



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
BLACK REPUBLICAN PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		23312.90
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	9916.57									
(c) Total Receipts (from Line 19) .....	97172.24	179532.27								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	107088.81	202845.17								
7. Total Disbursements (from Line 31) .....	91920.56	187676.92								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	15168.25	15168.25								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	64079.03									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
BLACK REPUBLICAN PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	17318.16	30243.16
(ii) Unitemized .....	79854.08	149289.11
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	97172.24	179532.27
(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) .....	97172.24	179532.27
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)) .....	97172.24	179532.27
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	97172.24	179532.27

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	87920.56	181676.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	87920.56	181676.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	6000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	91920.56	187676.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	91920.56	187676.92

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	97172.24	179532.27
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	97172.24	179532.27
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	87920.56	181676.92
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	87920.56	181676.92

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 47  
(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 REPUBLICAN PAC**

**A.** Full Name (Last, First, Middle Initial)  
MR DENIS ABLES 221

Mailing Address PO BOX 231

City State Zip Code  
**VIENNA VA 22183**

FEC ID number of contributing federal political committee. C

Name of Employer: NONE      Occupation: RETIRED

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY  
05 / 12 / 2010

**Transaction ID:** SA11AI.86122

Amount of Each Receipt this Period 200.00

**B.** Full Name (Last, First, Middle Initial)  
MR CHARLES ALBERT 212

Mailing Address 20 ROLAND CT

City State Zip Code  
**TOWSON MD 21204**

FEC ID number of contributing federal political committee. C

Name of Employer:      Occupation:

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** SA11AI.86149

Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
MR CECIL BARNETT 402

Mailing Address 126 INDIAN HILLS TRL

City State Zip Code  
**LOUISVILLE KY 40207**

FEC ID number of contributing federal political committee. C

Name of Employer: ALGOOD FOOD CO      Occupation: PRESIDENT

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY  
06 / 18 / 2010

**Transaction ID:** SA11AI.86311

Amount of Each Receipt this Period 150.00

**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: (check only one)	PAGE 7 / 47
	<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 REPUBLICAN PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) MR GERSON BARNETT 591	Date of Receipt MM / DD / YYYY 04 / 27 / 2010
	Mailing Address 2908 SHADOW OAKS PL	<b>Transaction ID:</b> SA11AI.86309
	City State Zip Code BILLINGS MT 59102	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer NONE Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) DR CHESTER BEYER 751, MD	Date of Receipt MM / DD / YYYY 06 / 10 / 2010
	Mailing Address 577 POLLY RD	<b>Transaction ID:</b> SA11AI.86418
	City State Zip Code SUNNYVALE TX 75182	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer SW ANESTHESIOLOGY Occupation PHYSICIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR JOHN BRANDT 557	Date of Receipt MM / DD / YYYY 06 / 14 / 2010
	Mailing Address 2129 12TH AVENUE E	<b>Transaction ID:</b> SA11AI.86512
	City State Zip Code HIBBING MN 55746	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer NONE Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 310.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 8 / 47
	<input checked="" 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 REPUBLICAN PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) MRS VIRGINIA W BROWN 201	Date of Receipt MM / DD / YYYY 05 / 21 / 2010
	Mailing Address 828 VAN BUREN ST	<b>Transaction ID:</b> SA11AI.86552
	City State Zip Code HERNDON VA 20170	Amount of Each Receipt this Period 375.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer NONE	Occupation RETIRED
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00

<b>B.</b>	Full Name (Last, First, Middle Initial) MR TIMOTHY THOMAS BROWN 802	Date of Receipt MM / DD / YYYY 04 / 05 / 2010
	Mailing Address 210 VINE ST	<b>Transaction ID:</b> SA11AI.86566
	City State Zip Code DENVER CO 80206	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer NRC BROADCASTING	Occupation CEO
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

