City TOWNVILLE State SC Zip Code 29689

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 ▼ 299.50

Date of Receipt: 11 / 13 / 2007
Transaction ID: SA11AI.34997
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 200.00

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 132 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr William Marino

Mailing Address 6 Cobblestone Ln

City State Zip Code
Morristown NJ 07960-6424

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 ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 22 / 2007

Transaction ID: SA11AI.34998

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
MR NED MARROW

Mailing Address 3001 BELMONT CIR

City State Zip Code
AUSTIN TX 78703

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

Name of Employer Occupation
COLUMBIA PARK MED'L GRP. PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2007

Transaction ID: SA11AI.35005

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
L HELEN MARSHALL, MRS

Mailing Address 827 SUSAN AVE

City State Zip Code
WOODSTOCK VA 22664-1133

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 ▼ 218.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2007

Transaction ID: SA11AI.35010

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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 133 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS ALMA MARTIN
Mailing Address 749 HEMPHILL RD
City MILLERSBURG State PA Zip Code 17061
FEC ID number of contributing federal political committee. **C**
Name of Employer HOUSEWIFE Occupation HOUSEWIFE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 10 / 09 / 2007
Transaction ID: SA11AI.35013
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
MS ALMA MARTIN
Mailing Address 749 HEMPHILL RD
City MILLERSBURG State PA Zip Code 17061
FEC ID number of contributing federal political committee. **C**
Name of Employer HOUSEWIFE Occupation HOUSEWIFE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 12 / 03 / 2007
Transaction ID: SA11AI.35014
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
RICHARD MARX
Mailing Address 76 MELVILLE RD
City NEWNAN State GA Zip Code 30265
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 ▼ 250.00
Date of Receipt: 07 / 20 / 2007
Transaction ID: SA11AI.35023
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: PAGE 134 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
RICHARD MARX

Mailing Address 76 MELVILLE RD

City NEWNAN State GA Zip Code 30265

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 ▼ 350.00

Date of Receipt: 09 / 07 / 2007
Transaction ID: SA11AI.35022
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
MS JEAN MASTERS

Mailing Address 765 CEHSTER ST

City LAKE FOREST State IL Zip Code 60045

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

Name of Employer UNEMPLOYED Occupation UNEMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 233.00

Date of Receipt: 07 / 20 / 2007
Transaction ID: SA11AI.35030
 Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
MS JEAN MASTERS

Mailing Address 765 CEHSTER ST

City LAKE FOREST State IL Zip Code 60045

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

Name of Employer UNEMPLOYED Occupation UNEMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.00

Date of Receipt: 08 / 17 / 2007
Transaction ID: SA11AI.35031
 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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 135 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS JEAN MASTERS

Mailing Address 765 CEHSTER ST

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 433.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2007

Transaction ID: SA11AI.35026

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MS JEAN MASTERS

Mailing Address 765 CEHSTER ST

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 533.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 26 / 2007

Transaction ID: SA11AI.35027

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MS JEAN MASTERS

Mailing Address 765 CEHSTER ST

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 01 / 2007

Transaction ID: SA11AI.35028

Amount of Each Receipt this Period
75.00

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 136 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS JEAN MASTERS

Mailing Address 765 CEHSTER ST

City LAKE FOREST State IL Zip Code 60045

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

Name of Employer UNEMPLOYED Occupation UNEMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 708.00

Date of Receipt: 11 / 01 / 2007
Transaction ID: SA11AI.35032
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
MS JEAN MASTERS

Mailing Address 765 CEHSTER ST

City LAKE FOREST State IL Zip Code 60045

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

Name of Employer UNEMPLOYED Occupation UNEMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 808.00

Date of Receipt: 12 / 14 / 2007
Transaction ID: SA11AI.35033
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
MRS DONALD MCCLANAHAN

Mailing Address 160 CERRO CREST DR

City NOVATO State CA Zip Code 94945

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 ▼ 290.00

Date of Receipt: 08 / 20 / 2007
Transaction ID: SA11AI.35060
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 137 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR GEORGE MCCLINTOCK

Mailing Address 800 HUMMINGBIRD LN

City State Zip Code
NAPLES FL 34103

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 ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2007

Transaction ID: SA11AI.35063

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MR GEORGE MCCLINTOCK

Mailing Address 800 HUMMINGBIRD LN

City State Zip Code
NAPLES FL 34103

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 ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 13 / 2007

Transaction ID: SA11AI.35062

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
BRUCE R MCCLOSKEY, MR

Mailing Address 122 BANNER LN

City State Zip Code
VILLA RIDGE MO 63089

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

Name of Employer Occupation
GENERAL NUTRITION CENTER BUSINESSMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2007

Transaction ID: SA11AI.35064

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 400.00

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

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

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

FOR LINE NUMBER: PAGE 138 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR K MC CORMICK

Mailing Address 785 S 24TH ST #608

City HOUSTON State TX Zip Code 77065

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

Name of Employer COMPAQ Occupation ELECTRONIC TECH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt: 11 / 02 / 2007
Transaction ID: SA11AI.35046
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
MR. TOM MCCOY

Mailing Address 2718 OLD STAGECOACH RD

City BETHUNE State SC Zip Code 29009-9630

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

Name of Employer BETHESDA PATHOLOGY Occupation CYTOTECNHLGST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt: 12 / 19 / 2007
Transaction ID: SA11AI.35069
 Amount of Each Receipt this Period: 65.00

C. Full Name (Last, First, Middle Initial)
M ROSE MCDANIEL, MRS

Mailing Address 2027 WOODHAVEN RD

City POPLAR BLUFF State MO Zip Code 63901

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 ▼ 210.50

Date of Receipt: 10 / 15 / 2007
Transaction ID: SA11AI.35070
 Amount of Each Receipt this Period: 45.00

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 139 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
M ROSE MCDANIEL, MRS
Mailing Address 2027 WOODHAVEN RD
City State Zip Code
POPLAR BLUFF MO 63901
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 ▼ 285.50
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 7
Transaction ID: SA11AI.35071
Amount of Each Receipt this Period 75.00

B. Full Name (Last, First, Middle Initial)
F JOHN MCGILLICUDDY, MR
Mailing Address 23 HILLTOP PL
City State Zip Code
RYE NY 10580
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
HEWITT ASSOCIATES INFORMATION TEC
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 1 / 2 0 0 7
Transaction ID: SA11AI.35079
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
F JOHN MCGILLICUDDY, MR
Mailing Address 23 HILLTOP PL
City State Zip Code
RYE NY 10580
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
HEWITT ASSOCIATES INFORMATION TEC
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 0 7
Transaction ID: SA11AI.35078
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 225.00
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 140 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
J VINCENT MC GUINNESS, MR
Mailing Address 1901 OCEAN WAY
City LAGUNA BEACH State CA Zip Code 92651-3237
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 ▼ 500.00
Date of Receipt 11 / 19 / 2007
Transaction ID: SA11AI.35050
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
A Virginia McKee, Mrs
Mailing Address 4204 Marla Dr NE
City Albuquerque State NM Zip Code 87109-1936
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 11 / 13 / 2007
Transaction ID: SA11AI.35088
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
COMPTON MCKENZIE
Mailing Address 80028 NATALIE CT NE
City PORTLAND State OR Zip Code 97211
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 08 / 06 / 2007
Transaction ID: SA11AI.35092
Amount of Each Receipt this Period 45.00

SUBTOTAL of Receipts This Page (optional) ► 595.00
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 141 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
COMPTON MCKENZIE
 Mailing Address 80028 NATALIE CT NE
 City State Zip Code
 PORTLAND OR 97211
 Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 1 9 / 2 0 0 7
Transaction ID: SA11AI.35090
 Amount of Each Receipt this Period
 40.00
 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 ▼ 260.00

B. Full Name (Last, First, Middle Initial)
COMPTON MCKENZIE
 Mailing Address 80028 NATALIE CT NE
 City State Zip Code
 PORTLAND OR 97211
 Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 2 0 / 2 0 0 7
Transaction ID: SA11AI.35089
 Amount of Each Receipt this Period
 35.00
 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 ▼ 295.00

C. Full Name (Last, First, Middle Initial)
MR DOUGLAS MCKISSACK
 Mailing Address 7 BITTERROOT LN
 City State Zip Code
 SAVANNAH GA 31419-9507
 Date of Receipt
 M M / D D / Y Y Y Y
 0 7 / 1 2 / 2 0 0 7
Transaction ID: SA11AI.35097
 Amount of Each Receipt this Period
 250.00
 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 ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► 325.00
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 142 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR DOUGLAS MCKISSACK
 Mailing Address 7 BITTERROOT LN
 City SAVANNAH State GA Zip Code 31419-9507
 Date of Receipt 12 / 11 / 2007
 Transaction ID: SA11AI.35098
 Amount of Each Receipt this Period 250.00
 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 ▼ 500.00

B. Full Name (Last, First, Middle Initial)
W JOSEPH MCRAE, MR
 Mailing Address 105 GROUSE RD
 City SUMMERVILLE State SC Zip Code 29485-5106
 Date of Receipt 10 / 19 / 2007
 Transaction ID: SA11AI.35106
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer DENVER INT'L AIRPORT Occupation PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

C. Full Name (Last, First, Middle Initial)
W JOSEPH MCRAE, MR
 Mailing Address 105 GROUSE RD
 City SUMMERVILLE State SC Zip Code 29485-5106
 Date of Receipt 12 / 07 / 2007
 Transaction ID: SA11AI.35107
 Amount of Each Receipt this Period 175.00
 FEC ID number of contributing federal political committee. C
 Name of Employer DENVER INT'L AIRPORT Occupation PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

SUBTOTAL of Receipts This Page (optional) ► 525.00
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 143 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
J BONNIE MEER, MS

Mailing Address 5926 E PLAYER PL

City State Zip Code
MESA AZ 85215-1409

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 ▼ 216.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.35118

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)
Mrs Madeline Melgard

Mailing Address 3701 International Dr Apt 507

City State Zip Code
Silver Spring MD 20906

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 ▼ 213.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.35122

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)
Y J MIHALY, MRS

Mailing Address 612 KINZIE ISLAND COURT

City State Zip Code
SANIBEL FL 33957

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

Name of Employer Occupation
PRUDENTIAL SECURITIES STOCK BROKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 3 / 2 0 0 7

Transaction ID: SA11AI.35150

Amount of Each Receipt this Period

101.00

SUBTOTAL of Receipts This Page (optional)

286.00

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 144 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR FLOYD MILES, JR

Mailing Address 80385 MILLSHAW DR

City State Zip Code
FORT MYERS FL 33912

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 ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: SA11AI.35152

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)
C Kendall Miller, Mr

Mailing Address 7350 Wakefield Ave

City State Zip Code
Reedley CA 93654

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

Name of Employer Occupation
DUVAL COUNTY SCHOOL BOARD TEACHER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 670.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.35163

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
MR JAMES MONROE, JR

Mailing Address 100 GREENUP ST

City State Zip Code
COVINGTON KY 41011

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

Name of Employer Occupation
MULLEN FINANCE PLAN BUSINESS MAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.35200

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

575.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 145 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
H JOSEPH MOORE, MR
Mailing Address PO BOX 5132
City SUN CITY WEST State AZ Zip Code 85376
FEC ID number of contributing federal political committee. **C**
Name of Employer MEDICAL ASSURANCE INC Occupation MARKETING
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 08 / 17 / 2007
Transaction ID: SA11AI.35211
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
H JOSEPH MOORE, MR
Mailing Address PO BOX 5132
City SUN CITY WEST State AZ Zip Code 85376
FEC ID number of contributing federal political committee. **C**
Name of Employer MEDICAL ASSURANCE INC Occupation MARKETING
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00
Date of Receipt 09 / 24 / 2007
Transaction ID: SA11AI.35212
Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
A CAROL MORRIS, MRS
Mailing Address 1122 SLEEPY HOLLOW LN
City EAST JORDAN State MI Zip Code 49727-8621
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED POLICE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 12 / 27 / 2007
Transaction ID: SA11AI.35221
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00
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 146 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
E ROBERT MORRIS, MR
Mailing Address 8209 PHILLIPS RD
City RIVERSIDE State CT Zip Code 06878-1619
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation BUSINESS MAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 08 / 29 / 2007
Transaction ID: SA11AI.35226
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
A PAULINE MOTL, MS
Mailing Address 245 E CYNTHIA LN
City LA GRANGE State TX Zip Code 78945-3418
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 ▼ 250.00
Date of Receipt 09 / 26 / 2007
Transaction ID: SA11AI.35233
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
MR P MOYER
Mailing Address 53 FOX RUN RD
City NEW CANAAN State CT Zip Code 06840-2820
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation FED CIVIL SER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00
Date of Receipt 10 / 19 / 2007
Transaction ID: SA11AI.35235
Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional) ► 950.00
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 147 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR P MOYER

Mailing Address 53 FOX RUN RD

City State Zip Code
NEW CANAAN CT 06840-2820

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

Name of Employer Occupation
RETIRED FED CIVIL SER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.35236

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)
F SUSAN MUIRHEAD, MRS

Mailing Address PO BOX 627

City State Zip Code
WEST LIBERTY OH 43357-0627

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

Name of Employer Occupation
E J REIMANN COMPANY PRESIDENT

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.35240

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
M BETTY MUNSON, MS

Mailing Address PO BOX 1232

City State Zip Code
WOODRUFF WI 54568-1232

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

Name of Employer Occupation
RETIRED RETIRED

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

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.35249

Amount of Each Receipt this Period

50.00

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: PAGE 148 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
J ROBERT MURPHY, MR
Mailing Address PO BOX 472
City JACKSON State NH Zip Code 03846-0472
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 ▼ 500.00
Date of Receipt 08 / 17 / 2007
Transaction ID: SA11AI.35254
Amount of Each Receipt this Period 150.00

B. Full Name (Last, First, Middle Initial)
J ROBERT MURPHY, MR
Mailing Address PO BOX 472
City JACKSON State NH Zip Code 03846-0472
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 ▼ 950.00
Date of Receipt 09 / 26 / 2007
Transaction ID: SA11AI.35255
Amount of Each Receipt this Period 450.00

C. Full Name (Last, First, Middle Initial)
M GEORGE NEALL, MR
Mailing Address 5452 TATES BANK RD
City CAMBRIDGE State MD Zip Code 21613-3421
FEC ID number of contributing federal political committee. **C**
Name of Employer PIMA CTY HEALTH DEPT/RET Occupation CLERK/SECRETARY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 08 / 06 / 2007
Transaction ID: SA11AI.35275
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 700.00
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 149 / 307
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
R MARY NELSON, MRS

Mailing Address 5 IVY TRL

City State Zip Code
GREENVILLE SC 29615-1252

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 ▼ **250.00**

Date of Receipt **07 / 18 / 2007**

Transaction ID: SA11AI.35281

Amount of Each Receipt this Period **50.00**

B. Full Name (Last, First, Middle Initial)
P HENRY NEMANZ, MR

Mailing Address 8518 TWIN OAKS COURT

City State Zip Code
YOUNGSTOWN OH 44514

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

Name of Employer Occupation
H.P. NEMENZ FOOD STORES PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **08 / 27 / 2007**

Transaction ID: SA11AI.35282

Amount of Each Receipt this Period **50.00**

C. Full Name (Last, First, Middle Initial)
P HENRY NEMANZ, MR

Mailing Address 8518 TWIN OAKS COURT

City State Zip Code
YOUNGSTOWN OH 44514

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

Name of Employer Occupation
H.P. NEMENZ FOOD STORES PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **09 / 26 / 2007**

Transaction ID: SA11AI.35283

Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional) ► **150.00**

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 150 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
P HENRY NEMANZ, MR

Mailing Address 8518 TWIN OAKS COURT

City State Zip Code
YOUNGSTOWN OH 44514

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

Name of Employer Occupation
H.P. NEMENZ FOOD STORES PRESIDENT

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 1 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.35284

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
P HENRY NEMANZ, MR

Mailing Address 8518 TWIN OAKS COURT

City State Zip Code
YOUNGSTOWN OH 44514

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

Name of Employer Occupation
H.P. NEMENZ FOOD STORES PRESIDENT

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 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.35285

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
W J NEWBY, MR.