<b>C.</b>	Full Name (Last, First, Middle Initial) MS ELIZABETH BRYDEN 100	Date of Receipt MM / DD / YYYY 05 / 21 / 2010
	Mailing Address 1 W 67TH ST APT 611	<b>Transaction ID:</b> SA11AI.86589
	City State Zip Code NEW YORK NY 10023	Amount of Each Receipt this Period 105.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer NONE	Occupation RETIRED
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>980.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 47
	<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 REPUBLICAN PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) WILLIAM STEWART BUNDRICK 711	Date of Receipt MM / DD / YYYY 06 / 28 / 2010
	Mailing Address 8712 GLENMORA DR	<b>Transaction ID:</b> SA11AI.86607
	City State Zip Code SHREVEPORT LA 71106	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR JOHN CRAWFORD 950	Date of Receipt MM / DD / YYYY 04 / 30 / 2010
	Mailing Address 20128 CHATEAU DR	<b>Transaction ID:</b> SA11AI.86907
	City State Zip Code SARATOGA CA 95070	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation INTEL CORP COMPUTER ARCHITECT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) DR JOANNE D DENKO 441, MD	Date of Receipt MM / DD / YYYY 04 / 01 / 2010
	Mailing Address 21160 AVALON DR	<b>Transaction ID:</b> SA11AI.87038
	City State Zip Code ROCKY RIVER OH 44116	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation SELF EMPLOYED PHYSICIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 47
	<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 REPUBLICAN PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) DR JOANNE D DENKO 441, MD		Date of Receipt
	Mailing Address 21160 AVALON DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	ROCKY RIVER	OH	44116
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.87039
Name of Employer SELF EMPLOYED		Occupation PHYSICIAN	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"/>
		<input type="text"/> 300.00	<input type="text"/> 50.00

<b>B.</b>	Full Name (Last, First, Middle Initial) R REBECCA DONATELLI 223		Date of Receipt
	Mailing Address 118 N SAINT ASAPH ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	ALEXANDRIA	VA	22314
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.87108
Name of Employer CAMPAIGN SOLUTIONS INC		Occupation PRESIDENT	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"/>
		<input type="text"/> 206.78	<input type="text"/> 67.00

<b>C.</b>	Full Name (Last, First, Middle Initial) R REBECCA DONATELLI 223		Date of Receipt
	Mailing Address 118 N SAINT ASAPH ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	ALEXANDRIA	VA	22314
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.87109
Name of Employer CAMPAIGN SOLUTIONS INC		Occupation PRESIDENT	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"/>
		<input type="text"/> 212.98	<input type="text"/> 6.20

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 123.20
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 11 / 47  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
MR RONALD ELLIS 112  
Mailing Address 2340 E 17TH ST  
City BROOKLYN State NY Zip Code 11229  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.00  
Date of Receipt 06 / 17 / 2010  
Transaction ID: SA11AI.87202  
Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
DONALD GUMPERTZ 916  
Mailing Address PO BOX 2450  
City TOLUCA LAKE State CA Zip Code 91610  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1100.00  
Date of Receipt 05 / 21 / 2010  
Transaction ID: SA11AI.87562  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
MR J KERN HAMILTON 950  
Mailing Address 800 BLOSSOM HILL RD UNIT E324  
City LOS GATOS State CA Zip Code 95032  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 302.00  
Date of Receipt 06 / 08 / 2010  
Transaction ID: SA11AI.87617  
Amount of Each Receipt this Period 151.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 701.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 12 / 47  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
MRS BILLIE HAYES 856

Mailing Address 3427 OAK HILL ST

City State Zip Code  
SIERRA VISTA AZ 85650

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 1 0

**Transaction ID:** SA11AI.87681

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
MRS ELLA M HELM 300

Mailing Address 3385 HALLMARK DR SE

City State Zip Code  
MARIETTA GA 30067

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

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

**Transaction ID:** SA11AI.87697

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
MRS ELLA M HELM 300

Mailing Address 3385 HALLMARK DR SE

City State Zip Code  
MARIETTA GA 30067

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

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

**Transaction ID:** SA11AI.87698

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: (check only one)	PAGE 13 / 47
	<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 REPUBLICAN PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) JOSEPH HILL 190	Date of Receipt MM / DD / YYYY 04 / 19 / 2010
	Mailing Address 1230 DENBIGH LN	<b>Transaction ID:</b> SA11AI.87739
	City State Zip Code WAYNE PA 19087	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NONE Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) J HUDIBURG 334	Date of Receipt MM / DD / YYYY 06 / 07 / 2010
	Mailing Address 197 COMMODORE DR	<b>Transaction ID:</b> SA11AI.87844
	City State Zip Code JUPITER FL 33477	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NONE Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MS D PATRICIA JENNETT 605	Date of Receipt MM / DD / YYYY 06 / 09 / 2010
	Mailing Address 416 DEEPWOOD CT	<b>Transaction ID:</b> SA11AI.87923
	City State Zip Code NAPERVILLE IL 60540	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NONE Occupation HOMEMAKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 47
	<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 REPUBLICAN PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) MRS MARIE-LUISE KALSI 770		Date of Receipt																					
	Mailing Address 13307 CAROUSEL 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>6</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	4		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		1	4		2	0	1	0														
	City State Zip Code HOUSTON TX 77041		<b>Transaction ID:</b> SA11AI.88001																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer: NONE Occupation: RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		100.00																						

<b>B.</b>	Full Name (Last, First, Middle Initial) PAUL KELLER 787		Date of Receipt																					
	Mailing Address PO BOX 342349		<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>6</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	1		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		2	1		2	0	1	0														
	City State Zip Code AUSTIN TX 78734		<b>Transaction ID:</b> SA11AI.88028																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer: AUSTIN ENGINEERING CO Occupation: ENGINEER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		200.00																						

<b>C.</b>	Full Name (Last, First, Middle Initial) MRS LINDA G KENDALL 941		Date of Receipt																					
	Mailing Address 2151 LAGUNA 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>0</td><td>6</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	5		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		2	5		2	0	1	0														
	City State Zip Code SAN FRANCISCO CA 94115		<b>Transaction ID:</b> SA11AI.88036																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer: NONE Occupation: HOMEMAKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		1000.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 47  
(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 REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
MR LEONARD M KIRK 210

Mailing Address 6 HUNTER DR

City State Zip Code  
**BEL AIR MD 21014**

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 09 2010**

**Transaction ID: SA11AI.88070**

Amount of Each Receipt this Period  
**100.00**

**B.**

Full Name (Last, First, Middle Initial)  
MRS JOAN LARSEN 601

Mailing Address 1111 PYOTT RD

City State Zip Code  
**LAKE IN THE HILLS IL 60156**

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 19 2010**

**Transaction ID: SA11AI.88205**

Amount of Each Receipt this Period  
**250.00**

**C.**

Full Name (Last, First, Middle Initial)  
MS MARIE J LETT 760

Mailing Address 3940 LETT LN

City State Zip Code  
**BURLESON TX 76028**

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

Name of Employer SELF EMPLOYED Occupation **RANCHER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1800.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 15 2010**

**Transaction ID: SA11AI.88278**

Amount of Each Receipt this Period  
**500.00**

**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: (check only one)	PAGE 16 / 47
	<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 REPUBLICAN PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) MS MARIE J LETT 760		Date of Receipt	
	Mailing Address 3940 LETT LN		M M / D D / Y Y Y Y 04 / 20 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.88277
	BURLESON	TX	76028	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		400.00	
Name of Employer SELF EMPLOYED		Occupation RANCHER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2200.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) MR PAUL LINTHORST 105		Date of Receipt	
	Mailing Address 19 HUNTWOOD PL		M M / D D / Y Y Y Y 05 / 18 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.88312
	MOUNT VERNON	NY	10552	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		250.00	
Name of Employer PRICE WATERHOUSE COOPERS		Occupation MANAGEMENT CONSULTANT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) MR ANDREW MESSENGER 335		Date of Receipt	
	Mailing Address 10634 MOSHIE LN		M M / D D / Y Y Y Y 06 / 01 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.88533
	SAN ANTONIO	TX	33576	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		300.00	
Name of Employer NONE		Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>950.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	PAGE 17 / 47
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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.** Full Name (Last, First, Middle Initial)  
MR ANDREW L MESSENGER 488

Mailing Address 7498 N MOUNT HOPE RD

City State Zip Code  
**RIVERDALE MI 48877**

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **05 / 26 / 2010**

**Transaction ID: SA11AI.88535**

Amount of Each Receipt this Period **200.00**

**B.** Full Name (Last, First, Middle Initial)  
MR GERHARD A MILLER 275

Mailing Address 13 PEARSE WYND RD

City State Zip Code  
**BAHAMA NC 27503**

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

Name of Employer GENWORTH FINANCIAL Occupation **ATTORNEY**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **04 / 13 / 2010**

**Transaction ID: SA11AI.88583**

Amount of Each Receipt this Period **100.00**

**C.** Full Name (Last, First, Middle Initial)  
MR GERHARD A MILLER 275

Mailing Address 13 PEARSE WYND RD

City State Zip Code  
**BAHAMA NC 27503**

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

Name of Employer GENWORTH FINANCIAL Occupation **ATTORNEY**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **06 / 17 / 2010**