Mailing Address 7802 WICKERSHAM LN

City State Zip Code
HOUSTON TX 77063

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

Name of Employer Occupation
COMPREWARE SENIOR CONSULTA

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 1 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.35290

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 151 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS MARGUERITE NICHOLS

Mailing Address 45 SUTTON PL S

City State Zip Code
NEW YORK NY 10022-2444

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 ▼ 250.00

Date of Receipt
MM / DD / YYYY
07 / 23 / 2007

Transaction ID: SA11AI.35295

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
L FRED NICKEY, MR

Mailing Address 308 E GARFIELD ST

City State Zip Code
SHIPPENSBURG PA 17257-2004

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 ▼ 220.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2007

Transaction ID: SA11AI.35299

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
MR READE NIMICK

Mailing Address 8265 9TH ST

City State Zip Code
WEST CHESTER PA 19380

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 ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 11 / 2007

Transaction ID: SA11AI.35307

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 190.00

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 152 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
T George Norton, Mr
Mailing Address 2668 SW Greenwich Way
City State Zip Code
Palm City FL 34990-7512
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 ▼ 208.00
Date of Receipt 11 / 30 / 2007
Transaction ID: SA11AI.35320
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
J AL NOTZON, MR & MRS
Mailing Address 107 E GRAMERCY PL
City State Zip Code
SAN ANTONIO TX 78212-2352
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 ▼ 225.00
Date of Receipt 11 / 26 / 2007
Transaction ID: SA11AI.35323
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
MR RICHARD NOWAK
Mailing Address 829 ENCANADA DR
City State Zip Code
LEWISVILLE TX 75077
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
ELK CORP. EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 08 / 17 / 2007
Transaction ID: SA11AI.35328
Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) ► 400.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 153 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR RICHARD NOWAK

Mailing Address 829 ENCANADA DR

City State Zip Code
LEWISVILLE TX 75077

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

Name of Employer Occupation
ELK CORP. EXECUTIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 12 / 2007

Transaction ID: SA11AI.35325

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR RICHARD NOWAK

Mailing Address 829 ENCANADA DR

City State Zip Code
LEWISVILLE TX 75077

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

Name of Employer Occupation
ELK CORP. EXECUTIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 825.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 31 / 2007

Transaction ID: SA11AI.35326

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
MR RICHARD NOWAK

Mailing Address 829 ENCANADA DR

City State Zip Code
LEWISVILLE TX 75077

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

Name of Employer Occupation
ELK CORP. EXECUTIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1025.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 26 / 2007

Transaction ID: SA11AI.35327

Amount of Each Receipt this Period
200.00

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 154 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS JOAN O'DONNELL

Mailing Address 820 STEELE DR

City State Zip Code
BREA CA 92821

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

Name of Employer Occupation
CONTIENTAL PAPER OUTSIDE SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
07 / 12 / 2007

Transaction ID: SA11AI.35339

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MS JOAN O'DONNELL

Mailing Address 820 STEELE DR

City State Zip Code
BREA CA 92821

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

Name of Employer Occupation
CONTIENTAL PAPER OUTSIDE SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2007

Transaction ID: SA11AI.35340

Amount of Each Receipt this Period
90.00

C. Full Name (Last, First, Middle Initial)
D JOSEPH O'NEILL, MR

Mailing Address 1929 SOBRE VISTA RD

City State Zip Code
SONOMA CA 95476

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 ▼ 300.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2007

Transaction ID: SA11AI.35352

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 240.00

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 155 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
D JOSEPH O'NEILL, MR

Mailing Address 1929 SOBRE VISTA RD

City State Zip Code
SONOMA CA 95476

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 ▼ 400.00

Date of Receipt
MM / DD / YYYY
08 / 27 / 2007

Transaction ID: SA11AI.35353

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
MR ARTHUR PACHECO, JR

Mailing Address 8344 WALTON HEATH CT

City State Zip Code
TUCSON AZ 85737

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2007

Transaction ID: SA11AI.35376

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
DR & MRS PETER PACKARD

Mailing Address 8346 REEF CT

City State Zip Code
HILLSBOROUGH CA 94010

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 ▼ 353.00

Date of Receipt
MM / DD / YYYY
08 / 03 / 2007

Transaction ID: SA11AI.35377

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **250.00**

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 156 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DR & MRS PETER PACKARD

Mailing Address 8346 REEF CT

City State Zip Code
HILLSBOROUGH CA 94010

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 ▼ 403.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.35378

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
MR. GENE PALMER

Mailing Address 508 MARCIA AVENUE

City State Zip Code
INDEPENDENCE MO 64050-1233

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

Name of Employer Occupation
RETIRED RET

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.35384

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MR. GENE PALMER

Mailing Address 508 MARCIA AVENUE

City State Zip Code
INDEPENDENCE MO 64050-1233

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

Name of Employer Occupation
RETIRED RET

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.35383

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) ▶

200.00

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 157 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
W Richard Pascoe, Mr
Mailing Address PO Box 86
City Elk Rapids State MI Zip Code 49629-0086
FEC ID number of contributing federal political committee. **C**
Name of Employer CRESCENT TECHNOLOGY INC Occupation ENGINEER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00
Date of Receipt 08 / 22 / 2007
Transaction ID: SA11AI.35398
Amount of Each Receipt this Period 115.00

B. Full Name (Last, First, Middle Initial)
MRS JANE PASTELAK
Mailing Address 1192 LAURELWOOD RD
City POTTSTOWN State PA Zip Code 19465-7422
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 ▼ 275.00
Date of Receipt 08 / 20 / 2007
Transaction ID: SA11AI.35402
Amount of Each Receipt this Period 75.00

C. Full Name (Last, First, Middle Initial)
MRS JANE PASTELAK
Mailing Address 1192 LAURELWOOD RD
City POTTSTOWN State PA Zip Code 19465-7422
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 ▼ 341.00
Date of Receipt 09 / 07 / 2007
Transaction ID: SA11AI.35401
Amount of Each Receipt this Period 66.00

SUBTOTAL of Receipts This Page (optional) ► 256.00
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 158 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS JANE PASTELAK

Mailing Address 1192 LAURELWOOD RD

City State Zip Code
POTTSTOWN PA 19465-7422

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 ▼ 441.00

Date of Receipt
MM / DD / YYYY
11 / 19 / 2007

Transaction ID: SA11AI.35404

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
U GEORGE PAULDING, MR

Mailing Address 211 DEVONWOOD DR

City State Zip Code
ST SIMONS ISLAND GA 31522

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

Name of Employer Occupation
SELF SELF EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt
MM / DD / YYYY
10 / 01 / 2007

Transaction ID: SA11AI.35408

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MRS HENRIE PEERY

Mailing Address 1862 QUEENS RD W

City State Zip Code
CHARLOTTE NC 28207-2438

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

Name of Employer Occupation
FORT DETRICK RET-ENGR ADMIN.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 16 / 2007

Transaction ID: SA11AI.35423

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 159 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
F. PERRI

Mailing Address 4975 SOUTHWEST 65TH AVE

City State Zip Code
PORTLAND OR 97221-1172

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

Name of Employer Occupation
SELF EMPLOYED MEDICAL DOCTOR

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	0	7

Transaction ID: SA11AI.35439

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)
F. PERRI

Mailing Address 4975 SOUTHWEST 65TH AVE

City State Zip Code
PORTLAND OR 97221-1172

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

Name of Employer Occupation
SELF EMPLOYED MEDICAL DOCTOR

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	0	7

Transaction ID: SA11AI.35438

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
MR MARVIN PERRY

Mailing Address 6282 CHADWICK AVE

City State Zip Code
SAN DIEGO CA 92139

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	0	7

Transaction ID: SA11AI.35441

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 160 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR JAY PETERS

Mailing Address 3811 DARWIN RD #3046-G

City State Zip Code
DURHAM NC 27707

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

Name of Employer SELF Occupation REALTOR

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 0 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.35444

Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
MR GEORGE PFAFF

Mailing Address PO BOX 2835

City State Zip Code
ASHEVILLE NC 28804

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 ▼ 300.00

Date of Receipt: M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.35462

Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
MR GEORGE PFAFF

Mailing Address PO BOX 2835

City State Zip Code
ASHEVILLE NC 28804

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 ▼ 400.00

Date of Receipt: M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.35463

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 161 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR LAURENCE PFAFF

Mailing Address 168 CLUB CLUB COURSE DR

City State Zip Code
HILTON HEAD ISLAND SC 29928-3150

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

Name of Employer Occupation
RETIRED RETIRED RN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2007

Transaction ID: SA11AI.35465

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
H WILLIAM PFAFF, MR

Mailing Address 4931 NETTLETON RD APT 1045

City State Zip Code
MEDINA OH 44256

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 ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 17 / 2007

Transaction ID: SA11AI.35466

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
M ARTHUR PHILLIPS, MR

Mailing Address 1732 SW MONARCH CLUB DR

City State Zip Code
PALM CITY FL 34990

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 ▼ 258.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 10 / 2007

Transaction ID: SA11AI.35473

Amount of Each Receipt this Period

50.00

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: PAGE 162 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
M ARTHUR PHILLIPS, MR
Mailing Address 1732 SW MONARCH CLUB DR
City PALM CITY State FL Zip Code 34990
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 ▼ 333.00
Date of Receipt 10 / 19 / 2007
Transaction ID: SA11AI.35474
Amount of Each Receipt this Period 75.00

B. Full Name (Last, First, Middle Initial)
A RICHARD PIEHL, MR & MRS
Mailing Address PO BOX 245
City GAYS MILLS State WI Zip Code 54631
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 ▼ 400.00
Date of Receipt 11 / 16 / 2007
Transaction ID: SA11AI.35477
Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
MRS. JOAN PINCHUK
Mailing Address 844 ROBINSON PL
City LA CANADA FLINTRID State CA Zip Code 91011
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 ▼ 250.00
Date of Receipt 12 / 20 / 2007
Transaction ID: SA11AI.35480
Amount of Each Receipt this Period 50.00

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 163 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
DR GERALD POGUE

Mailing Address 60 PATTERSON AVE

City State Zip Code
GREENWICH CT 06830-4635

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 ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 17 / 2007

Transaction ID: SA11AI.35491

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
G KAY POITRAS, MRS

Mailing Address 27 B MOORE RD

City State Zip Code
HAINES CITY FL 33844

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 28 / 2007

Transaction ID: SA11AI.35492

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
H WILLIAM PORTER, MR

Mailing Address 5240 W CR 56

City State Zip Code
LAPORTE CO 80535-9501

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 ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 31 / 2007

Transaction ID: SA11AI.35495

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 164 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
C MARJORIE POULSEN-TUCKER, MS

Mailing Address 7809 RADIN RD

City State Zip Code
WAXHAW NC 28173-9153

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 ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	7

Transaction ID: SA11AI.35506

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MR HOWARD PRENTZEL

Mailing Address 436 W CAPE ROCK DR

City State Zip Code
SCOTTSDALE AZ 85250-7268

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 ▼ 223.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	0	/	2	0	0	7

Transaction ID: SA11AI.35518

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
E Raymond Prochnow, Mr

Mailing Address 16324 Mandalay Dr

City State Zip Code
Encino CA 91436-3631

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 ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	0	7

Transaction ID: SA11AI.35527

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶

140.00

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 165 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
E Raymond Prochnow, Mr

Mailing Address **16324 Mandalay Dr**

City **Encino** State **CA** Zip Code **91436-3631**

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 ▼ **350.00**

Date of Receipt **11 / 05 / 2007**

Transaction ID: SA11AI.35528

Amount of Each Receipt this Period **100.00**

B. Full Name (Last, First, Middle Initial)
MR ROBERT PROTOR

Mailing Address **8425 COUNTRYWOOD FWY**

City **CORDOVA** State **TN** Zip Code **38016-4529**

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 ▼ **300.00**

Date of Receipt **07 / 12 / 2007**

Transaction ID: SA11AI.35532

Amount of Each Receipt this Period **200.00**

C. Full Name (Last, First, Middle Initial)
MS ELIZABETH QUINLAN

Mailing Address **10855 GLENWOOD ST**

City **SHAWNEE MISSION** State **KS** Zip Code **66211**

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 ▼ **413.00**

Date of Receipt **08 / 27 / 2007**

Transaction ID: SA11AI.35551

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 166 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS ELIZABETH QUINLAN

Mailing Address 10855 GLENWOOD ST

City State Zip Code
SHAWNEE MISSION KS 66211

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 ▼ 446.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2007

Transaction ID: SA11AI.35550

Amount of Each Receipt this Period
33.00

B.

Full Name (Last, First, Middle Initial)
MRS TED RAZOOK

Mailing Address 5150 E COPA DE ORO DR

City State Zip Code
ANAHEIM CA 92807

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

Name of Employer Occupation
RETIRED RET

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 09 / 2007

Transaction ID: SA11AI.35571

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Mr David Redmond

Mailing Address 6852 Olde Greenbrier Ln

City State Zip Code
Dayton OH 45459-2653

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

Name of Employer Occupation
SOCIAL SECURITY ADMINISTRATION ADMINISTRATIVE LAW JUDGE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 24 / 2007

Transaction ID: SA11AI.35575

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ▶

433.00

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

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
P RITA REED, MRS

Mailing Address 4027 MORRELL ST

City State Zip Code
SAN DIEGO CA 92109-6240

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

Name of Employer Occupation
H & R BLOCK RETIRED

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	6	/	2	0	0	7

Transaction ID: SA11AI.35580
 Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
E T REILLY, MR

Mailing Address 8877 PICKWICK DR

City State Zip Code
INDIANAPOLIS IN 46260

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

Name of Employer Occupation
Self-Employed Lawyer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **375.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.35586
 Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
W HARRY REINSTINE, DR

Mailing Address 3520 RICHMOND ST

City State Zip Code
JACKSONVILLE FL 32205-9422

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **215.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	7

Transaction ID: SA11AI.35587
 Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) **225.00**

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 168 / 307
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
J HERBERT REISEL, MR
Mailing Address 15 SHORESIDE DR
City State Zip Code
S BARRINGTON IL 60010
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: 11 / 15 / 2007
Transaction ID: SA11AI.35590
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
MR WAYNE RESLER
Mailing Address 795 WOODLAND AVE
City State Zip Code
EL PASO TX 79922-2040
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 ▼ 238.00
Date of Receipt: 10 / 05 / 2007
Transaction ID: SA11AI.35598
Amount of Each Receipt this Period: 60.00

C. Full Name (Last, First, Middle Initial)
MR WAYNE RESLER
Mailing Address 795 WOODLAND AVE
City State Zip Code
EL PASO TX 79922-2040
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 ▼ 298.00
Date of Receipt: 11 / 15 / 2007
Transaction ID: SA11AI.35599
Amount of Each Receipt this Period: 60.00

SUBTOTAL of Receipts This Page (optional) ▶ 220.00
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 169 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR WAYNE RESLER

Mailing Address 795 WOODLAND AVE

City State Zip Code
EL PASO TX 79922-2040

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 ▼ 358.00

Date of Receipt
MM / DD / YYYY
12 / 24 / 2007

Transaction ID: SA11AI.35600

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
A JOHN RIEDINGER, MR

Mailing Address 4801 18TH ST

City State Zip Code
LUBBOCK TX 79416-5607

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 ▼ 1025.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2007

Transaction ID: SA11AI.35614

Amount of Each Receipt this Period
525.00

C. Full Name (Last, First, Middle Initial)
C Tom Rigler, Mr

Mailing Address 104 Twin Oaks Dr

City State Zip Code
Los Gatos CA 95032

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 ▼ 240.00

Date of Receipt
MM / DD / YYYY
08 / 03 / 2007

Transaction ID: SA11AI.35618

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **625.00**

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 170 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

C Tom Rigler, Mr

Mailing Address 104 Twin Oaks Dr

City	State	Zip Code
Los Gatos	CA	95032

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00
---	------------------------------------

Date of Receipt

MM / DD / YYYY
08 / 17 / 2007

Transaction ID: SA11AI.35620

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

C Tom Rigler, Mr

Mailing Address 104 Twin Oaks Dr

City	State	Zip Code
Los Gatos	CA	95032

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00
---	------------------------------------

Date of Receipt

MM / DD / YYYY
11 / 15 / 2007

Transaction ID: SA11AI.35621

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

C Tom Rigler, Mr

Mailing Address 104 Twin Oaks Dr

City	State	Zip Code
Los Gatos	CA	95032

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00
---	------------------------------------

Date of Receipt

MM / DD / YYYY
12 / 17 / 2007

Transaction ID: SA11AI.35619

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

140.00

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
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(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR THEODORE RISCH

Mailing Address 8555 GUSS GRIND

City State Zip Code
WEST CHICAGO IL 60185

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 ▼ **250.00**

Date of Receipt **08 / 22 / 2007**

Transaction ID: SA11AI.35624

Amount of Each Receipt this Period **150.00**

B. Full Name (Last, First, Middle Initial)
MR THEODORE RISCH

Mailing Address 8555 GUSS GRIND

City State Zip Code
WEST CHICAGO IL 60185

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 ▼ **401.00**

Date of Receipt **11 / 21 / 2007**

Transaction ID: SA11AI.35625

Amount of Each Receipt this Period **151.00**

C. Full Name (Last, First, Middle Initial)
MS RUBY RITTERBUSCH

Mailing Address 121 RIVERPLACE DR

City State Zip Code
PIERRE SD 57501-4600

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

Name of Employer Occupation
HUNTINGTON HOUSE PUBLISHE SHIPPING MGR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **10 / 22 / 2007**

Transaction ID: SA11AI.35630

Amount of Each Receipt this Period **75.00**

SUBTOTAL of Receipts This Page (optional) **376.00**

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 172 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
E FORREST ROBERTS, MR

Mailing Address 310 SPRINGHOUSE DR

City State Zip Code
AIKEN SC 29803-6790

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 ▼ **210.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 11 / 2007

Transaction ID: SA11AI.35632

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
E FORREST ROBERTS, MR

Mailing Address 310 SPRINGHOUSE DR

City State Zip Code
AIKEN SC 29803-6790

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 ▼ **260.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 20 / 2007

Transaction ID: SA11AI.35633

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
C Sheila Robinson, Mrs

Mailing Address 1000 W Century Ave Apt 308

City State Zip Code
Bismarck ND 58803

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 ▼ **400.00**

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 12 / 2007

Transaction ID: SA11AI.35648

Amount of Each Receipt this Period
200.00

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 173 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
C Sheila Robinson, Mrs
Mailing Address 1000 W Century Ave Apt 308
City Bismarck State ND Zip Code 58803
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 ▼ 600.00
Date of Receipt 08 / 06 / 2007
Transaction ID: SA11AI.35649
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
C Sheila Robinson, Mrs
Mailing Address 1000 W Century Ave Apt 308
City Bismarck State ND Zip Code 58803
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 ▼ 800.00
Date of Receipt 08 / 24 / 2007
Transaction ID: SA11AI.35650
Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
C Sheila Robinson, Mrs
Mailing Address 1000 W Century Ave Apt 308
City Bismarck State ND Zip Code 58803
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 ▼ 1000.00
Date of Receipt 09 / 24 / 2007
Transaction ID: SA11AI.35651
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00
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 174 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
P CHRISTOPHER RODGERS, MR & MRS
Mailing Address 555 PALM WAY
City State Zip Code
GULF STREAM FL 33483-7330
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
IMS RECYCLING-SERVICES IN V P SEC/TREAS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt: MM / DD / YYYY
11 / 02 / 2007
Transaction ID: SA11AI.35656
Amount of Each Receipt this Period: 125.00

B. Full Name (Last, First, Middle Initial)
MR LEE RODGERS
Mailing Address 615 HIGHLAND AVE
City State Zip Code
NEWTON KS 67114
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 ▼ 280.00
Date of Receipt: MM / DD / YYYY
08 / 20 / 2007
Transaction ID: SA11AI.35657
Amount of Each Receipt this Period: 90.00

C. Full Name (Last, First, Middle Initial)
OLYNN ROHDE, MR
Mailing Address 400 H HWY A1A LOT 71
City State Zip Code
JUPITER FL 33477-4502
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
KERN CO DIST ATT OFFICE INVESTIGATOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1052.00
Date of Receipt: MM / DD / YYYY
07 / 12 / 2007
Transaction ID: SA11AI.35659
Amount of Each Receipt this Period: 66.00

SUBTOTAL of Receipts This Page (optional) ► 281.00
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 175 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
O LYNN ROHDE, MR
Mailing Address 400 H HWY A1A LOT 71
City JUPITER State FL Zip Code 33477-4502
FEC ID number of contributing federal political committee. **C**
Name of Employer KERN CO DIST ATT OFFICE Occupation INVESTIGATOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1152.00
Date of Receipt MM / DD / YYYY 07 / 12 / 2007
Transaction ID: SA11AI.35661
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
O LYNN ROHDE, MR
Mailing Address 400 H HWY A1A LOT 71
City JUPITER State FL Zip Code 33477-4502
FEC ID number of contributing federal political committee. **C**
Name of Employer KERN CO DIST ATT OFFICE Occupation INVESTIGATOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1352.00
Date of Receipt MM / DD / YYYY 08 / 27 / 2007
Transaction ID: SA11AI.35663
Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
O LYNN ROHDE, MR
Mailing Address 400 H HWY A1A LOT 71
City JUPITER State FL Zip Code 33477-4502
FEC ID number of contributing federal political committee. **C**
Name of Employer KERN CO DIST ATT OFFICE Occupation INVESTIGATOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1418.00
Date of Receipt MM / DD / YYYY 09 / 10 / 2007
Transaction ID: SA11AI.35660
Amount of Each Receipt this Period 66.00