**Transaction ID: SA11AI.88584**

Amount of Each Receipt this Period **200.00**

**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 18 / 47  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
MR DANIEL S MONACO 151

Mailing Address 533 ALLEGHENY AVE

City OAKMONT State PA Zip Code 15139

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 04 / 19 / 2010  
**Transaction ID: SA11AI.88641**  
 Amount of Each Receipt this Period: 50.00

**B.** Full Name (Last, First, Middle Initial)  
IA MORRIS 144

Mailing Address 2867 OUTLET RD

City CLIFTON SPRINGS State NY Zip Code 14432

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

Name of Employer Occupation  
GW LISK CO INC ENGINEER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 08 / 2010  
**Transaction ID: SA11AI.88675**  
 Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
IA MORRIS 144

Mailing Address 2867 OUTLET RD

City CLIFTON SPRINGS State NY Zip Code 14432

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

Name of Employer Occupation  
GW LISK CO INC ENGINEER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 04 / 27 / 2010  
**Transaction ID: SA11AI.88676**  
 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 19 / 47  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
IA MORRIS 144

Mailing Address 2867 OUTLET RD

City State Zip Code  
CLIFTON SPRINGS NY 14432

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

Name of Employer Occupation  
GW LISK CO INC ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt  
MM / DD / YYYY  
05 / 14 / 2010

**Transaction ID:** SA11AI.88674

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
IA MORRIS 144

Mailing Address 2867 OUTLET RD

City State Zip Code  
CLIFTON SPRINGS NY 14432

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

Name of Employer Occupation  
GW LISK CO INC ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2750.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2010

**Transaction ID:** SA11AI.88677

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
MS CHELI MYERS 750

Mailing Address 14818 SOPRAS CIR

City State Zip Code  
ADDISON TX 75001

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2010

**Transaction ID:** SA11AI.88740

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2100.00**

**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 20 / 47
	<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 REPUBLICAN PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) MR WILLIAM J MYHRE 973		Date of Receipt
	Mailing Address 865 2ND AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	SWEET HOME	OR	97386
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.88741
Name of Employer NONE		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"/> 200.00
		<input type="text"/> 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR WILLIAM J MYHRE 973		Date of Receipt
	Mailing Address 865 2ND AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	SWEET HOME	OR	97386
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.88742
Name of Employer NONE		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"/> 100.00
		<input type="text"/> 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MISS EDITH P PALMER 109		Date of Receipt
	Mailing Address 282 LAROE RD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	CHESTER	NY	10918
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.88895
Name of Employer NONE		Occupation HOMEMAKER	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"/> 100.00
		<input type="text"/> 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 400.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 47
	<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 REPUBLICAN PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) MISS EDITH P PALMER 109		Date of Receipt		
	Mailing Address 282 LAROE RD		M M / D D / Y Y Y Y Y 06 / 09 / 2010		
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.88896	
	CHESTER	NY	10918	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		C	250.00	
	Name of Employer NONE		Occupation HOMEMAKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼			
		850.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) MR JEFFREY L PORTMAN 303, SR		Date of Receipt		
	Mailing Address 240 PEACHTREE ST #2200		M M / D D / Y Y Y Y Y 06 / 21 / 2010		
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.89034	
	ATLANTA	GA	30303	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		C	250.00	
	Name of Employer SELF EMPLOYED		Occupation BUSINESS OWNER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼			
		250.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) LENORA PUSTA 855		Date of Receipt		
	Mailing Address 138 W SUNFLOWER DR		M M / D D / Y Y Y Y Y 04 / 27 / 2010		
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.89067	
	PAYSON	AZ	85541	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		C	500.00	
	Name of Employer NONE		Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼			
		500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 47  
(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 REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
MISS BEATRICE R PUTNAM 050

Mailing Address 225 PUTNAM RD

City State Zip Code  
**NEWBURY VT 05051**

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
MM / DD / YYYY  
**05 / 14 / 2010**

**Transaction ID: SA11AI.89070**

Amount of Each Receipt this Period  
**75.00**

**B.**

Full Name (Last, First, Middle Initial)  
MISS BEATRICE R PUTNAM 050

Mailing Address 225 PUTNAM RD

City State Zip Code  
**NEWBURY VT 05051**

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
MM / DD / YYYY  
**06 / 11 / 2010**

**Transaction ID: SA11AI.89071**

Amount of Each Receipt this Period  
**75.00**

**C.**

Full Name (Last, First, Middle Initial)  
MR DALE E RAGEL 930

Mailing Address 1471 SORREL ST

City State Zip Code  
**SIMI VALLEY CA 93065**

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
MM / DD / YYYY  
**04 / 01 / 2010**

**Transaction ID: SA11AI.89089**

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 23 / 47  
(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 REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
MR DONALD B RICE 900

Mailing Address 10126 EMPYREAN WAY APT 103

City State Zip Code  
**LOS ANGELES CA 90067**

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

Name of Employer Occupation  
AGENSYS, INC EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **06 / 25 / 2010**

**Transaction ID: SA11AI.89154**

Amount of Each Receipt this Period **1000.00**

**B.**

Full Name (Last, First, Middle Initial)  
MS M RICHARDSON 288

Mailing Address 1617 HENDERSONVILLE RD

City State Zip Code  
**ASHEVILLE NC 28803**

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **05 / 21 / 2010**

**Transaction ID: SA11AI.89156**

Amount of Each Receipt this Period **100.00**

**C.**

Full Name (Last, First, Middle Initial)  
MS M RICHARDSON 288

Mailing Address 1617 HENDERSONVILLE RD

City State Zip Code  
**ASHEVILLE NC 28803**

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **06 / 09 / 2010**

**Transaction ID: SA11AI.89157**

Amount of Each Receipt this Period **100.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1200.00**

**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 24 / 47
	<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 REPUBLICAN PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) MR EDWIN C SANDHAM 349		Date of Receipt
	Mailing Address 1964 SW SAINT ANDREWS DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	PALM CITY	FL	34990
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	<b>Transaction ID:</b> SA11AI.89333
Name of Employer NONE		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"/> 225.00
		<input type="text"/> 550.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR EDWIN C SANDHAM 349		Date of Receipt
	Mailing Address 1964 SW SAINT ANDREWS DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	PALM CITY	FL	34990
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	<b>Transaction ID:</b> SA11AI.89332
Name of Employer NONE		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"/> 225.00
		<input type="text"/> 775.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR EDWIN C SANDHAM 349		Date of Receipt
	Mailing Address 1964 SW SAINT ANDREWS DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	PALM CITY	FL	34990
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	<b>Transaction ID:</b> SA11AI.89335
Name of Employer NONE		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"/> 100.00
		<input type="text"/> 875.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 550.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 47

(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 REPUBLICAN PAC

**A.**

Full Name (Last, First, Middle Initial)  
MR EDWIN C SANDHAM 349

Mailing Address 1964 SW SAINT ANDREWS DR

City State Zip Code  
PALM CITY FL 34990

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1075.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 08 / 2010

Transaction ID: SA11AI.89336

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
MR EDWIN C SANDHAM 349

Mailing Address 1964 SW SAINT ANDREWS DR

City State Zip Code  
PALM CITY FL 34990

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1145.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 22 / 2010