SUBTOTAL of Receipts This Page (optional) ► 366.00
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 176 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
O LYNN ROHDE, MR
Mailing Address 400 H HWY A1A LOT 71
City JUPITER State FL Zip Code 33477-4502
FEC ID number of contributing federal political committee. **C**
Name of Employer KERN CO DIST ATT OFFICE Occupation INVESTIGATOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1668.00
Date of Receipt 09 / 26 / 2007
Transaction ID: SA11AI.35664
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
O LYNN ROHDE, MR
Mailing Address 400 H HWY A1A LOT 71
City JUPITER State FL Zip Code 33477-4502
FEC ID number of contributing federal political committee. **C**
Name of Employer KERN CO DIST ATT OFFICE Occupation INVESTIGATOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1793.00
Date of Receipt 10 / 24 / 2007
Transaction ID: SA11AI.35662
Amount of Each Receipt this Period 125.00

C. Full Name (Last, First, Middle Initial)
G ROBERT ROHWER, MR
Mailing Address 1700 HIDDEN OAKS DR
City STILLWATER State OK Zip Code 74074
FEC ID number of contributing federal political committee. **C**
Name of Employer CENTER FOR HEALTH CR SERV Occupation LVN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 08 / 10 / 2007
Transaction ID: SA11AI.35666
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 575.00
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 177 / 307
(check only one)
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 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
G ROBERT ROHWER, MR
Mailing Address 1700 HIDDEN OAKS DR
City State Zip Code
STILLWATER OK 74074
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
CENTER FOR HEALTH CR SERV LVN
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 1 / 0 9 / 2 0 0 7
Transaction ID: SA11AI.35667
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
B NANCY ROTH, MRS
Mailing Address 8545 CARMEL VALLEY RD
City State Zip Code
CARMEL CA 93923-9556
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 ▼ 266.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 7
Transaction ID: SA11AI.35685
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
R Warren Rothwell, Mr
Mailing Address 150 Moorings Park Dr Apt 504K
City State Zip Code
Naples FL 34105-2120
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 ▼ 215.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7
Transaction ID: SA11AI.35686
Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional) ► 335.00
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 178 / 307
(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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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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS EVELYN ROY

Mailing Address 8609 E 8ST ST

City COSTA MESA State CA Zip Code 92627

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 ▼ 1020.00

Date of Receipt: 09 / 24 / 2007
Transaction ID: SA11AI.35691
 Amount of Each Receipt this Period: 1000.00

B.

Full Name (Last, First, Middle Initial)
MRS EVELYN ROY

Mailing Address 8609 E 8ST ST

City COSTA MESA State CA Zip Code 92627

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 ▼ 1220.00

Date of Receipt: 11 / 13 / 2007
Transaction ID: SA11AI.35690
 Amount of Each Receipt this Period: 200.00

C.

Full Name (Last, First, Middle Initial)
MR LOUIS RUCKLEY

Mailing Address 1911 NE 108TH AVE

City PORTLAND State OR Zip Code 97220-3033

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

Name of Employer JUNIPER HILL FARM Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 07 / 12 / 2007
Transaction ID: SA11AI.35694
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 1300.00

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 179 / 307
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
W CHESTER RUCKMAN, MR
Mailing Address 780 S BRIARGATE LN
City COVINA State CA Zip Code 91723
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 ▼ 250.00
Date of Receipt: 07 / 20 / 2007
Transaction ID: SA11AI.35697
Amount of Each Receipt this Period 150.00

B. Full Name (Last, First, Middle Initial)
W CHESTER RUCKMAN, MR
Mailing Address 780 S BRIARGATE LN
City COVINA State CA Zip Code 91723
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 ▼ 400.00
Date of Receipt: 11 / 13 / 2007
Transaction ID: SA11AI.35698
Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
MR GARY RUDD
Mailing Address 10875 N BUTTE RD
City LIVE OAK State CA Zip Code 95953
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 ▼ 250.00
Date of Receipt: 12 / 24 / 2007
Transaction ID: SA11AI.35700
Amount of Each Receipt this Period 50.00

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: PAGE 180 / 307
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR EDWARD RYAN

Mailing Address PO BOX 305

City TUCSON State AZ Zip Code 85716-3615

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 ▼ 250.00

Date of Receipt: 08 / 01 / 2007
Transaction ID: SA11AI.35711
 Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
REV JAMES RYAN

Mailing Address 2828 SLOAT RD

City PEBBLE BEACH State CA Zip Code 93953-2621

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

Name of Employer US COURT OF CLAIMS Occupation RET JUDGE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 08 / 20 / 2007
Transaction ID: SA11AI.35716
 Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
REV JAMES RYAN

Mailing Address 2828 SLOAT RD

City PEBBLE BEACH State CA Zip Code 93953-2621

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

Name of Employer US COURT OF CLAIMS Occupation RET JUDGE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 09 / 24 / 2007
Transaction ID: SA11AI.35717
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 250.00

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 181 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
S NANCY SAMPSON, MS
Mailing Address 9614 PARKWOOD CT
City State Zip Code
FORT MYERS FL 33908
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
WWII VET DISABLED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 09 / 07 / 2007
Transaction ID: SA11AI.35726
Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
MS CLARA SATORIUS
Mailing Address 1012 S 58TH ST
City State Zip Code
MILWAUKEE WI 53214
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RET
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 251.00
Date of Receipt: 11 / 09 / 2007
Transaction ID: SA11AI.35729
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
MR ROBERT SCHADT
Mailing Address 109 N KEENE ST APT 333
City State Zip Code
COLUMIBA MO 65201
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
SELF EMPLOYED SELF EMPLOYED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 433.00
Date of Receipt: 07 / 23 / 2007
Transaction ID: SA11AI.35733
Amount of Each Receipt this Period: 50.00

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: PAGE 182 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR ROBERT SCHADT

Mailing Address 109 N KEENE ST APT 333

City State Zip Code
COLUMIBA MO 65201

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

Name of Employer Occupation
SELF EMPLOYED SELF EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 483.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 11 / 2007

Transaction ID: SA11AI.35734

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MRS ELIZABETH SCHAFFER

Mailing Address 610 1ST ST

City State Zip Code
CORONADO CA 92118

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 06 / 2007

Transaction ID: SA11AI.35735

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MRS ELIZABETH SCHAFFER

Mailing Address 610 1ST ST

City State Zip Code
CORONADO CA 92118

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 17 / 2007

Transaction ID: SA11AI.35737

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1550.00

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

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

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

FOR LINE NUMBER: PAGE 183 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS ELIZABETH SCHAFER

Mailing Address 610 1ST ST

City State Zip Code
CORONADO CA 92118

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3025.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	7

Transaction ID: SA11AI.35736

Amount of Each Receipt this Period

525.00

B.

Full Name (Last, First, Middle Initial)
MR. ROBERT SCHEEL

Mailing Address 438 TRAIL RIDGE PL

City State Zip Code
SANTA ROSA CA 95409-6436

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

Name of Employer Occupation
RETIRED RET CLERGY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	7

Transaction ID: SA11AI.35743

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
W FRED SCHEIGERT, MR

Mailing Address 123 S PITT ST

City State Zip Code
ALEXANDRIA VA 22314

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 ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	1	/	2	0	0	7

Transaction ID: SA11AI.35746

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

675.00

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

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 184 / 307
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR DANIEL SCHILDWACHTER, JR

Mailing Address 20 SAXON WOODS PK DR

City State Zip Code
WHITE PLAINS NY 10605-4817

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

Name of Employer Self Employed Occupation Self Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
10 / 05 / 2007

Transaction ID: SA11AI.35752

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
MRS ALYCE SCHLECH

Mailing Address 8720 ACADEMY ST

City State Zip Code
BURLESON TX 76028

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 ▼ 250.00

Date of Receipt MM / DD / YYYY
09 / 24 / 2007

Transaction ID: SA11AI.35758

Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
A Herman Schmitz, Mr

Mailing Address PO Box D

City State Zip Code
Williston ND 58802-0776

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 ▼ 225.00

Date of Receipt MM / DD / YYYY
08 / 06 / 2007

Transaction ID: SA11AI.35769

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 200.00

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
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FOR LINE NUMBER: PAGE 185 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
A Herman Schmitz, Mr
Mailing Address PO Box D
City Williston State ND Zip Code 58802-0776
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 ▼ 275.00
Date of Receipt 10 / 05 / 2007
Transaction ID: SA11AI.35770
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
C TOM SCHNELL, COL
Mailing Address 8708 ANCHORAGE CT
City FORT WWOth State TX Zip Code 76179-3001
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 ▼ 202.00
Date of Receipt 11 / 15 / 2007
Transaction ID: SA11AI.35774
Amount of Each Receipt this Period 101.00

C. Full Name (Last, First, Middle Initial)
C TOM SCHNELL, COL
Mailing Address 8708 ANCHORAGE CT
City FORT WWOth State TX Zip Code 76179-3001
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 ▼ 302.00
Date of Receipt 12 / 19 / 2007
Transaction ID: SA11AI.35773
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 251.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
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FOR LINE NUMBER: PAGE 186 / 307
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS MARTHA SCHRADER

Mailing Address 2838 ENCORE LN

City State Zip Code
WEST LAFAYETTE IN 47906-2041

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

Name of Employer Occupation
KAN ROCK TIRE CO PRES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
08 / 07 / 2007

Transaction ID: SA11AI.35775

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MS MARTHA SCHRADER

Mailing Address 2838 ENCORE LN

City State Zip Code
WEST LAFAYETTE IN 47906-2041

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

Name of Employer Occupation
KAN ROCK TIRE CO PRES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2007

Transaction ID: SA11AI.35776

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MS MARTHA SCHRADER

Mailing Address 2838 ENCORE LN

City State Zip Code
WEST LAFAYETTE IN 47906-2041

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

Name of Employer Occupation
KAN ROCK TIRE CO PRES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2007

Transaction ID: SA11AI.35777

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 187 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
F FRANK SCHUELLER, MR

Mailing Address 1201 PARKHAVEN DR

City State Zip Code
PARMA OH 44134

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

Name of Employer Occupation
ADVANCE TIRE INC SALES/MARKETING

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.35783

Amount of Each Receipt this Period
275.00

B.

Full Name (Last, First, Middle Initial)
D CHARLES SCHUTZ, MR

Mailing Address 132 AUBURN PL

City State Zip Code
SAN ANTONIO TX 78209

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 ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.35792

Amount of Each Receipt this Period
125.00

C.

Full Name (Last, First, Middle Initial)
MR BOB SCHWANECKE

Mailing Address 1621 S WHEELER ST

City State Zip Code
SAGINAW MI 46802-1153

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 ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.35793

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶

500.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 188 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
A Edwin Seipp, Mr
Mailing Address 49 Tuscaloosa Ave
City Atherton State CA Zip Code 94027-4014
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 ▼ 420.00
Date of Receipt 09 / 14 / 2007
Transaction ID: SA11AI.35824
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
MR. CLAUDE SEITZ
Mailing Address PO BOX 358
City WANTAGH State NY Zip Code 11793-3028
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 ▼ 300.00
Date of Receipt 11 / 15 / 2007
Transaction ID: SA11AI.35826
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
L DORIS SHELFORD, MS
Mailing Address 3206 AVENIDA SIMI
City SIMI VALLEY State CA Zip Code 93063
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 ▼ 215.00
Date of Receipt 09 / 24 / 2007
Transaction ID: SA11AI.35850
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 250.00
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 189 / 307
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS EDITH SHELTON

Mailing Address 10570 WELD CNTY RD 75 1/2

City State Zip Code
ROGGEN CO 80652

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 ▼ **240.00**

Date of Receipt **09 / 24 / 2007**

Transaction ID: SA11AI.35856

Amount of Each Receipt this Period **50.00**

B. Full Name (Last, First, Middle Initial)
Mr Mark Shevitz

Mailing Address 4180 Cresta Ave

City State Zip Code
Santa Barbara CA 93110-2408

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

Name of Employer Occupation
SHELL ENERGY SERVICES CO PRESIDENT & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **11 / 28 / 2007**

Transaction ID: SA11AI.35861

Amount of Each Receipt this Period **200.00**

C. Full Name (Last, First, Middle Initial)
W JACK SHORT, MRS.

Mailing Address 658 NEFF RD

City State Zip Code
GROSSE POINTE MI 48230-1665

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 ▼ **250.00**

Date of Receipt **11 / 15 / 2007**

Transaction ID: SA11AI.35872

Amount of Each Receipt this Period **50.00**

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 190 / 307
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR RAYMOND SIBLEY

Mailing Address 632 8TH ST SW

City ROCHESTER State MN Zip Code 55902-6331

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

Name of Employer AMER.BUSINESS FIN'L. SERV Occupation TECH. RECRUITER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.00

Date of Receipt: 08 / 01 / 2007
Transaction ID: SA11AI.35880
Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
MR RAYMOND SIBLEY

Mailing Address 632 8TH ST SW

City ROCHESTER State MN Zip Code 55902-6331

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

Name of Employer AMER.BUSINESS FIN'L. SERV Occupation TECH. RECRUITER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 699.00

Date of Receipt: 10 / 01 / 2007
Transaction ID: SA11AI.35881
Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
MS PAMELA SIEGERT, MD

Mailing Address 1230 36TH AVE

City ROCK ISLAND State IL Zip Code 61201

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

Name of Employer CONVENIENCE STORE Occupation SELF/RETAIL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 07 / 03 / 2007
Transaction ID: SA11AI.35882
Amount of Each Receipt this Period: 150.00

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 191 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
A WALTER SIGMAN, MR
Mailing Address 8637 PALMETTO RD
City State Zip Code
EDISTO ISLAND SC 29438
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 ▼ 250.00
Date of Receipt 09 / 24 / 2007
Transaction ID: SA11AI.35884
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
H Allen Simon, Mr
Mailing Address 1383 N Criss St
City State Zip Code
Chandler AZ 85226-1307
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 ▼ 450.00
Date of Receipt 09 / 07 / 2007
Transaction ID: SA11AI.35898
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
H Allen Simon, Mr
Mailing Address 1383 N Criss St
City State Zip Code
Chandler AZ 85226-1307
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 ▼ 550.00
Date of Receipt 11 / 21 / 2007
Transaction ID: SA11AI.35899
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 192 / 307
(check only one)

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<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS HELEN SIMPSON

Mailing Address 648 CADIEUX RD

City State Zip Code
GROSSE POINTE MI 48230

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 ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.35902

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)
MR JOHN SLANGA

Mailing Address 684 RIDGE RD

City State Zip Code
SPRING CITY PA 19475

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 ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.35922

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
MR JOHN SLANGA

Mailing Address 684 RIDGE RD

City State Zip Code
SPRING CITY PA 19475

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 ▼ 525.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.35923

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 193 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS CYNTHIA SMITH

Mailing Address 2201 BURR PKWY

City State Zip Code
DODGE CITY KS 67801-2329

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

Name of Employer Occupation
SURGERY CENTER OF DODGE CITY NURSE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.35936

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MRS CYNTHIA SMITH

Mailing Address 2201 BURR PKWY

City State Zip Code
DODGE CITY KS 67801-2329

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

Name of Employer Occupation
SURGERY CENTER OF DODGE CITY NURSE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.35932

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
MRS CYNTHIA SMITH

Mailing Address 2201 BURR PKWY

City State Zip Code
DODGE CITY KS 67801-2329

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

Name of Employer Occupation
SURGERY CENTER OF DODGE CITY NURSE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.35933

Amount of Each Receipt this Period
25.00

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: PAGE 194 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS CYNTHIA SMITH

Mailing Address 2201 BURR PKWY

City State Zip Code
DODGE CITY KS 67801-2329

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

Name of Employer Occupation
SURGERY CENTER OF DODGE CITY NURSE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 291.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: SA11AI.35934

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
MRS CYNTHIA SMITH

Mailing Address 2201 BURR PKWY

City State Zip Code
DODGE CITY KS 67801-2329

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

Name of Employer Occupation
SURGERY CENTER OF DODGE CITY NURSE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 316.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.35935

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
MARVIN J SMITH

Mailing Address 337 GENERAL BRADLEY ST NE

City State Zip Code
ALBUQUERQUE NM 87123

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

Name of Employer Occupation
SELF EMPLOYED SELF EMPLOYED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 301.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 2 / 2 0 0 7

Transaction ID: SA11AI.35944

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 195 / 307
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR & MRS PHIL SMITH

Mailing Address PO BOX 3022

City State Zip Code
BUENA VISTA CO 81211-3022

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) ▼ 225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	7	/	2	0	0	7

Transaction ID: SA11AI.35953

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
MR RANKIN SMITH, JR

Mailing Address 8882 BROOKMEADE ST N W

City State Zip Code
THOMASVILLE GA 31757

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) ▼ 460.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	0	/	2	0	0	7

Transaction ID: SA11AI.35954

Amount of Each Receipt this Period
230.00

C. Full Name (Last, First, Middle Initial)
H Ray Smith, COL

Mailing Address 228 Lakeside Cir

City State Zip Code
Greenville SC 29615

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) ▼ 800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.35955

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **605.00**

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

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

Mailing Address 88849 SHINING LIGHT WAY

City State Zip Code
COLUMBUS OH 43207

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 ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.35959

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
H LYNN SOLOMON, DR

Mailing Address 325 KEMPTON ST # 1252

City State Zip Code
SPRING VALLEY CA 91977-5810

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

Name of Employer Occupation
MT CARMEL EAST HOSPITAL HOSP CHAPLAIN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.35964

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
H LYNN SOLOMON, DR

Mailing Address 325 KEMPTON ST # 1252

City State Zip Code
SPRING VALLEY CA 91977-5810

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

Name of Employer Occupation
MT CARMEL EAST HOSPITAL HOSP CHAPLAIN

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 1 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.35965

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 250.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 197 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR DAVID SOMMER

Mailing Address 2029 GRAFTON AVE

City Henderson State NV Zip Code 89074-0627

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

Name of Employer DAVID SOMMER CPA Occupation ACCOUNTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 12 / 2007