Transaction ID: SA11AI.89334

Amount of Each Receipt this Period

70.00

**C.**

Full Name (Last, First, Middle Initial)  
MR STEPHEN A SANDOR 481

Mailing Address 1717 KINGS HWY

City State Zip Code  
LINCOLN PARK MI 48146

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 293.96

Date of Receipt

M M / D D / Y Y Y Y  
05 / 17 / 2010

Transaction ID: SA11AI.89338

Amount of Each Receipt this Period

100.48

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

370.48

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 47
	<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 REPUBLICAN PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) MR STEPHEN A SANDOR 481		Date of Receipt
	Mailing Address 1717 KINGS HWY		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	LINCOLN PARK	MI	48146
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.89339
Name of Employer NONE		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"/> 93.48
		<input type="text"/> 387.44	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR NORMAN SCHWOTZER 152		Date of Receipt
	Mailing Address 730 BOWER HILL RD APT 302		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	PITTSBURGH	PA	15243
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.89411
Name of Employer NONE		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"/> 250.00
		<input type="text"/> 700.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) DR PENELOPE P SCOTT 210, MD		Date of Receipt
	Mailing Address 11824 FALLS RD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	COCKEYSVILLE	MD	21030
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.89416
Name of Employer SELF EMPLOYED		Occupation PHYSICIAN	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"/> 100.00
		<input type="text"/> 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 443.48
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 47
	<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 REPUBLICAN PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) MR JOHN J SIEFFERT 480, JR		Date of Receipt MM / DD / YYYY 06 / 17 / 2010		
	Mailing Address 740 RANDALL DR		<b>Transaction ID:</b> SA11AI.89496		
	City	State	Zip Code	Amount of Each Receipt this Period	
	TROY	MI	48085	300.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer NONE		Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) MR EDVIN SKURDAL 640		Date of Receipt MM / DD / YYYY 06 / 08 / 2010		
	Mailing Address 501 BOWEN DR		<b>Transaction ID:</b> SA11AI.89534		
	City	State	Zip Code	Amount of Each Receipt this Period	
	RAYMORE	MO	64083	50.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer NONE		Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) CLIFFORD H SWENSEN 479, JR		Date of Receipt MM / DD / YYYY 04 / 02 / 2010		
	Mailing Address 1700 LINDBERG RD		<b>Transaction ID:</b> SA11AI.89741		
	City	State	Zip Code	Amount of Each Receipt this Period	
	WEST LAFAYETTE	IN	47906	100.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer PURDUE UNIVERSITY		Occupation PROFESSOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>450.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 47  
(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 REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
CLIFFORD H SWENSEN 479, JR

Mailing Address 1700 LINDBERG RD

City State Zip Code  
**WEST LAFAYETTE IN 47906**

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

Name of Employer Occupation  
PURDUE UNIVERSITY PROFESSOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **05 / 17 / 2010**

**Transaction ID: SA11AI.89742**

Amount of Each Receipt this Period **50.00**

**B.**

Full Name (Last, First, Middle Initial)  
CLIFFORD H SWENSEN 479, JR

Mailing Address 1700 LINDBERG RD

City State Zip Code  
**WEST LAFAYETTE IN 47906**

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

Name of Employer Occupation  
PURDUE UNIVERSITY PROFESSOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **06 / 14 / 2010**

**Transaction ID: SA11AI.89743**

Amount of Each Receipt this Period **50.00**

**C.**

Full Name (Last, First, Middle Initial)  
MR ROBERT S TROTH 358

Mailing Address 18 SAINT CHARLES SQ

City State Zip Code  
**HUNTSVILLE AL 35801**

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 21 / 2010**

**Transaction ID: SA11AI.89864**

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 29 / 47  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
RALPH S VENNETTI 604

Mailing Address 104 FOREST EDGE DR

City State Zip Code  
PALOS PARK IL 60464

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

Name of Employer SELF EMPLOYED      Occupation BUSINESSMAN

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  

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

**Transaction ID:** SA11AI.89921

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
MERLE WAIT 671

Mailing Address PO BOX 545

City State Zip Code  
PROTECTION KS 67127

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

Name of Employer SELF EMPLOYED      Occupation FARMER

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

Date of Receipt  

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

**Transaction ID:** SA11AI.89962

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
MRS BARBARA H WILSON 941

Mailing Address 2540 GREEN ST

City State Zip Code  
SAN FRANCISCO CA 94123

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

Name of Employer NONE      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
0	4	/	0	5	/	2	0	1	0

**Transaction ID:** SA11AI.90124

Amount of Each Receipt this Period  
250.00

**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 30 / 47  
(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 REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)  
BRYAN WRIGHT 208

Mailing Address 21129 GOLF ESTATES DR

City	State	Zip Code
GAITHERSBURG	MD	20882

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

Name of Employer	Occupation

Receipt For:

Primary     General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	0

Transaction ID: SA11AI.90161

Amount of Each Receipt this Period

250.00
--------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	17318.16

**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 REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) BASE CONNECT, INC.	Transaction ID: SB21B.86066 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<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>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	0												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL - CREATIVE	<table border="1"><tr><td>1118.57</td></tr></table>	1118.57																		
1118.57																					
	Candidate Name BLACK REPUBLICAN PAC	003 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) BASE CONNECT, INC.	Transaction ID: SB21B.86067 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<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>5</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	6		2	0	1	0												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL - CREATIVE	<table border="1"><tr><td>4144.27</td></tr></table>	4144.27																		
4144.27																					
	Candidate Name BLACK REPUBLICAN PAC	003 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) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.86068 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<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>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	0												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL - POSTAGE	<table border="1"><tr><td>9793.31</td></tr></table>	9793.31																		
9793.31																					
	Candidate Name BLACK REPUBLICAN PAC	003 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>15056.15</td></tr></table>	15056.15
15056.15		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER: (check only one)