Transaction ID: SA11AI.35966

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
MR DAVID SOMMER

Mailing Address 2029 GRAFTON AVE

City Henderson State NV Zip Code 89074-0627

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

Name of Employer DAVID SOMMER CPA Occupation ACCOUNTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 03 / 2007

Transaction ID: SA11AI.35967

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
A BEATRICE SORENSEN, MRS

Mailing Address 311 BECKLEY HILL RD

City BARRE State VT Zip Code 05641-9081

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 ▼ 250.00

Date of Receipt 08 / 06 / 2007

Transaction ID: SA11AI.35971

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ▶ **200.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 198 / 307
(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
							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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
A BEATRICE SORENSEN, MRS

Mailing Address 311 BECKLEY HILL RD

City BARRE State VT Zip Code 05641-9081

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 ▼ 300.00

Date of Receipt: 09 / 24 / 2007
Transaction ID: SA11AI.35972
 Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
J FRED SOUBA, MR

Mailing Address 5720 XERXES AVE S

City MINNEAPOLIS State MN Zip Code 55410-2639

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

Name of Employer MARQUETTE UNIVERSITY Occupation PROFESSOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 27 / 2007
Transaction ID: SA11AI.35974
 Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
MS CORINNE SPENCE

Mailing Address 2-2834 E CLIFF DR

City SANTA CRUZ State CA Zip Code 95062

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

Name of Employer RETIRED Occupation FARMING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt: 11 / 26 / 2007
Transaction ID: SA11AI.35981
 Amount of Each Receipt this Period: 198.00

SUBTOTAL of Receipts This Page (optional) ► **348.00**

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 199 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS DOROTHY STAUCH

Mailing Address 707 MADELAINE DR

City State Zip Code
LOS ALAMITOS CA 90720-1053

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

Name of Employer SELF EMPLOYED Occupation PROPERTY MGT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
07 / 23 / 2007

Transaction ID: SA11AI.36002

Amount of Each Receipt this Period
230.00

B. Full Name (Last, First, Middle Initial)
V LEO STAVENICK, MR

Mailing Address 100 STONE HILL RD APT B8

City State Zip Code
SPRINGFIELD NJ 64055

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 ▼ 465.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2007

Transaction ID: SA11AI.36003

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
MR & MRS STEVE STEFELY

Mailing Address 941 S EUCLID AVE

City State Zip Code
ELMHURST IL 60126

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 ▼ 450.00

Date of Receipt
MM / DD / YYYY
08 / 03 / 2007

Transaction ID: SA11AI.36004

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **520.00**

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 200 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR PETER STENT

Mailing Address 170 JOSSELYN LN

City State Zip Code
WOODSIDE CA 94062

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 ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.36011

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
E CHESTER STEWART, MR & MRS

Mailing Address 27 RAOD 5295

City State Zip Code
FARMINGTON NM 87401-1532

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

Name of Employer Retired Occupation

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 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.36018

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
MR WILLIAM STEWART

Mailing Address 811 MORNINGSTAR DR

City State Zip Code
FULLERTON CA 92835

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 ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.36019

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **500.00**

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 201 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR & MRS ADA STRASENBURGH		Date of Receipt
	Mailing Address PO BOX 608		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	OCEAN VIEW	NJ	08230-0608
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11AI.36051
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="865.50"/>	

B.	Full Name (Last, First, Middle Initial) MR & MRS ADA STRASENBURGH		Date of Receipt
	Mailing Address PO BOX 608		<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	OCEAN VIEW	NJ	08230-0608
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11AI.36054
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="200.00"/>
		<input type="text" value="1065.50"/>	

C.	Full Name (Last, First, Middle Initial) MR & MRS ADA STRASENBURGH		Date of Receipt
	Mailing Address PO BOX 608		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	OCEAN VIEW	NJ	08230-0608
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11AI.36055
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="325.00"/>
		<input type="text" value="1390.50"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="625.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 202 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR & MRS ADA STRASENBURGH
Mailing Address PO BOX 608

City State Zip Code
OCEAN VIEW NJ 08230-0608

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 ▼ 1490.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.36052
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
MR & MRS ADA STRASENBURGH
Mailing Address PO BOX 608

City State Zip Code
OCEAN VIEW NJ 08230-0608

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 ▼ 1565.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.36050
Amount of Each Receipt this Period 75.00

C. Full Name (Last, First, Middle Initial)
MR & MRS ADA STRASENBURGH
Mailing Address PO BOX 608

City State Zip Code
OCEAN VIEW NJ 08230-0608

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 ▼ 1665.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.36053
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 203 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
R JOHN STREET, MRS

Mailing Address 386 POLK ST NW

City State Zip Code
MARIETTA GA 30064-2308

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 ▼ **299.00**

Date of Receipt **09 / 28 / 2007**

Transaction ID: SA11AI.36058

Amount of Each Receipt this Period **100.00**

B.

Full Name (Last, First, Middle Initial)
R JOHN STREET, MRS

Mailing Address 386 POLK ST NW

City State Zip Code
MARIETTA GA 30064-2308

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 ▼ **624.00**

Date of Receipt **12 / 12 / 2007**

Transaction ID: SA11AI.36060

Amount of Each Receipt this Period **325.00**

C.

Full Name (Last, First, Middle Initial)
B LEWIS STUART, MR

Mailing Address 305 MACARTHUR PL

City State Zip Code
MAITLAND FL 32751-5572

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

Name of Employer Occupation
ALVERNIA COLLEGE TEACHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 09 / 2007**

Transaction ID: SA11AI.36062

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional) ► **525.00**

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 204 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
E MARY SUKUP, MS.
Mailing Address 1379 BEEDS LAKE DR
City HAMPTON State IA Zip Code 50441-7437
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation FARMER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 07 / 23 / 2007
Transaction ID: SA11AI.36069
Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
H JOHN SUTTLE, MR
Mailing Address 701 CRESCENT ST
City DENTON State TX Zip Code 76201-2809
FEC ID number of contributing federal political committee. **C**
Name of Employer SMITH BARNEY Occupation FINANCIAL CONSU
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 10 / 15 / 2007
Transaction ID: SA11AI.36077
Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
H JOHN SUTTLE, MR
Mailing Address 701 CRESCENT ST
City DENTON State TX Zip Code 76201-2809
FEC ID number of contributing federal political committee. **C**
Name of Employer SMITH BARNEY Occupation FINANCIAL CONSU
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00
Date of Receipt 12 / 17 / 2007
Transaction ID: SA11AI.36076
Amount of Each Receipt this Period 150.00

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: PAGE 205 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
P John Swanson, Mr
Mailing Address 1 Valois PI
City Hendersonville State NC Zip Code 28739-7057
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 ▼ 400.00
Date of Receipt 08 / 10 / 2007
Transaction ID: SA11AI.36082
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
P John Swanson, Mr
Mailing Address 1 Valois PI
City Hendersonville State NC Zip Code 28739-7057
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 ▼ 500.00
Date of Receipt 12 / 20 / 2007
Transaction ID: SA11AI.36081
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
MR & MRS GARY & JANNETTE SWENSON
Mailing Address 98 RIVERSIDE AVE
City GREENWICH State CT Zip Code 06830-6915
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation BUSINESS MAN
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
Date of Receipt 10 / 01 / 2007
Transaction ID: SA11AI.36087
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 800.00
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 206 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
A KAY TART, MS
Mailing Address 1700 STEAMBOAT DR
City HENDERSON State NV Zip Code 89014-4085
FEC ID number of contributing federal political committee. **C**
Name of Employer ESCONDIDO, CA Occupation CARPENTER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00
Date of Receipt 08 / 01 / 2007
Transaction ID: SA11AI.36098
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
A KAY TART, MS
Mailing Address 1700 STEAMBOAT DR
City HENDERSON State NV Zip Code 89014-4085
FEC ID number of contributing federal political committee. **C**
Name of Employer ESCONDIDO, CA Occupation CARPENTER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 415.00
Date of Receipt 10 / 31 / 2007
Transaction ID: SA11AI.36097
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
MR SHERWIN TERRY
Mailing Address 301 TIDE POINT WAY
City HILTON HEAD ISLAND State SC Zip Code 29928
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 ▼ 353.00
Date of Receipt 09 / 21 / 2007
Transaction ID: SA11AI.36114
Amount of Each Receipt this Period 50.00

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: PAGE 207 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS JEANETTE THOMPSON

Mailing Address 349 CLINE RD

City State Zip Code
CYNTHIANA IN 47612-0175

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

Name of Employer Occupation
RETIRED HOUSEWIFE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 26 / 2007**

Transaction ID: SA11AI.36126

Amount of Each Receipt this Period **90.00**

B. Full Name (Last, First, Middle Initial)
C Jack Threet, Mrs

Mailing Address 14 Edinburgh Cir

City State Zip Code
Pagosa Springs CO 81147-8916

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

Name of Employer Occupation
SELF EMPLOYED CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **08 / 24 / 2007**

Transaction ID: SA11AI.36134

Amount of Each Receipt this Period **100.00**

C. Full Name (Last, First, Middle Initial)
RALPH TIERNEY

Mailing Address 989 BAY ESPLANADE

City State Zip Code
ODESSA TX 79761

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 ▼ **250.00**

Date of Receipt **12 / 24 / 2007**

Transaction ID: SA11AI.36139

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional) **290.00**

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 208 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

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

Mailing Address 12555 37TH AVE NE

City SEATTLE State WA Zip Code 98125-4654

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 ▼ 287.00

Date of Receipt: 10 / 31 / 2007
Transaction ID: SA11AI.36151
Amount of Each Receipt this Period: 90.00

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

Mailing Address 12555 37TH AVE NE

City SEATTLE State WA Zip Code 98125-4654

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 ▼ 377.00

Date of Receipt: 12 / 12 / 2007
Transaction ID: SA11AI.36152
Amount of Each Receipt this Period: 90.00

C. Full Name (Last, First, Middle Initial)
MR P TRACY

Mailing Address 1025 PARK PL APT 159

City MISHAWAKA State IN Zip Code 46545-3551

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 ▼ 300.00

Date of Receipt: 12 / 19 / 2007
Transaction ID: SA11AI.36156
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 280.00

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 209 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR ROBERT TREADWELL

Mailing Address 300 VANTAGE CIR

City State Zip Code
KERRVILLE TX 78028-2771

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 ▼ 266.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 09 / 2007

Transaction ID: SA11AI.36160

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
KENT RAY TROUTMAN, COL

Mailing Address 6337 KLAMATH RD

City State Zip Code
FORT WORTH TX 76116-1617

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 ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 06 / 2007

Transaction ID: SA11AI.36166

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
KENT RAY TROUTMAN, COL

Mailing Address 6337 KLAMATH RD

City State Zip Code
FORT WORTH TX 76116-1617

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 ▼ 335.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2007

Transaction ID: SA11AI.36168

Amount of Each Receipt this Period
120.00

SUBTOTAL of Receipts This Page (optional) ► 295.00

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 210 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
KENT RAY TROUTMAN, COL

Mailing Address 6337 KLAMATH RD

City State Zip Code
FORT WORTH TX 76116-1617

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 ▼ **410.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.36167

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)
K Calvin Upp, Mr

Mailing Address 212 N Elm St

City State Zip Code
Wellington KS 67152

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

Name of Employer Occupation
RETIRED RET

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **335.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	0	7

Transaction ID: SA11AI.36198

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
N Louis Vago, Mr

Mailing Address 253 Heritage Dr

City State Zip Code
Aurora IL 60506-4417

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

Name of Employer Occupation
AURAFIN L L C COMPUTER PROGRA

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **201.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	6	/	2	0	0	7

Transaction ID: SA11AI.36201

Amount of Each Receipt this Period

101.00

SUBTOTAL of Receipts This Page (optional) ►

276.00

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 211 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MISS CHRISTINA VANDERWENDE

Mailing Address 252 CAROL JEAN WAY

City State Zip Code
BRANCHBURG NJ 08876-3350

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 ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 01 / 2007

Transaction ID: SA11AI.36208

Amount of Each Receipt this Period
45.00

B.

Full Name (Last, First, Middle Initial)
MR M VERHEY, SR

Mailing Address 5098 STAUFFER AVE SE

City State Zip Code
KENTWOOD MI 49508-5148

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 ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2007

Transaction ID: SA11AI.36210

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
MR M VERHEY, SR

Mailing Address 5098 STAUFFER AVE SE

City State Zip Code
KENTWOOD MI 49508-5148

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 ▼ 280.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 16 / 2007

Transaction ID: SA11AI.36211

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶

145.00

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 212 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR JOEL VERPLANK

Mailing Address 214 ROBINHOOD DR

City State Zip Code
FLORENCE AL 35633

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

Name of Employer Occupation
DAVIS-MONTHAN AFB, AZ OFFICER U S A F

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **12 / 14 / 2007**

Transaction ID: SA11AI.36214

Amount of Each Receipt this Period **150.00**

B. Full Name (Last, First, Middle Initial)
MR JACQUES VINMONT, JR

Mailing Address 21 ASPEN CT

City State Zip Code
BOYNTON BEACH FL 33436-6615

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

Name of Employer Occupation
DENNIS EAST INTERNATIONAL IMPORT LOGISTIC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 28 / 2007**

Transaction ID: SA11AI.36221

Amount of Each Receipt this Period **250.00**

C. Full Name (Last, First, Middle Initial)
MR JACQUES VINMONT, JR

Mailing Address 21 ASPEN CT

City State Zip Code
BOYNTON BEACH FL 33436-6615

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

Name of Employer Occupation
DENNIS EAST INTERNATIONAL IMPORT LOGISTIC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **11 / 09 / 2007**

Transaction ID: SA11AI.36220

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional) ► **500.00**

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 213 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
R WILLIAM VIVIAN, MR

Mailing Address 955 HARPERSVILLE RD APT 3043

City State Zip Code
NEWPORT NEWS VA 23601-1261

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 ▼ 381.00

Date of Receipt 07 / 13 / 2007

Transaction ID: SA11AI.36222

Amount of Each Receipt this Period 75.00

B.

Full Name (Last, First, Middle Initial)
R WILLIAM VIVIAN, MR

Mailing Address 955 HARPERSVILLE RD APT 3043

City State Zip Code
NEWPORT NEWS VA 23601-1261

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 ▼ 481.00

Date of Receipt 09 / 28 / 2007

Transaction ID: SA11AI.36223

Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
R WILLIAM VIVIAN, MR

Mailing Address 955 HARPERSVILLE RD APT 3043

City State Zip Code
NEWPORT NEWS VA 23601-1261

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 ▼ 581.00

Date of Receipt 11 / 15 / 2007

Transaction ID: SA11AI.36224

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 214 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR JARMILA VRANA

Mailing Address 631 CHADBOURNE AVE

City State Zip Code
MILLBRAE CA 94030

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

Name of Employer SELF EMPLOYED Occupation PROPERTY MANAGE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
07 / 27 / 2007

Transaction ID: SA11AI.36231

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR JARMILA VRANA

Mailing Address 631 CHADBOURNE AVE

City State Zip Code
MILLBRAE CA 94030

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

Name of Employer SELF EMPLOYED Occupation PROPERTY MANAGE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2007

Transaction ID: SA11AI.36232

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR JARMILA VRANA

Mailing Address 631 CHADBOURNE AVE

City State Zip Code
MILLBRAE CA 94030

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

Name of Employer SELF EMPLOYED Occupation PROPERTY MANAGE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
12 / 28 / 2007

Transaction ID: SA11AI.36230

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 250.00

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 215 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
J VERL WADDAUPSS, MR
Mailing Address 44 S 600 W

City State Zip Code
BLACKFOOT ID 83221

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 ▼ 266.00

Date of Receipt
MM / DD / YYYY
07 / 27 / 2007

Transaction ID: SA11AI.36235
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
A David Waldron, Mr
Mailing Address 5711 Lokelani Rd

City State Zip Code
Kapan HI 96746

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 ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 05 / 2007

Transaction ID: SA11AI.36245
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
A David Waldron, Mr
Mailing Address 5711 Lokelani Rd

City State Zip Code
Kapan HI 96746

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 ▼ 325.00

Date of Receipt
MM / DD / YYYY
10 / 05 / 2007

Transaction ID: SA11AI.36244
Amount of Each Receipt this Period 75.00

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 216 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
A David Waldron, Mr
Mailing Address 5711 Lokelani Rd
City Kapaun State HI Zip Code 96746
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 ▼ 475.00
Date of Receipt 11 / 19 / 2007
Transaction ID: SA11AI.36246
Amount of Each Receipt this Period 150.00

B. Full Name (Last, First, Middle Initial)
MR. FLOYD WALSWORTH
Mailing Address PO BOX 33742
City GRAND RAPIDS State MI Zip Code 49525
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 ▼ 500.00
Date of Receipt 08 / 17 / 2007
Transaction ID: SA11AI.36254
Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
H JOHN WARE, MR
Mailing Address 209 DELAWARE AVE
PO BOX 341
City OXFORD State PA Zip Code 19363
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation PEST CONTROL
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 766.00
Date of Receipt 10 / 19 / 2007
Transaction ID: SA11AI.36258
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 450.00
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 217 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
H JOHN WARE, MR

Mailing Address 209 DELAWARE AVE
PO BOX 341

City OXFORD State PA Zip Code 19363

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

Name of Employer SELF EMPLOYED Occupation PEST CONTROL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 816.00

Date of Receipt: MM / DD / YYYY
12 / 11 / 2007

Transaction ID: SA11AI.36257

Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
MRS JANE WARNOCK

Mailing Address 309 MIDVALE TER

City SEBASTIAN State FL Zip Code 32958-6615

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

Name of Employer RETIRED Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1223.00

Date of Receipt: MM / DD / YYYY
07 / 03 / 2007

Transaction ID: SA11AI.36265

Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
MRS JANE WARNOCK

Mailing Address 309 MIDVALE TER

City SEBASTIAN State FL Zip Code 32958-6615

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

Name of Employer RETIRED Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1289.00

Date of Receipt: MM / DD / YYYY
07 / 23 / 2007

Transaction ID: SA11AI.36263

Amount of Each Receipt this Period: 66.00

SUBTOTAL of Receipts This Page (optional) ▶ 316.00

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 218 / 307
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS JANE WARNOCK

Mailing Address 309 MIDVALE TER

City State Zip Code
SEBASTIAN FL 32958-6615

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

Name of Employer Occupation
RETIRED HOMEMAKER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1389.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2007

Transaction ID: SA11AI.36264

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
MR LEROY WEBER, JR

Mailing Address PO BOX 423

City State Zip Code
RIO VISTA CA 94571

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 10 / 2007

Transaction ID: SA11AI.36275

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MR LEROY WEBER, JR

Mailing Address PO BOX 423

City State Zip Code
RIO VISTA CA 94571

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1200.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2007

Transaction ID: SA11AI.36277

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 219 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR LEROY WEBER, JR
Mailing Address PO BOX 423
City RIO VISTA State CA Zip Code 94571
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 ▼ 1300.00
Date of Receipt 11 / 16 / 2007
Transaction ID: SA11AI.36276
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
K DEAN WEBSTER, MR
Mailing Address 3959 SAN ROCCO DR UNIT 622
City PUNTA GORDA State FL Zip Code 33950
FEC ID number of contributing federal political committee. **C**
Name of Employer US POSTAL SERVICE Occupation MAIL CARRIER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00
Date of Receipt 08 / 15 / 2007
Transaction ID: SA11AI.36280
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
W THOMAS WEIR, MR
Mailing Address 15067 BEACON RIDGE DR
City SENECA State SC Zip Code 29678
FEC ID number of contributing federal political committee. **C**
Name of Employer SQUARE D CO. Occupation ENGINEER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 288.06
Date of Receipt 08 / 01 / 2007
Transaction ID: SA11AI.36289
Amount of Each Receipt this Period 43.06

SUBTOTAL of Receipts This Page (optional) ► 393.06
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 220 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
W THOMAS WEIR, MR
 Mailing Address 15067 BEACON RIDGE DR
 City State Zip Code
 SENECA SC 29678
 Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 26 / 2007
Transaction ID: SA11AI.36285
 Amount of Each Receipt this Period
 25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SQUARE D CO. ENGINEER
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 313.06

B. Full Name (Last, First, Middle Initial)
W THOMAS WEIR, MR
 Mailing Address 15067 BEACON RIDGE DR
 City State Zip Code
 SENECA SC 29678
 Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 31 / 2007
Transaction ID: SA11AI.36290
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SQUARE D CO. ENGINEER
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 363.06

C. Full Name (Last, First, Middle Initial)
W THOMAS WEIR, MR
 Mailing Address 15067 BEACON RIDGE DR
 City State Zip Code
 SENECA SC 29678
 Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2007
Transaction ID: SA11AI.36286
 Amount of Each Receipt this Period
 25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SQUARE D CO. ENGINEER
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 388.06

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: PAGE 221 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
W THOMAS WEIR, MR

Mailing Address 15067 BEACON RIDGE DR

City State Zip Code
SENECA SC 29678

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

Name of Employer Occupation
SQUARE D CO. ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 413.06

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.36287

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
W THOMAS WEIR, MR

Mailing Address 15067 BEACON RIDGE DR

City State Zip Code
SENECA SC 29678

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

Name of Employer Occupation
SQUARE D CO. ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 438.06

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.36288

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
MR JOHN WELLES

Mailing Address 4110 UNITED CHURCH DR

City State Zip Code
INDIANAPOLIS IN 46237-1319

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 ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.36295

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional) ▶

250.00

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 222 / 307

(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR JOHN WELLES

Mailing Address 4110 UNITED CHURCH DR

City State Zip Code
INDIANAPOLIS IN 46237-1319

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 ▼ 500.00

Date of Receipt 09 / 26 / 2007

Transaction ID: SA11AI.36296

Amount of Each Receipt this Period 200.00

B.

Full Name (Last, First, Middle Initial)
MR JOHN WELLES

Mailing Address 4110 UNITED CHURCH DR

City State Zip Code
INDIANAPOLIS IN 46237-1319

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 ▼ 550.00

Date of Receipt 10 / 22 / 2007

Transaction ID: SA11AI.36294

Amount of Each Receipt this Period 50.00

C.

Full Name (Last, First, Middle Initial)
MR JOHN WELLES

Mailing Address 4110 UNITED CHURCH DR

City State Zip Code
INDIANAPOLIS IN 46237-1319

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 ▼ 750.00

Date of Receipt 11 / 16 / 2007

Transaction ID: SA11AI.36297

Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) 450.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 223 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR HENRY WELLS

Mailing Address PO BOX 459

City SAN DIEGO State CA Zip Code 92120

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 ▼ 400.00

Date of Receipt 08 / 17 / 2007

Transaction ID: SA11AI.36300

Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
MR HENRY WELLS

Mailing Address PO BOX 459

City SAN DIEGO State CA Zip Code 92120

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 ▼ 500.00

Date of Receipt 11 / 13 / 2007

Transaction ID: SA11AI.36299

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mrs Virginia Wheeler

Mailing Address PO Box 217

City Morehead State KY Zip Code 40351

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 ▼ 360.00

Date of Receipt 08 / 03 / 2007

Transaction ID: SA11AI.36307

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 500.00

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 224 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs Virginia Wheeler
Mailing Address PO Box 217
City Morehead State KY Zip Code 40351
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 ▼ 410.00
Date of Receipt 08 / 20 / 2007
Transaction ID: SA11AI.36306
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mrs Virginia Wheeler
Mailing Address PO Box 217
City Morehead State KY Zip Code 40351
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 ▼ 510.00
Date of Receipt 09 / 07 / 2007
Transaction ID: SA11AI.36308
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
MR CHARLES WHITEMAN, JR
Mailing Address 7427 OLD LIVE OAK DR
City DENHAM SPRINGS State LA Zip Code 70706-0994
FEC ID number of contributing federal political committee. **C**
Name of Employer BOSTON UNIVERSITY Occupation DEAN
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 09 / 26 / 2007
Transaction ID: SA11AI.36319
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 250.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 225 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
J L Whitmeyer, Mrs
Mailing Address HC 1 Box 110
City Colmesneil State TX Zip Code 75938-9704
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 ▼ 450.00
Date of Receipt MM / DD / YYYY 07 / 16 / 2007
Transaction ID: SA11AI.36321
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
J L Whitmeyer, Mrs
Mailing Address HC 1 Box 110
City Colmesneil State TX Zip Code 75938-9704
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 ▼ 700.00
Date of Receipt MM / DD / YYYY 10 / 01 / 2007
Transaction ID: SA11AI.36322
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
J L Whitmeyer, Mrs
Mailing Address HC 1 Box 110
City Colmesneil State TX Zip Code 75938-9704
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 MM / DD / YYYY 10 / 31 / 2007
Transaction ID: SA11AI.36320
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 500.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 226 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
H William Wiggins, Mr
Mailing Address 321 Aylesbury Ln
City Sandersville State GA Zip Code 31082
FEC ID number of contributing federal political committee. **C**
Name of Employer Developer Occupation Developer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 09 / 14 / 2007
Transaction ID: SA11AI.36338
Amount of Each Receipt this Period 132.00

B. Full Name (Last, First, Middle Initial)
H William Wiggins, Mr
Mailing Address 321 Aylesbury Ln
City Sandersville State GA Zip Code 31082
FEC ID number of contributing federal political committee. **C**
Name of Employer Developer Occupation Developer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 12 / 17 / 2007
Transaction ID: SA11AI.36337
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
MR WILLIAM WILFONG
Mailing Address 764 N WASHINGTON ST
City RUTHERFORDTON State NC Zip Code 28139-2480
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 ▼ 649.45
Date of Receipt 08 / 17 / 2007
Transaction ID: SA11AI.36344
Amount of Each Receipt this Period 253.06

SUBTOTAL of Receipts This Page (optional) ▶ 435.06
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
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FOR LINE NUMBER: PAGE 227 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR ROLAND WILKINSON

Mailing Address 5473 PELICAN WAY

City State Zip Code
ST AUGUSTINE FL 32080

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) ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.36347

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR ROLAND WILKINSON

Mailing Address 5473 PELICAN WAY

City State Zip Code
ST AUGUSTINE FL 32080

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) ▼ 270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	7

Transaction ID: SA11AI.36348

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR ROLAND WILKINSON

Mailing Address 5473 PELICAN WAY

City State Zip Code
ST AUGUSTINE FL 32080

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) ▼ 320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	0	7

Transaction ID: SA11AI.36349

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **150.00**

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 228 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
M Helen Wilks, Mrs
Mailing Address 459 NW Raymond Ln
City Port Saint Lucie State FL Zip Code 34983-1131
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 ▼ 230.00
Date of Receipt 07 / 16 / 2007
Transaction ID: SA11AI.36352
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
M Helen Wilks, Mrs
Mailing Address 459 NW Raymond Ln
City Port Saint Lucie State FL Zip Code 34983-1131
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 ▼ 330.00
Date of Receipt 08 / 17 / 2007
Transaction ID: SA11AI.36355
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
M Helen Wilks, Mrs
Mailing Address 459 NW Raymond Ln
City Port Saint Lucie State FL Zip Code 34983-1131
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 ▼ 380.00
Date of Receipt 08 / 29 / 2007
Transaction ID: SA11AI.36353
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 200.00
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 229 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
M Helen Wilks, Mrs

Mailing Address 459 NW Raymond Ln

City State Zip Code
Port Saint Lucie FL 34983-1131

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 ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.36350

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
M Helen Wilks, Mrs

Mailing Address 459 NW Raymond Ln

City State Zip Code
Port Saint Lucie FL 34983-1131

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 ▼ 460.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.36351

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
M Helen Wilks, Mrs

Mailing Address 459 NW Raymond Ln

City State Zip Code
Port Saint Lucie FL 34983-1131

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 ▼ 515.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.36354

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **135.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 230 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
M Helen Wilks, Mrs
Mailing Address 459 NW Raymond Ln
City Port Saint Lucie State FL Zip Code 34983-1131
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 ▼ 665.00
Date of Receipt 12 / 27 / 2007
Transaction ID: SA11AI.36356
Amount of Each Receipt this Period 150.00

B. Full Name (Last, First, Middle Initial)
MR WALTER WILLIAMS
Mailing Address 4717 PINEHURST CIR
City CENTER VALLEY State PA Zip Code 18034-8433
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 ▼ 300.00
Date of Receipt 07 / 30 / 2007
Transaction ID: SA11AI.36361
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
MR WALTER WILLIAMS
Mailing Address 4717 PINEHURST CIR
City CENTER VALLEY State PA Zip Code 18034-8433
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 ▼ 400.00
Date of Receipt 11 / 09 / 2007
Transaction ID: SA11AI.36362
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**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 231 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR & MRS NORMAN WILLIAMSON

Mailing Address 601 CRESCENT ST

City PASADENA State CA Zip Code 91106-4129

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 ▼ 500.00

Date of Receipt: 12 / 03 / 2007
Transaction ID: SA11AI.36363
 Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
D ANNIE WILSON, MRS

Mailing Address 254 NORMAN DR

City CRANBERRY TWP State PA Zip Code 16066-4234

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 ▼ 248.00

Date of Receipt: 11 / 09 / 2007
Transaction ID: SA11AI.36372
 Amount of Each Receipt this Period: 66.00

C. Full Name (Last, First, Middle Initial)
D ANNIE WILSON, MRS

Mailing Address 254 NORMAN DR

City CRANBERRY TWP State PA Zip Code 16066-4234

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 ▼ 314.00

Date of Receipt: 11 / 15 / 2007
Transaction ID: SA11AI.36373
 Amount of Each Receipt this Period: 66.00

SUBTOTAL of Receipts This Page (optional) ► 632.00

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
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FOR LINE NUMBER: PAGE 232 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
L HELEN WILSON, MS
Mailing Address PO BOX 188

City NORTH State SC Zip Code 29112-0188

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 ▼ 208.00

Date of Receipt: 11 / 13 / 2007
Transaction ID: SA11AI.36377
 Amount of Each Receipt this Period: 36.00

B. Full Name (Last, First, Middle Initial)
LEE JOHN WINTERS, MR
Mailing Address 4724 S HAZELTON LN

City TEMPE State AZ Zip Code 85282-7336

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 ▼ 303.00

Date of Receipt: 08 / 03 / 2007
Transaction ID: SA11AI.36384
 Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
P MARY WOLF, MRS
Mailing Address 1112 PLYMOUTH AVE SE

City GRAND RAPIDS State MI Zip Code 49506

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 ▼ 250.00

Date of Receipt: 11 / 15 / 2007
Transaction ID: SA11AI.36393
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 186.00

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

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

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FOR LINE NUMBER: PAGE 233 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
L AGNES WOLFF, MRS
Mailing Address 4939 S DIXIE HWY
City CRIDERSVILLE State OH Zip Code 45806-1819
FEC ID number of contributing federal political committee. **C**
Name of Employer NOVARDIS PHARMACEUDICALS Occupation SALES
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 586.00
Date of Receipt 08 / 17 / 2007
Transaction ID: SA11AI.36398
Amount of Each Receipt this Period 40.00

B. Full Name (Last, First, Middle Initial)
L AGNES WOLFF, MRS
Mailing Address 4939 S DIXIE HWY
City CRIDERSVILLE State OH Zip Code 45806-1819
FEC ID number of contributing federal political committee. **C**
Name of Employer NOVARDIS PHARMACEUDICALS Occupation SALES
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 636.00
Date of Receipt 11 / 13 / 2007
Transaction ID: SA11AI.36399
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
MS JOSEPHINE WOOD
Mailing Address 1400 ENTERPRISE DR APT N330
City LYNCHBURG State VA Zip Code 24502-5969
FEC ID number of contributing federal political committee. **C**
Name of Employer COLDWELL BANKER Occupation REAL ESTATE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 07 / 30 / 2007
Transaction ID: SA11AI.36406
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 340.00
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 234 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MS JOSEPHINE WOOD

Mailing Address 1400 ENTERPRISE DR APT N330

City LYNCHBURG State VA Zip Code 24502-5969

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

Name of Employer COLDWELL BANKER Occupation REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 10 / 2007

Transaction ID: SA11AI.36403

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
MS JOSEPHINE WOOD

Mailing Address 1400 ENTERPRISE DR APT N330

City LYNCHBURG State VA Zip Code 24502-5969

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

Name of Employer COLDWELL BANKER Occupation REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 26 / 2007

Transaction ID: SA11AI.36405

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
MS JOSEPHINE WOOD

Mailing Address 1400 ENTERPRISE DR APT N330

City LYNCHBURG State VA Zip Code 24502-5969

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

Name of Employer COLDWELL BANKER Occupation REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 29 / 2007

Transaction ID: SA11AI.36404

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 200.00

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 235 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) MS JOSEPHINE WOOD		Date of Receipt MM / DD / YYYY 11 / 23 / 2007
Mailing Address 1400 ENTERPRISE DR APT N330		Transaction ID: SA11AI.36407
City LYNCHBURG	State VA	Zip Code 24502-5969
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer COLDWELL BANKER	Occupation REAL ESTATE	
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) MR TIM WORD		Date of Receipt MM / DD / YYYY 07 / 30 / 2007
Mailing Address PO BOX 837		Transaction ID: SA11AI.36416
City SAN ANTONIO	State TX	Zip Code 78209
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer SELF-EMPLOYED	Occupation CONTRACTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.

Full Name (Last, First, Middle Initial) MR TIM WORD		Date of Receipt MM / DD / YYYY 08 / 20 / 2007
Mailing Address PO BOX 837		Transaction ID: SA11AI.36418
City SAN ANTONIO	State TX	Zip Code 78209
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF-EMPLOYED	Occupation CONTRACTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	700.00
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 236 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR TIM WORD

Mailing Address PO BOX 837

City SAN ANTONIO State TX Zip Code 78209

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

Name of Employer SELF-EMPLOYED Occupation CONTRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 11 / 05 / 2007
Transaction ID: SA11AI.36419
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
MR TIM WORD

Mailing Address PO BOX 837

City SAN ANTONIO State TX Zip Code 78209

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

Name of Employer SELF-EMPLOYED Occupation CONTRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 11 / 16 / 2007
Transaction ID: SA11AI.36417
Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
E KENNETH WRIGHT, MR

Mailing Address 3527 ROTARY RD

City ROCKFORD State IL Zip Code 61109-5061

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 ▼ 330.00

Date of Receipt 07 / 12 / 2007
Transaction ID: SA11AI.36421
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

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 237 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
E KENNETH WRIGHT, MR

Mailing Address 3527 ROTARY RD

City State Zip Code
ROCKFORD IL 61109-5061

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 ▼ 380.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 12 / 2007

Transaction ID: SA11AI.36422

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
E KENNETH WRIGHT, MR

Mailing Address 3527 ROTARY RD

City State Zip Code
ROCKFORD IL 61109-5061

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 ▼ 430.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 03 / 2007

Transaction ID: SA11AI.36423

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
F LARRY WRIGHT, MR

Mailing Address PO BOX 300

City State Zip Code
LONDON TX 76854

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

Name of Employer INTER-CHEM Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 20 / 2007

Transaction ID: SA11AI.36424

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **200.00**

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 238 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR KENNETH WUERFELE

Mailing Address P O BOX 977

City State Zip Code
CAMAS WA 98607

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

Name of Employer Occupation
KIMBERLY CLARK PAPER MANUFACTU

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2007

Transaction ID: SA11AI.36427

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MR KENNETH WUERFELE

Mailing Address P O BOX 977

City State Zip Code
CAMAS WA 98607

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

Name of Employer Occupation
KIMBERLY CLARK PAPER MANUFACTU

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2007

Transaction ID: SA11AI.36428

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
W DONN YODER, MR

Mailing Address 6440 LAKE TAHOE CIR

City State Zip Code
SAN DIEGO CA 92119-2533

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 ▼ 203.00

Date of Receipt
MM / DD / YYYY
08 / 22 / 2007

Transaction ID: SA11AI.36440

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional) ► **135.00**

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 239 / 307
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR JOSEPH ZARRI

Mailing Address 4230 GARDEN RD

City State Zip Code
EL SOBRANTE CA 94803-2231

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

Name of Employer Occupation
HIDDEN TREASURE CHRIST SC SCHOOL ADMIN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 07 / 2007

Transaction ID: SA11AI.36451

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR JOHN ZARTMAN

Mailing Address 2701 REGENCY OAKS BLVD APT N414

City State Zip Code
CLEARWATER FL 33759-1575

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 ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 30 / 2007

Transaction ID: SA11AI.36452

Amount of Each Receipt this Period
100.00

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

Mailing Address 2701 REGENCY OAKS BLVD APT N414

City State Zip Code
CLEARWATER FL 33759-1575

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 ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 19 / 2007

Transaction ID: SA11AI.36453

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ► 325.00

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 240 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR ARTHUR ZELLNER

Mailing Address PO BOX 325

City DAVENPORT State WA Zip Code 99122

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 ▼ 210.00

Date of Receipt: 09 / 24 / 2007
Transaction ID: SA11AI.36458
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
MR RICHARD ZENTMIRE

Mailing Address 1021 LEXINGTON AVE

City SCHENECTADY State NY Zip Code 12309-5601

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 ▼ 400.00

Date of Receipt: 08 / 20 / 2007
Transaction ID: SA11AI.36461
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
MR RICHARD ZENTMIRE

Mailing Address 1021 LEXINGTON AVE

City SCHENECTADY State NY Zip Code 12309-5601

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 ▼ 450.00

Date of Receipt: 10 / 09 / 2007
Transaction ID: SA11AI.36460
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► **200.00**

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 241 / 307
(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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MRS ELSIE ZUERCHER

Mailing Address S80600 LOWES CREEK RD

City State Zip Code
TOWANDA KS 67144

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

Name of Employer Occupation
SELF EMPLOYED HOUSEKEEPER

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

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 03 / 2007

Transaction ID: SA11AI.36472

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)
MRS ELSIE ZUERCHER

Mailing Address S80600 LOWES CREEK RD

City State Zip Code
TOWANDA KS 67144

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

Name of Employer Occupation
SELF EMPLOYED HOUSEKEEPER

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

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 05 / 2007

Transaction ID: SA11AI.36473

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)
MRS ELSIE ZUERCHER

Mailing Address S80600 LOWES CREEK RD

City State Zip Code
TOWANDA KS 67144

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

Name of Employer Occupation
SELF EMPLOYED HOUSEKEEPER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 295.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2007

Transaction ID: SA11AI.36474

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

90902.62

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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Aaron Shrout</p> <p>Mailing Address 5850 Cameron Run</p> <p>City Alexandria State VA Zip Code 22303</p> <p>Purpose of Disbursement Salary Expense</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>Transaction ID: SB21B.32787</p> <p>Date of Disbursement 07 / 12 / 2007</p> <p>Amount of Each Disbursement this Period 1078.95</p>
<p>B. Full Name (Last, First, Middle Initial) Aaron Shrout</p> <p>Mailing Address 5850 Cameron Run</p> <p>City Alexandria State VA Zip Code 22303</p> <p>Purpose of Disbursement Salary Expense</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>Transaction ID: SB21B.32788</p> <p>Date of Disbursement 08 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 1078.95</p>
<p>C. Full Name (Last, First, Middle Initial) Aaron Shrout</p> <p>Mailing Address 5850 Cameron Run</p> <p>City Alexandria State VA Zip Code 22303</p> <p>Purpose of Disbursement Salary Expense</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>Transaction ID: SB21B.32789</p> <p>Date of Disbursement 09 / 13 / 2007</p> <p>Amount of Each Disbursement this Period 1078.95</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3236.85

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 243 / 307

<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Aaron Shrout <hr/> Mailing Address 5850 Cameron Run <hr/> City Alexandria State VA Zip Code 22303 <hr/> Purpose of Disbursement Salary Expense Candidate Name <hr/> 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.32790 Date of Disbursement 10 / 11 / 2007 <hr/> Amount of Each Disbursement this Period 1078.95
B.	Full Name (Last, First, Middle Initial) Aaron Shrout <hr/> Mailing Address 5850 Cameron Run <hr/> City Alexandria State VA Zip Code 22303 <hr/> Purpose of Disbursement Salary Expense Candidate Name <hr/> 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.32791 Date of Disbursement 11 / 07 / 2007 <hr/> Amount of Each Disbursement this Period 1078.95
C.	Full Name (Last, First, Middle Initial) Aaron Shrout <hr/> Mailing Address 5850 Cameron Run <hr/> City Alexandria State VA Zip Code 22303 <hr/> Purpose of Disbursement Salary Expense Candidate Name <hr/> 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.32792 Date of Disbursement 12 / 10 / 2007 <hr/> Amount of Each Disbursement this Period 1078.95

SUBTOTAL of Disbursements This Page (optional) ▶

3236.85

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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) ABR	Transaction ID: SB21B.32796
	Mailing Address 14849 Persistence Drive	Date of Disbursement 10 / 01 / 2007
	City Woodbridge State VA Zip Code 22191	Amount of Each Disbursement this Period 7746.98
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	Category/Type
	Candidate Name	
	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) ABR	Transaction ID: SB21B.32795
	Mailing Address 14849 Persistence Drive	Date of Disbursement 10 / 11 / 2007
	City Woodbridge State VA Zip Code 22191	Amount of Each Disbursement this Period 1394.32
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	Category/Type
	Candidate Name	
	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) ABR	Transaction ID: SB21B.32794
	Mailing Address 14849 Persistence Drive	Date of Disbursement 11 / 02 / 2007
	City Woodbridge State VA Zip Code 22191	Amount of Each Disbursement this Period 333.40
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	Category/Type
	Candidate Name	
	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:	

SUBTOTAL of Disbursements This Page (optional)	9474.70
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

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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Advance Mailing Services</p> <p>Mailing Address 2600 Temple Heights Drive</p> <p>City Oceanside State CA Zip Code 92056</p> <p>Purpose of Disbursement Lettershop & Printshop Fees- Generic</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>Transaction ID: SB21B.32803</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="22138.60"/></p>
<p>B. Full Name (Last, First, Middle Initial) Advance Mailing Services</p> <p>Mailing Address 2600 Temple Heights Drive</p> <p>City Oceanside State CA Zip Code 92056</p> <p>Purpose of Disbursement Lettershop & Printshop Fees- Generic</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>Transaction ID: SB21B.32799</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2164.55"/></p>
<p>C. Full Name (Last, First, Middle Initial) Advance Mailing Services</p> <p>Mailing Address 2600 Temple Heights Drive</p> <p>City Oceanside State CA Zip Code 92056</p> <p>Purpose of Disbursement Lettershop & Printshop Fees- Generic</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>Transaction ID: SB21B.32797</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1504.66"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Advance Mailing Services</p> <p>Mailing Address 2600 Temple Heights Drive</p> <p>City Oceanside State CA Zip Code 92056</p> <p>Purpose of Disbursement Lettershop & Printshop Fees- Generic</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>Transaction ID: SB21B.32800</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4475.05"/></p>
<p>B. Full Name (Last, First, Middle Initial) Advance Mailing Services</p> <p>Mailing Address 2600 Temple Heights Drive</p> <p>City Oceanside State CA Zip Code 92056</p> <p>Purpose of Disbursement Lettershop & Printshop Fees- Generic</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>Transaction ID: SB21B.32798</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1749.02"/></p>
<p>C. Full Name (Last, First, Middle Initial) Advance Mailing Services</p> <p>Mailing Address 2600 Temple Heights Drive</p> <p>City Oceanside State CA Zip Code 92056</p> <p>Purpose of Disbursement Lettershop & Printshop Fees- Generic</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>Transaction ID: SB21B.32801</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4695.25"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="10919.32"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Alvin Williams	Transaction ID: SB21B.32809 Date of Disbursement 07 / 30 / 2007
	Mailing Address PO Box 8335	
	City Silver Spring State MD Zip Code 20910	Amount of Each Disbursement this Period 3145.35
	Purpose of Disbursement Salary Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Alvin Williams	Transaction ID: SB21B.32805 Date of Disbursement 08 / 15 / 2007
	Mailing Address PO Box 8335	
	City Silver Spring State MD Zip Code 20910	Amount of Each Disbursement this Period 2809.10
	Purpose of Disbursement Salary Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Alvin Williams	Transaction ID: SB21B.32810 Date of Disbursement 08 / 30 / 2007
	Mailing Address PO Box 8335	
	City Silver Spring State MD Zip Code 20910	Amount of Each Disbursement this Period 3145.35
	Purpose of Disbursement Salary Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	9099.80
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Alvin Williams	Transaction ID: SB21B.32806 Date of Disbursement 09 / 17 / 2007
	Mailing Address PO Box 8335	Amount of Each Disbursement this Period 2809.10
	City Silver Spring State MD Zip Code 20910	
	Purpose of Disbursement Salary Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Alvin Williams	Transaction ID: SB21B.32811 Date of Disbursement 09 / 30 / 2007
	Mailing Address PO Box 8335	Amount of Each Disbursement this Period 3145.35
	City Silver Spring State MD Zip Code 20910	
	Purpose of Disbursement Salary Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Alvin Williams	Transaction ID: SB21B.32807 Date of Disbursement 10 / 15 / 2007
	Mailing Address PO Box 8335	Amount of Each Disbursement this Period 2809.10
	City Silver Spring State MD Zip Code 20910	
	Purpose of Disbursement Salary Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	8763.55
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Alvin Williams <hr/> Mailing Address PO Box 8335 <hr/> City Silver Spring State MD Zip Code 20910 <hr/> Purpose of Disbursement Salary Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.32812 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 7
	Amount of Each Disbursement this Period 3145.35
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Alvin Williams <hr/> Mailing Address PO Box 8335 <hr/> City Silver Spring State MD Zip Code 20910 <hr/> Purpose of Disbursement Salary Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.32808 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7
	Amount of Each Disbursement this Period 2809.10
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Alvin Williams <hr/> Mailing Address PO Box 8335 <hr/> City Silver Spring State MD Zip Code 20910 <hr/> Purpose of Disbursement Salary Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.32813 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
	Amount of Each Disbursement this Period 3145.35
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	9099.80
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) American Caging, Inc	Transaction ID: SB21B.32820
	Mailing Address 4850 Wright Rd, Ste 168	Date of Disbursement 07 / 14 / 2007
	City Stafford State TX Zip Code 77477	Amount of Each Disbursement this Period 527.02
	Purpose of Disbursement Caging Services	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Caging, Inc	Transaction ID: SB21B.32822
	Mailing Address 4850 Wright Rd, Ste 168	Date of Disbursement 07 / 14 / 2007
	City Stafford State TX Zip Code 77477	Amount of Each Disbursement this Period 592.89
	Purpose of Disbursement Caging Services	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Caging, Inc	Transaction ID: SB21B.32829
	Mailing Address 4850 Wright Rd, Ste 168	Date of Disbursement 07 / 14 / 2007
	City Stafford State TX Zip Code 77477	Amount of Each Disbursement this Period 675.94
	Purpose of Disbursement Caging Services	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1795.85
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Caging, Inc</p> <p>Mailing Address 4850 Wright Rd, Ste 168</p> <p>City Stafford State TX Zip Code 77477</p> <p>Purpose of Disbursement Caging Services</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>Transaction ID: SB21B.32831</p> <p>Date of Disbursement 07 / 14 / 2007</p> <p>Amount of Each Disbursement this Period 757.20</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) American Caging, Inc</p> <p>Mailing Address 4850 Wright Rd, Ste 168</p> <p>City Stafford State TX Zip Code 77477</p> <p>Purpose of Disbursement Caging Services</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>Transaction ID: SB21B.32833</p> <p>Date of Disbursement 07 / 14 / 2007</p> <p>Amount of Each Disbursement this Period 1072.18</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American Caging, Inc</p> <p>Mailing Address 4850 Wright Rd, Ste 168</p> <p>City Stafford State TX Zip Code 77477</p> <p>Purpose of Disbursement Caging Services</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>Transaction ID: SB21B.32819</p> <p>Date of Disbursement 08 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 375.66</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2205.04

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

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

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

FOR LINE NUMBER: (check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) American Caging, Inc Mailing Address 4850 Wright Rd, Ste 168 City Stafford State TX Zip Code 77477 Purpose of Disbursement Caging Services 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.32825 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 7	Amount of Each Disbursement this Period 643.24
B.	Full Name (Last, First, Middle Initial) American Caging, Inc Mailing Address 4850 Wright Rd, Ste 168 City Stafford State TX Zip Code 77477 Purpose of Disbursement Caging Services 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.32826 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 7	Amount of Each Disbursement this Period 648.87
C.	Full Name (Last, First, Middle Initial) American Caging, Inc Mailing Address 4850 Wright Rd, Ste 168 City Stafford State TX Zip Code 77477 Purpose of Disbursement Caging Services 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.32832 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 7	Amount of Each Disbursement this Period 843.04

SUBTOTAL of Disbursements This Page (optional)	2135.15
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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) American Caging, Inc Mailing Address 4850 Wright Rd, Ste 168 City Stafford State TX Zip Code 77477 Purpose of Disbursement Caging Services 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.32823 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 7	Amount of Each Disbursement this Period 600.33
B.	Full Name (Last, First, Middle Initial) American Caging, Inc Mailing Address 4850 Wright Rd, Ste 168 City Stafford State TX Zip Code 77477 Purpose of Disbursement Caging Services 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.32817 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 0 / 2 0 0 7	Amount of Each Disbursement this Period 238.46
C.	Full Name (Last, First, Middle Initial) American Caging, Inc Mailing Address 4850 Wright Rd, Ste 168 City Stafford State TX Zip Code 77477 Purpose of Disbursement Caging Services 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.32818 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 7	Amount of Each Disbursement this Period 318.95

SUBTOTAL of Disbursements This Page (optional)	1157.74
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) American Caging, Inc <hr/> Mailing Address 4850 Wright Rd, Ste 168 <hr/> City Stafford State TX Zip Code 77477 <hr/> Purpose of Disbursement Caging Services Candidate Name <hr/> 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.32824 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 7
	Amount of Each Disbursement this Period 640.53
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) American Caging, Inc <hr/> Mailing Address 4850 Wright Rd, Ste 168 <hr/> City Stafford State TX Zip Code 77477 <hr/> Purpose of Disbursement Caging Services Candidate Name <hr/> 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.32821 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7
	Amount of Each Disbursement this Period 581.24
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) American Caging, Inc <hr/> Mailing Address 4850 Wright Rd, Ste 168 <hr/> City Stafford State TX Zip Code 77477 <hr/> Purpose of Disbursement Caging Services Candidate Name <hr/> 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.32816 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 7
	Amount of Each Disbursement this Period 188.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1409.77

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) American Caging, Inc	Transaction ID: SB21B.32830
	Mailing Address 4850 Wright Rd, Ste 168	Date of Disbursement 10 / 18 / 2007
	City Stafford State TX Zip Code 77477	Amount of Each Disbursement this Period 720.25
	Purpose of Disbursement Caging Services	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Caging, Inc	Transaction ID: SB21B.32827
	Mailing Address 4850 Wright Rd, Ste 168	Date of Disbursement 10 / 23 / 2007
	City Stafford State TX Zip Code 77477	Amount of Each Disbursement this Period 661.15
	Purpose of Disbursement Caging Services	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Caging, Inc	Transaction ID: SB21B.32828
	Mailing Address 4850 Wright Rd, Ste 168	Date of Disbursement 10 / 23 / 2007
	City Stafford State TX Zip Code 77477	Amount of Each Disbursement this Period 670.39
	Purpose of Disbursement Caging Services	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2051.79
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) American Caging, Inc	Transaction ID: SB21B.32834 Date of Disbursement																			
	Mailing Address 4850 Wright Rd, Ste 168	<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>1</td><td>0</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	3		2	0	0	7												
	City Stafford State TX Zip Code 77477	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Caging Services	<table border="1"><tr><td>1140.50</td></tr></table>	1140.50																		
1140.50																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) American Funds Group	Transaction ID: SB21B.32835 Date of Disbursement																			
	Mailing Address 6849 Old Dominion Drive	<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>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	0	7												
	City McLean State VA Zip Code 22101	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Employee Retirement Expense	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) American Funds Group	Transaction ID: SB21B.32836 Date of Disbursement																			
	Mailing Address 6849 Old Dominion Drive	<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>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	0	7												
	City McLean State VA Zip Code 22101	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Employee Retirement Expense	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>2140.50</td></tr></table>	2140.50
2140.50		
TOTAL 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)

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<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) American Funds Group	Transaction ID: SB21B.32837 Date of Disbursement
	Mailing Address 6849 Old Dominion Drive	<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City McLean State VA Zip Code 22101	Amount of Each Disbursement this Period
	Purpose of Disbursement Employee Retirement Expense	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Funds Group	Transaction ID: SB21B.32838 Date of Disbursement
	Mailing Address 6849 Old Dominion Drive	<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2007"/>
	City McLean State VA Zip Code 22101	Amount of Each Disbursement this Period
	Purpose of Disbursement Employee Retirement Expense	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Funds Group	Transaction ID: SB21B.32839 Date of Disbursement
	Mailing Address 6849 Old Dominion Drive	<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City McLean State VA Zip Code 22101	Amount of Each Disbursement this Period
	Purpose of Disbursement Employee Retirement Expense	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1500.00"/>
TOTAL 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB21B.32842
	Mailing Address PO Box 2969	Date of Disbursement 08 / 01 / 2007
	City Baltimore State MD Zip Code 21265	Amount of Each Disbursement this Period 522.45
	Purpose of Disbursement Telephone Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB21B.32841
	Mailing Address PO Box 2969	Date of Disbursement 11 / 02 / 2007
	City Baltimore State MD Zip Code 21265	Amount of Each Disbursement this Period 514.42
	Purpose of Disbursement Telephone Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB21B.32840
	Mailing Address PO Box 2969	Date of Disbursement 11 / 20 / 2007
	City Baltimore State MD Zip Code 21265	Amount of Each Disbursement this Period 497.11
	Purpose of Disbursement Telephone Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1533.98
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Care First	Transaction ID: SB21B.32849 Date of Disbursement
	Mailing Address PO Box 79749	<input type="text" value="07"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>
	City Baltimore State MD Zip Code 21279	Amount of Each Disbursement this Period
	Purpose of Disbursement Medical Insurance	<input type="text" value="2652.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Care First	Transaction ID: SB21B.32850 Date of Disbursement
	Mailing Address PO Box 79749	<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City Baltimore State MD Zip Code 21279	Amount of Each Disbursement this Period
	Purpose of Disbursement Medical Insurance	<input type="text" value="2652.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Care First	Transaction ID: SB21B.32851 Date of Disbursement
	Mailing Address PO Box 79749	<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City Baltimore State MD Zip Code 21279	Amount of Each Disbursement this Period
	Purpose of Disbursement Medical Insurance	<input type="text" value="2652.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7956.00"/>
TOTAL 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Care First <hr/> Mailing Address PO Box 79749 <hr/> City Baltimore State MD Zip Code 21279 <hr/> Purpose of Disbursement Medical Insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.32852 Date of Disbursement 10 / 01 / 2007
	Amount of Each Disbursement this Period 2652.00
	Category/ Type
	Category/ Type
	Category/ Type

B. Full Name (Last, First, Middle Initial) Care First <hr/> Mailing Address PO Box 79749 <hr/> City Baltimore State MD Zip Code 21279 <hr/> Purpose of Disbursement Medical Insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.32853 Date of Disbursement 11 / 07 / 2007
	Amount of Each Disbursement this Period 2652.00
	Category/ Type
	Category/ Type
	Category/ Type

C. Full Name (Last, First, Middle Initial) Care First <hr/> Mailing Address PO Box 79749 <hr/> City Baltimore State MD Zip Code 21279 <hr/> Purpose of Disbursement Medical Insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.32854 Date of Disbursement 12 / 10 / 2007
	Amount of Each Disbursement this Period 2652.00
	Category/ Type
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	7956.00
TOTAL This Period (last page this line number only) ▶	7956.00

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

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

FOR LINE NUMBER:
(check only one)

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<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Comcast	Transaction ID: SB21B.32857 Date of Disbursement 07 / 12 / 2007
	Mailing Address 900 Michigan Avenue, NE	Amount of Each Disbursement this Period 94.29
	City Washington State DC Zip Code 20017-1833	
	Purpose of Disbursement Online & Cable Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Comcast	Transaction ID: SB21B.32858 Date of Disbursement 08 / 01 / 2007
	Mailing Address 900 Michigan Avenue, NE	Amount of Each Disbursement this Period 94.29
	City Washington State DC Zip Code 20017-1833	
	Purpose of Disbursement Online & Cable Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Comcast	Transaction ID: SB21B.32859 Date of Disbursement 09 / 13 / 2007
	Mailing Address 900 Michigan Avenue, NE	Amount of Each Disbursement this Period 94.29
	City Washington State DC Zip Code 20017-1833	
	Purpose of Disbursement Online & Cable Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	282.87
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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Comcast	Transaction ID: SB21B.32855 Date of Disbursement
	Mailing Address 900 Michigan Avenue, NE	<input type="text" value="11"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Washington State DC Zip Code 20017-1833	Amount of Each Disbursement this Period
	Purpose of Disbursement Online & Cable Expense	<input type="text" value="94.28"/>
	Candidate Name	Category/Type
	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) Comcast	Transaction ID: SB21B.32856 Date of Disbursement
	Mailing Address 900 Michigan Avenue, NE	<input type="text" value="12"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Washington State DC Zip Code 20017-1833	Amount of Each Disbursement this Period
	Purpose of Disbursement Online & Cable Expense	<input type="text" value="94.28"/>
	Candidate Name	Category/Type
	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) Curtis Midkiff	Transaction ID: SB21B.32864 Date of Disbursement
	Mailing Address 1001 3rd Street, SW, #412	<input type="text" value="07"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Washington State DC Zip Code 20024	Amount of Each Disbursement this Period
	Purpose of Disbursement Newsletter Production	<input type="text" value="812.50"/>
	Candidate Name	Category/Type
	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:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1001.06"/>
TOTAL 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)

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<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Curtis Midkiff	Transaction ID: SB21B.32865 Date of Disbursement 08 / 01 / 2007
	Mailing Address 1001 3rd Street, SW, #412	Amount of Each Disbursement this Period 812.50
	City Washington State DC Zip Code 20024	
	Purpose of Disbursement Newsletter Production	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Curtis Midkiff	Transaction ID: SB21B.32860 Date of Disbursement 09 / 13 / 2007
	Mailing Address 1001 3rd Street, SW, #412	Amount of Each Disbursement this Period 406.25
	City Washington State DC Zip Code 20024	
	Purpose of Disbursement Newsletter Production	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Curtis Midkiff	Transaction ID: SB21B.32861 Date of Disbursement 10 / 11 / 2007
	Mailing Address 1001 3rd Street, SW, #412	Amount of Each Disbursement this Period 406.25
	City Washington State DC Zip Code 20024	
	Purpose of Disbursement Newsletter Production	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1625.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Curtis Midkiff	Transaction ID: SB21B.32862 Date of Disbursement
	Mailing Address 1001 3rd Street, SW, #412	<input type="text" value="11"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Washington State DC Zip Code 20024	Amount of Each Disbursement this Period
	Purpose of Disbursement Newsletter Production	<input type="text" value="406.25"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Curtis Midkiff	Transaction ID: SB21B.32863 Date of Disbursement
	Mailing Address 1001 3rd Street, SW, #412	<input type="text" value="12"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Washington State DC Zip Code 20024	Amount of Each Disbursement this Period
	Purpose of Disbursement Newsletter Production	<input type="text" value="406.25"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Direct Concepts	Transaction ID: SB21B.32873 Date of Disbursement
	Mailing Address 44084 Riverside Parkway Suite 350	<input type="text" value="07"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Lansdowne State VA Zip Code 20176	Amount of Each Disbursement this Period
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	<input type="text" value="725.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1537.50"/>
TOTAL 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Direct Concepts</p> <p>Mailing Address 44084 Riverside Parkway Suite 350</p> <p>City Lansdowne State VA Zip Code 20176</p> <p>Purpose of Disbursement Lettershop & Printshop Fees- Generic</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>Transaction ID: SB21B.32870</p> <p>Date of Disbursement 09 / 13 / 2007</p> <p>Amount of Each Disbursement this Period 425.00</p>
<p>B. Full Name (Last, First, Middle Initial) Direct Concepts</p> <p>Mailing Address 44084 Riverside Parkway Suite 350</p> <p>City Lansdowne State VA Zip Code 20176</p> <p>Purpose of Disbursement Lettershop & Printshop Fees- Generic</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>Transaction ID: SB21B.32872</p> <p>Date of Disbursement 09 / 13 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Direct Concepts</p> <p>Mailing Address 44084 Riverside Parkway Suite 350</p> <p>City Lansdowne State VA Zip Code 20176</p> <p>Purpose of Disbursement Lettershop & Printshop Fees- Generic</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>Transaction ID: SB21B.32871</p> <p>Date of Disbursement 11 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 475.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1400.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Eberle Communications Inc.	Transaction ID: SB21B.32875 Date of Disbursement
	Mailing Address 1420 Spring Hill Rd., Suite 49	<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City McLean State VA Zip Code 22182	Amount of Each Disbursement this Period
	Purpose of Disbursement Online & Cable Expense	<input type="text" value="50.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Eberle Communications Inc.	Transaction ID: SB21B.32876 Date of Disbursement
	Mailing Address 1420 Spring Hill Rd., Suite 49	<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>
	City McLean State VA Zip Code 22182	Amount of Each Disbursement this Period
	Purpose of Disbursement Online & Cable Expense	<input type="text" value="50.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Eberle Communications Inc.	Transaction ID: SB21B.32877 Date of Disbursement
	Mailing Address 1420 Spring Hill Rd., Suite 49	<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City McLean State VA Zip Code 22182	Amount of Each Disbursement this Period
	Purpose of Disbursement Online & Cable Expense	<input type="text" value="50.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="150.00"/>
TOTAL 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Eberle Communications Inc. <hr/> Mailing Address 1420 Spring Hill Rd., Suite 49 <hr/> City McLean State VA Zip Code 22182 <hr/> Purpose of Disbursement Online & Cable Expense Candidate Name <hr/> 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.32878 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 7
	Amount of Each Disbursement this Period 50.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Eberle Communications Inc. <hr/> Mailing Address 1420 Spring Hill Rd., Suite 49 <hr/> City McLean State VA Zip Code 22182 <hr/> Purpose of Disbursement Online & Cable Expense Candidate Name <hr/> 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.32874 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 7
	Amount of Each Disbursement this Period 26.92
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Eberle Communications Inc. <hr/> Mailing Address 1420 Spring Hill Rd., Suite 49 <hr/> City McLean State VA Zip Code 22182 <hr/> Purpose of Disbursement Online & Cable Expense Candidate Name <hr/> 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.32879 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 0 7
	Amount of Each Disbursement this Period 50.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	126.92
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Federal Express Mailing Address P.O. Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Courier Expense 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.32886 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 7	Amount of Each Disbursement this Period 205.90
B.	Full Name (Last, First, Middle Initial) Federal Express Mailing Address P.O. Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Courier Expense 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.32880 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 7	Amount of Each Disbursement this Period 15.14
C.	Full Name (Last, First, Middle Initial) Federal Express Mailing Address P.O. Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Courier Expense 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.32885 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 0 7	Amount of Each Disbursement this Period 143.83

SUBTOTAL of Disbursements This Page (optional)	364.87
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B.32882 Date of Disbursement
	Mailing Address P.O. Box 1140	<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City Memphis State TN Zip Code 38101-1140	Amount of Each Disbursement this Period
	Purpose of Disbursement Courier Expense	<input type="text" value="53.88"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B.32883 Date of Disbursement
	Mailing Address P.O. Box 1140	<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City Memphis State TN Zip Code 38101-1140	Amount of Each Disbursement this Period
	Purpose of Disbursement Courier Expense	<input type="text" value="96.28"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B.32884 Date of Disbursement
	Mailing Address P.O. Box 1140	<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City Memphis State TN Zip Code 38101-1140	Amount of Each Disbursement this Period
	Purpose of Disbursement Courier Expense	<input type="text" value="108.87"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="259.03"/>
TOTAL 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B.32881 Date of Disbursement																			
	Mailing Address P.O. Box 1140	<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>1</td><td>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	0		2	0	0	7												
	City Memphis State TN Zip Code 38101-1140	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Courier Expense	<table border="1"><tr><td>46.29</td></tr></table>	46.29																		
46.29																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Grosvenor Urban Retail, LP	Transaction ID: SB21B.32887 Date of Disbursement																			
	Mailing Address PO Box 11071	<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>7</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	2		2	0	0	7												
	City Fort Wayne State IN Zip Code 46855	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Office Rent	<table border="1"><tr><td>105.87</td></tr></table>	105.87																		
105.87																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Grosvenor Urban Retail, LP	Transaction ID: SB21B.32889 Date of Disbursement																			
	Mailing Address PO Box 11071	<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>7</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	2		2	0	0	7												
	City Fort Wayne State IN Zip Code 46855	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Parking	<table border="1"><tr><td>200.00</td></tr></table>	200.00																		
200.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>352.16</td></tr></table>	352.16
352.16		
TOTAL 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)

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<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

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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Grosvenor Urban Retail, LP	Transaction ID: SB21B.32891
	Mailing Address PO Box 11071	Date of Disbursement 07 / 02 / 2007
	City Fort Wayne State IN Zip Code 46855	Amount of Each Disbursement this Period 770.05
	Purpose of Disbursement CAM	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Grosvenor Urban Retail, LP	Transaction ID: SB21B.32894
	Mailing Address PO Box 11071	Date of Disbursement 07 / 02 / 2007
	City Fort Wayne State IN Zip Code 46855	Amount of Each Disbursement this Period 1166.72
	Purpose of Disbursement Property Taxes	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Grosvenor Urban Retail, LP	Transaction ID: SB21B.32897
	Mailing Address PO Box 11071	Date of Disbursement 07 / 02 / 2007
	City Fort Wayne State IN Zip Code 46855	Amount of Each Disbursement this Period 2519.99
	Purpose of Disbursement Office Rent	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4456.76
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 273 / 307

<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Grosvenor Urban Retail, LP	Transaction ID: SB21B.32888
	Mailing Address PO Box 11071	Date of Disbursement 08 / 01 / 2007
	City Fort Wayne State IN Zip Code 46855	Amount of Each Disbursement this Period 105.87
	Purpose of Disbursement Office Rent	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Grosvenor Urban Retail, LP	Transaction ID: SB21B.32890
	Mailing Address PO Box 11071	Date of Disbursement 08 / 01 / 2007
	City Fort Wayne State IN Zip Code 46855	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement Parking	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Grosvenor Urban Retail, LP	Transaction ID: SB21B.32892
	Mailing Address PO Box 11071	Date of Disbursement 08 / 01 / 2007
	City Fort Wayne State IN Zip Code 46855	Amount of Each Disbursement this Period 770.05
	Purpose of Disbursement CAM	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ► **1075.92**

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 274 / 307

<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Grosvenor Urban Retail, LP

Transaction ID: SB21B.32893

Date of Disbursement

Mailing Address PO Box 11071

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	0	7

City State Zip Code
Fort Wayne IN 46855

Amount of Each Disbursement this Period

1080.70

Purpose of Disbursement
Office Rent

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Grosvenor Urban Retail, LP

Transaction ID: SB21B.32895

Date of Disbursement

Mailing Address PO Box 11071

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	0	7

City State Zip Code
Fort Wayne IN 46855

Amount of Each Disbursement this Period

1166.72

Purpose of Disbursement
Property Taxes

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Grosvenor Urban Retail, LP

Transaction ID: SB21B.32896

Date of Disbursement

Mailing Address PO Box 11071

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	0	7

City State Zip Code
Fort Wayne IN 46855

Amount of Each Disbursement this Period

1341.24

Purpose of Disbursement
Office Rent

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

3588.66

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Grosvenor Urban Retail, LP <hr/> Mailing Address PO Box 11071 <hr/> City Fort Wayne State IN Zip Code 46855 <hr/> Purpose of Disbursement Office Rent Candidate Name <hr/> 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.32900 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 7
	Amount of Each Disbursement this Period 8340.67
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Grosvenor Urban Retail, LP <hr/> Mailing Address PO Box 11071 <hr/> City Fort Wayne State IN Zip Code 46855 <hr/> Purpose of Disbursement Office Rent Candidate Name <hr/> 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.32898 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7
	Amount of Each Disbursement this Period 5837.50
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Grosvenor Urban Retail, LP <hr/> Mailing Address PO Box 11071 <hr/> City Fort Wayne State IN Zip Code 46855 <hr/> Purpose of Disbursement Office Rent Candidate Name <hr/> 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.32899 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
	Amount of Each Disbursement this Period 5837.50
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

20015.67

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

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

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

FOR LINE NUMBER: (check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Heartland Payment Systems	Transaction ID: SB21B.32906 Date of Disbursement
	Mailing Address 25115 Country Club Boulevard	<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City North Olmsted State OH Zip Code 44070	Amount of Each Disbursement this Period
	Purpose of Disbursement Caging Services	<input type="text" value="172.20"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Heartland Payment Systems	Transaction ID: SB21B.32904 Date of Disbursement
	Mailing Address 25115 Country Club Boulevard	<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
	City North Olmsted State OH Zip Code 44070	Amount of Each Disbursement this Period
	Purpose of Disbursement Caging Services	<input type="text" value="66.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Heartland Payment Systems	Transaction ID: SB21B.32907 Date of Disbursement
	Mailing Address 25115 Country Club Boulevard	<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
	City North Olmsted State OH Zip Code 44070	Amount of Each Disbursement this Period
	Purpose of Disbursement Caging Services	<input type="text" value="210.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="448.20"/>
TOTAL 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)

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<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Heartland Payment Systems	Transaction ID: SB21B.32902
	Mailing Address 25115 Country Club Boulevard	Date of Disbursement 09 / 08 / 2007
	City North Olmsted State OH Zip Code 44070	Amount of Each Disbursement this Period 16.50
	Purpose of Disbursement Caging Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Heartland Payment Systems	Transaction ID: SB21B.32908
	Mailing Address 25115 Country Club Boulevard	Date of Disbursement 09 / 08 / 2007
	City North Olmsted State OH Zip Code 44070	Amount of Each Disbursement this Period 267.98
	Purpose of Disbursement Caging Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Heartland Payment Systems	Transaction ID: SB21B.32905
	Mailing Address 25115 Country Club Boulevard	Date of Disbursement 10 / 02 / 2007
	City North Olmsted State OH Zip Code 44070	Amount of Each Disbursement this Period 125.97
	Purpose of Disbursement Caging Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	410.45
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) New York Times Mailing Address PO Box 371456 City Pittsburgh State PA Zip Code 15250-7456 Purpose of Disbursement Publications 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.32913 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 7	Amount of Each Disbursement this Period 174.72
B.	Full Name (Last, First, Middle Initial) Northwestern Mutual Life Mailing Address 720 East Wisconsin Avenue City Milwaukee State WI Zip Code 53202 Purpose of Disbursement Medical Insurance 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.32914 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 7	Amount of Each Disbursement this Period 408.93
C.	Full Name (Last, First, Middle Initial) Northwestern Mutual Life Mailing Address 720 East Wisconsin Avenue City Milwaukee State WI Zip Code 53202 Purpose of Disbursement Medical Insurance 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.32915 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7	Amount of Each Disbursement this Period 408.93

SUBTOTAL of Disbursements This Page (optional)	992.58
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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Northwestern Mutual Life	Transaction ID: SB21B.32916 Date of Disbursement
	Mailing Address 720 East Wisconsin Avenue	<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2007"/>
	City Milwaukee State WI Zip Code 53202	Amount of Each Disbursement this Period
	Purpose of Disbursement Medical Insurance	<input type="text" value="408.93"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Northwestern Mutual Life	Transaction ID: SB21B.32917 Date of Disbursement
	Mailing Address 720 East Wisconsin Avenue	<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2007"/>
	City Milwaukee State WI Zip Code 53202	Amount of Each Disbursement this Period
	Purpose of Disbursement Medical Insurance	<input type="text" value="408.93"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Northwestern Mutual Life	Transaction ID: SB21B.32918 Date of Disbursement
	Mailing Address 720 East Wisconsin Avenue	<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>
	City Milwaukee State WI Zip Code 53202	Amount of Each Disbursement this Period
	Purpose of Disbursement Medical Insurance	<input type="text" value="409.30"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1227.16"/>
TOTAL 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Omniprint Mailing Address 9700 Philadelphia Court City Lanham State MD Zip Code 20695 Purpose of Disbursement Lettershop & Printshop Fees- Generic 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.32919 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 7
	Amount of Each Disbursement this Period 2637.60 Category/Type

B. Full Name (Last, First, Middle Initial) Patriot Data Services Mailing Address 44084 Riverside Parkway City Lansdowne State VA Zip Code 20176 Purpose of Disbursement Lettershop & Printshop Fees- Generic 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.32922 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 0 7
	Amount of Each Disbursement this Period 654.90 Category/Type

C. Full Name (Last, First, Middle Initial) Patriot Data Services Mailing Address 44084 Riverside Parkway City Lansdowne State VA Zip Code 20176 Purpose of Disbursement Lettershop & Printshop Fees- Generic 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.32921 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 0 7
	Amount of Each Disbursement this Period 310.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	3602.50
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Patriot Data Services</p> <p>Mailing Address 44084 Riverside Parkway</p> <p>City Lansdowne State VA Zip Code 20176</p> <p>Purpose of Disbursement Lettershop & Printshop Fees- Generic</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>Transaction ID: SB21B.32923</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="797.72"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Patriot Data Services</p> <p>Mailing Address 44084 Riverside Parkway</p> <p>City Lansdowne State VA Zip Code 20176</p> <p>Purpose of Disbursement Lettershop & Printshop Fees- Generic</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>Transaction ID: SB21B.32920</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="204.74"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paychex Services</p> <p>Mailing Address PO Box 388</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Payroll Taxes</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>Transaction ID: SB21B.32925</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="142.72"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Paychex Services	Transaction ID: SB21B.32928 Date of Disbursement
	Mailing Address PO Box 388	<input type="text" value="07"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="337.94"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paychex Services	Transaction ID: SB21B.32938 Date of Disbursement
	Mailing Address PO Box 388	<input type="text" value="07"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="1108.41"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paychex Services	Transaction ID: SB21B.32929 Date of Disbursement
	Mailing Address PO Box 388	<input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="337.94"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1784.29"/>
TOTAL 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)

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<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Paychex Services	Transaction ID: SB21B.32941 Date of Disbursement
	Mailing Address PO Box 388	<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="1272.16"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paychex Services	Transaction ID: SB21B.32930 Date of Disbursement
	Mailing Address PO Box 388	<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="337.94"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paychex Services	Transaction ID: SB21B.32939 Date of Disbursement
	Mailing Address PO Box 388	<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="1108.41"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2718.51"/>
TOTAL 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)

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<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Paychex Services</p> <p>Mailing Address PO Box 388</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Payroll Taxes</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>Transaction ID: SB21B.32931</p> <p>Date of Disbursement 08 / 31 / 2007</p> <p>Amount of Each Disbursement this Period 337.94</p>
<p>B. Full Name (Last, First, Middle Initial) Paychex Services</p> <p>Mailing Address PO Box 388</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Payroll Taxes</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>Transaction ID: SB21B.32942</p> <p>Date of Disbursement 08 / 31 / 2007</p> <p>Amount of Each Disbursement this Period 1272.16</p>
<p>C. Full Name (Last, First, Middle Initial) Paychex Services</p> <p>Mailing Address PO Box 388</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Payroll Taxes</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>Transaction ID: SB21B.32932</p> <p>Date of Disbursement 09 / 12 / 2007</p> <p>Amount of Each Disbursement this Period 337.94</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1948.04

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Paychex Services	Transaction ID: SB21B.32940 Date of Disbursement
	Mailing Address PO Box 388	<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>
	City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="1108.41"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paychex Services	Transaction ID: SB21B.32927 Date of Disbursement
	Mailing Address PO Box 388	<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>
	City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="145.22"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paychex Services	Transaction ID: SB21B.32933 Date of Disbursement
	Mailing Address PO Box 388	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
	City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="337.94"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1591.57"/>
TOTAL 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)

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<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Paychex Services Mailing Address PO Box 388 City Owings Mills State MD Zip Code 21117 Purpose of Disbursement Payroll Taxes 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.32943 Date of Disbursement 09 / 30 / 2007	Amount of Each Disbursement this Period 1272.16
B.	Full Name (Last, First, Middle Initial) Paychex Services Mailing Address PO Box 388 City Owings Mills State MD Zip Code 21117 Purpose of Disbursement Payroll Taxes 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.32934 Date of Disbursement 10 / 15 / 2007	Amount of Each Disbursement this Period 337.94
C.	Full Name (Last, First, Middle Initial) Paychex Services Mailing Address PO Box 388 City Owings Mills State MD Zip Code 21117 Purpose of Disbursement Payroll Taxes 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.32935 Date of Disbursement 10 / 31 / 2007	Amount of Each Disbursement this Period 337.94

SUBTOTAL of Disbursements This Page (optional) ▶

1948.04

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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Paychex Services	Transaction ID: SB21B.32944 Date of Disbursement
	Mailing Address PO Box 388	<input type="text" value="10"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="1272.16"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paychex Services	Transaction ID: SB21B.32924 Date of Disbursement
	Mailing Address PO Box 388	<input type="text" value="11"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="105.79"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paychex Services	Transaction ID: SB21B.32936 Date of Disbursement
	Mailing Address PO Box 388	<input type="text" value="11"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="337.94"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1715.89"/>
TOTAL 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)

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<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Paychex Services	Transaction ID: SB21B.32937 Date of Disbursement
	Mailing Address PO Box 388	<input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
	City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="337.94"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paychex Services	Transaction ID: SB21B.32945 Date of Disbursement
	Mailing Address PO Box 388	<input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
	City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="1272.16"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paychex Services	Transaction ID: SB21B.32926 Date of Disbursement
	Mailing Address PO Box 388	<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2007"/>
	City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="142.72"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1752.82"/>
TOTAL 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)

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<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Pepco</p> <p>Mailing Address P.O. Box 97275</p> <p>City Washington State DC Zip Code 20090-7275</p> <p>Purpose of Disbursement Utilities</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>Transaction ID: SB21B.32951</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="295.17"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Pepco</p> <p>Mailing Address P.O. Box 97275</p> <p>City Washington State DC Zip Code 20090-7275</p> <p>Purpose of Disbursement Utilities</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>Transaction ID: SB21B.32950</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="269.59"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Pepco</p> <p>Mailing Address P.O. Box 97275</p> <p>City Washington State DC Zip Code 20090-7275</p> <p>Purpose of Disbursement Utilities</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>Transaction ID: SB21B.32949</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="153.62"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="718.38"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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 291 / 307

<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

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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Richard Norman Company <hr/> Mailing Address 44084 Riverside Parkway <hr/> City Lansdowne State VA Zip Code 20176 <hr/> Purpose of Disbursement Lettershop & Printshop Fees- Generic Candidate Name <hr/> 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.32961 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 7
	Amount of Each Disbursement this Period 12580.08
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Richard Norman Company <hr/> Mailing Address 44084 Riverside Parkway <hr/> City Lansdowne State VA Zip Code 20176 <hr/> Purpose of Disbursement Lettershop & Printshop Fees- Generic Candidate Name <hr/> 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.32955 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 7
	Amount of Each Disbursement this Period 3065.67
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Richard Norman Company <hr/> Mailing Address 44084 Riverside Parkway <hr/> City Lansdowne State VA Zip Code 20176 <hr/> Purpose of Disbursement Lettershop & Printshop Fees- Generic Candidate Name <hr/> 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.32952 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 0 7
	Amount of Each Disbursement this Period 74.21
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

15719.96

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

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

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

FOR LINE NUMBER: (check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Richard Norman Company <hr/> Mailing Address 44084 Riverside Parkway <hr/> City Lansdowne State VA Zip Code 20176 <hr/> Purpose of Disbursement Lettershop & Printshop Fees- Generic Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.32954 Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2007
	Amount of Each Disbursement this Period 1280.02
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Richard Norman Company <hr/> Mailing Address 44084 Riverside Parkway <hr/> City Lansdowne State VA Zip Code 20176 <hr/> Purpose of Disbursement Lettershop & Printshop Fees- Generic Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.32957 Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2007
	Amount of Each Disbursement this Period 5475.82
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Richard Norman Company <hr/> Mailing Address 44084 Riverside Parkway <hr/> City Lansdowne State VA Zip Code 20176 <hr/> Purpose of Disbursement Lettershop & Printshop Fees- Generic Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.32953 Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2007
	Amount of Each Disbursement this Period 95.61
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

6851.45

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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Richard Norman Company	Transaction ID: SB21B.32956 Date of Disbursement
	Mailing Address 44084 Riverside Parkway	<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
	City Lansdowne State VA Zip Code 20176	Amount of Each Disbursement this Period
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	<input type="text" value="3438.23"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Richard Norman Company	Transaction ID: SB21B.32960 Date of Disbursement
	Mailing Address 44084 Riverside Parkway	<input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>
	City Lansdowne State VA Zip Code 20176	Amount of Each Disbursement this Period
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	<input type="text" value="9582.97"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Robertson Mailing List Company	Transaction ID: SB21B.32964 Date of Disbursement
	Mailing Address 44084 Riverside Pkwy, Ste 350	<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>
	City Lansdowne State VA Zip Code 20176	Amount of Each Disbursement this Period
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	<input type="text" value="7013.87"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="20035.07"/>
TOTAL 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Robertson Mailing List Company

Transaction ID: SB21B.32962

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	0	7

Mailing Address 44084 Riverside Pkwy, Ste 350

Amount of Each Disbursement this Period

900.00

City Lansdowne State VA Zip Code 20176

Purpose of Disbursement
Lettershop & Printshop Fees- Generic

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Robertson Mailing List Company

Transaction ID: SB21B.32963

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	0		2	0	0	7

Mailing Address 44084 Riverside Pkwy, Ste 350

Amount of Each Disbursement this Period

2914.66

City Lansdowne State VA Zip Code 20176

Purpose of Disbursement
Lettershop & Printshop Fees- Generic

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Star Envelope

Transaction ID: SB21B.32966

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	0	7

Mailing Address P.O. Box 740209

Amount of Each Disbursement this Period

836.00

City Atlanta State GA Zip Code 30374

Purpose of Disbursement
Lettershop & Printshop Fees- Generic

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

4650.66

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

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<input 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

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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Star Envelope	Transaction ID: SB21B.32965 Date of Disbursement
	Mailing Address P.O. Box 740209	<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City Atlanta State GA Zip Code 30374	Amount of Each Disbursement this Period
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	<input type="text" value="455.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Tri-State Envelope	Transaction ID: SB21B.32968 Date of Disbursement
	Mailing Address PO Box 433	<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2007"/>
	City Beltsville State MD Zip Code 20704-0433	Amount of Each Disbursement this Period
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	<input type="text" value="2232.51"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) TRS Direct	Transaction ID: SB21B.32977 Date of Disbursement
	Mailing Address 148 Graves Mill Rd	<input type="text" value="07"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>
	City Lynchburg State VA Zip Code 24502	Amount of Each Disbursement this Period
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	<input type="text" value="9668.97"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="12356.48"/>
TOTAL 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)

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<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) TRS Direct	Transaction ID: SB21B.32975 Date of Disbursement
	Mailing Address 148 Graves Mill Rd	<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City Lynchburg State VA Zip Code 24502	Amount of Each Disbursement this Period
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	<input type="text" value="6461.21"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) TRS Direct	Transaction ID: SB21B.32978 Date of Disbursement
	Mailing Address 148 Graves Mill Rd	<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City Lynchburg State VA Zip Code 24502	Amount of Each Disbursement this Period
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	<input type="text" value="11741.97"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) TRS Direct	Transaction ID: SB21B.32969 Date of Disbursement
	Mailing Address 148 Graves Mill Rd	<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>
	City Lynchburg State VA Zip Code 24502	Amount of Each Disbursement this Period
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	<input type="text" value="2059.23"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="20262.41"/>
TOTAL 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) TRS Direct	Transaction ID: SB21B.32970 Date of Disbursement
	Mailing Address 148 Graves Mill Rd	<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City Lynchburg State VA Zip Code 24502	Amount of Each Disbursement this Period
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	<input type="text" value="4891.71"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) TRS Direct	Transaction ID: SB21B.32972 Date of Disbursement
	Mailing Address 148 Graves Mill Rd	<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City Lynchburg State VA Zip Code 24502	Amount of Each Disbursement this Period
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	<input type="text" value="5584.62"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) TRS Direct	Transaction ID: SB21B.32971 Date of Disbursement
	Mailing Address 148 Graves Mill Rd	<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
	City Lynchburg State VA Zip Code 24502	Amount of Each Disbursement this Period
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	<input type="text" value="5477.62"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) TRS Direct	Transaction ID: SB21B.36482 Date of Disbursement
	Mailing Address 148 Graves Mill Rd	<input type="text" value="12"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Lynchburg State VA Zip Code 24502	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage & Lettershop Services - Generic	<input type="text" value="12578.15"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) TRS Direct	Transaction ID: SB21B.32974 Date of Disbursement
	Mailing Address 148 Graves Mill Rd	<input type="text" value="12"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Lynchburg State VA Zip Code 24502	Amount of Each Disbursement this Period
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	<input type="text" value="5967.08"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Valley Press, Inc	Transaction ID: SB21B.32980 Date of Disbursement
	Mailing Address 44084 Riverside Parkway Suite 350	<input type="text" value="07"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Lansdowne State VA Zip Code 20176	Amount of Each Disbursement this Period
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	<input type="text" value="1212.55"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="19757.78"/>
TOTAL 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Valley Press, Inc	Transaction ID: SB21B.32981 Date of Disbursement 08 / 01 / 2007
	Mailing Address 44084 Riverside Parkway Suite 350	Amount of Each Disbursement this Period 3554.78
	City Lansdowne State VA Zip Code 20176	
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Valley Press, Inc	Transaction ID: SB21B.32979 Date of Disbursement 09 / 13 / 2007
	Mailing Address 44084 Riverside Parkway Suite 350	Amount of Each Disbursement this Period 1069.54
	City Lansdowne State VA Zip Code 20176	
	Purpose of Disbursement Lettershop & Printshop Fees- Generic	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Verizon, Inc.	Transaction ID: SB21B.32987 Date of Disbursement 07 / 12 / 2007
	Mailing Address PO Box 7120	Amount of Each Disbursement this Period 109.34
	City Tucson State AZ Zip Code 85731	
	Purpose of Disbursement Telephone Expense	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	4733.66
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Verizon, Inc.</p> <p>Mailing Address PO Box 7120</p> <p>City Tucson State AZ Zip Code 85731</p> <p>Purpose of Disbursement Telephone Expense</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>Transaction ID: SB21B.32989</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="111.57"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Verizon, Inc.</p> <p>Mailing Address PO Box 7120</p> <p>City Tucson State AZ Zip Code 85731</p> <p>Purpose of Disbursement Telephone Expense</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>Transaction ID: SB21B.32988</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="111.26"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 7120</p> <p>City Tucson State AZ Zip Code 85731-7120</p> <p>Purpose of Disbursement Telephone Expense</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>Transaction ID: SB21B.32983</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="111.53"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="334.36"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: SB21B.32986 Date of Disbursement
	Mailing Address PO Box 7120	<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City Tucson State AZ Zip Code 85731-7120	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone Expense Candidate Name	<input type="text" value="126.82"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: SB21B.32982 Date of Disbursement
	Mailing Address PO Box 7120	<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>
	City Tucson State AZ Zip Code 85731-7120	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone Expense Candidate Name	<input type="text" value="106.28"/>
	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) Verizon Wireless	Transaction ID: SB21B.32984 Date of Disbursement
	Mailing Address PO Box 7120	<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City Tucson State AZ Zip Code 85731-7120	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone Expense Candidate Name	<input type="text" value="114.24"/>
	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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 7120 City Tucson State AZ Zip Code 85731-7120 Purpose of Disbursement Telephone Expense 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.32985 Date of Disbursement 12 / 10 / 2007	Amount of Each Disbursement this Period 116.73
B.	Full Name (Last, First, Middle Initial) Vertis Communications Mailing Address 250 West Pratt Street City Baltimore State MD Zip Code 21201 Purpose of Disbursement Lettershop & Printshop Fees- Generic 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.32991 Date of Disbursement 11 / 07 / 2007	Amount of Each Disbursement this Period 4374.15
C.	Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address 740 15th Street NW 3rd Floor City Washington State DC Zip Code 20005 Purpose of Disbursement Bank Service Charges 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.32995 Date of Disbursement 07 / 11 / 2007	Amount of Each Disbursement this Period 103.06

SUBTOTAL of Disbursements This Page (optional) ▶

4593.94

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

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

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

FOR LINE NUMBER: (check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Wachovia Bank</p> <p>Mailing Address 740 15th Street NW 3rd Floor</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Bank Service Charges</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>Transaction ID: SB21B.32993</p> <p>Date of Disbursement 08 / 03 / 2007</p> <p>Amount of Each Disbursement this Period 85.51</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Wachovia Bank</p> <p>Mailing Address 740 15th Street NW 3rd Floor</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Bank Service Charges</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>Transaction ID: SB21B.32992</p> <p>Date of Disbursement 09 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 77.64</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Wachovia Bank</p> <p>Mailing Address 740 15th Street NW 3rd Floor</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Bank Service Charges</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>Transaction ID: SB21B.32996</p> <p>Date of Disbursement 10 / 10 / 2007</p> <p>Amount of Each Disbursement this Period 112.72</p>

SUBTOTAL of Disbursements This Page (optional) ▶

275.87

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Wachovia Bank</p> <p>Mailing Address 740 15th Street NW 3rd Floor</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Bank Service Charges</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>Transaction ID: SB21B.32994</p> <p>Date of Disbursement 11 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 92.33</p> <p>Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) XO Communications</p> <p>Mailing Address P.O. Box 60000</p> <p>City San Francisco State CA Zip Code 94160-3708</p> <p>Purpose of Disbursement Online & Cable Expense</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>Transaction ID: SB21B.32999</p> <p>Date of Disbursement 10 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 169.25</p> <p>Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) XO Communications</p> <p>Mailing Address P.O. Box 60000</p> <p>City San Francisco State CA Zip Code 94160-3708</p> <p>Purpose of Disbursement Online & Cable Expense</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>Transaction ID: SB21B.32997</p> <p>Date of Disbursement 11 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 166.75</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

428.33

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

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
XO Communications

Mailing Address P.O. Box 60000

City San Francisco State CA Zip Code 94160-3708

Purpose of Disbursement
Online & Cable Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.32998

Date of Disbursement

11 / 20 / 2007

Amount of Each Disbursement this Period

166.75

SUBTOTAL of Disbursements This Page (optional)

166.75

TOTAL This Period (last page this line number only)

321667.42

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

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Friends of U. Omarh Rajah

Mailing Address 10401 Brightstone Drive

City Midlothian State VA Zip Code 23112

Purpose of Disbursement
Political Contributions

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.33003

Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Friends of U. Omarh Rajah

Mailing Address 10401 Brightstone Drive

City Midlothian State VA Zip Code 23112

Purpose of Disbursement
Political Contributions

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.33004

Date of Disbursement

11 / 15 / 2007

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 307 / 307	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
BLACK AMERICA'S POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Advance Mailing Services	Nature of Debt (Purpose): Postage & Lettershop Services - Generic
Mailing Address 2600 Temple Heights Drive	
City State ZIP Code Oceanside CA 92056	

Outstanding Balance Beginning This Period 1478.72	Transaction ID: SD10.15734	
Amount Incurred This Period 3756.88	Payment This Period 1478.72	Outstanding Balance at Close of This Period 3756.88

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor TRS Direct	Nature of Debt (Purpose): Lettershop & Printshop Fees - Generic
Mailing Address 148 Graves Mill Rd	
City State ZIP Code Lynchburg VA 24502	

Outstanding Balance Beginning This Period 12578.15	Transaction ID: SD10.32785	
Amount Incurred This Period 24538.23	Payment This Period 12578.15	Outstanding Balance at Close of This Period 24538.23

1) SUBTOTALS This Period This Page (optional).....	28295.11
2) TOTALS This Period (last page this line number only).....	28295.11
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	28295.11