<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 REPUBLICAN PAC

<b>A.</b> Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES Mailing Address 1155 - 15TH STREET NW SUITE 410 City WASHINGTON State DC Zip Code 20005 Purpose of Disbursement DIRECT MAIL - POSTAGE Candidate Name BLACK REPUBLICAN PAC 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.86069 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 8226.92 Category/Type 003

<b>B.</b> Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES Mailing Address 1155 - 15TH STREET NW SUITE 410 City WASHINGTON State DC Zip Code 20005 Purpose of Disbursement DIRECT MAIL - POSTAGE Candidate Name BLACK REPUBLICAN PAC 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.86070 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 4042.76 Category/Type 003

<b>C.</b> Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES Mailing Address 1155 - 15TH STREET NW SUITE 410 City WASHINGTON State DC Zip Code 20005 Purpose of Disbursement DIRECT MAIL - POSTAGE Candidate Name BLACK REPUBLICAN PAC 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.86071 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 3500.00 Category/Type 003

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15769.68
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.86072 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="05"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - POSTAGE	<input type="text" value="3426.95"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> 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) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.86073 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="05"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - POSTAGE	<input type="text" value="3800.00"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> 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) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.86074 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="06"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - POSTAGE	<input type="text" value="5000.00"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="12226.95"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.86075 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<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>6</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	1	0	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6	/	1	0	/	2	0	1	0												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL - POSTAGE	<table border="1"><tr><td>1392.68</td></tr></table>	1392.68																		
1392.68																					
	Candidate Name BLACK REPUBLICAN PAC	003 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) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.86076 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<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>6</td><td>/</td><td>2</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	2	4	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6	/	2	4	/	2	0	1	0												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL - POSTAGE	<table border="1"><tr><td>11735.70</td></tr></table>	11735.70																		
11735.70																					
	Candidate Name BLACK REPUBLICAN PAC	003 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) CENTURY DATA SYSTEMS	Transaction ID: SB21B.86077 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<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>4</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	8	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4	/	0	8	/	2	0	1	0												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DATA PROCESSING	<table border="1"><tr><td>864.83</td></tr></table>	864.83																		
864.83																					
	Candidate Name BLACK REPUBLICAN PAC	001 Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>13993.21</td></tr></table>	13993.21
13993.21		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td> </td></tr></table>	

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

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

FOR LINE NUMBER: (check only one)

<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 REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)  
CENTURY DATA SYSTEMS

Transaction ID: SB21B.86078  
Date of Disbursement

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

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

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

1713.46
---------

Purpose of Disbursement  
DATA PROCESSING

001
-----

Category/  
Type

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
CENTURY DATA SYSTEMS

Transaction ID: SB21B.86079  
Date of Disbursement

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	0

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

1652.66
---------

Purpose of Disbursement  
DATA PROCESSING

001
-----

Category/  
Type

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
CONSOLIDATED MAILING SERVICE

Transaction ID: SB21B.86080  
Date of Disbursement

Mailing Address 504 SHAW ROAD  
SUITE 206

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	0

City STERLING State VA Zip Code 20166

Amount of Each Disbursement this Period

2444.50
---------

Purpose of Disbursement  
DIRECT MAIL - PRINTING

003
-----

Category/  
Type

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

5810.62
---------

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

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
CONSOLIDATED MAILING SERVICE

Mailing Address 504 SHAW ROAD  
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement  
DIRECT MAIL - PRINTING

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.86084  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
CONSOLIDATED MAILING SERVICE

Mailing Address 504 SHAW ROAD  
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement  
DIRECT MAIL - PRINTING

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.86085  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
MR EDWARD J COUSAR

Mailing Address PO BOX 96613

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement  
CONSULTING - MANAGEMENT

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.86086  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) MR EDWARD J COUSAR	Transaction ID: SB21B.86087 Date of Disbursement																			
	Mailing Address PO BOX 96613	<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>5</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	6	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5	/	0	6	/	2	0	1	0												
	City WASHINGTON State DC Zip Code 20090	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TRAVEL RELATED EXPENSE REIMB	<table border="1"><tr><td>398.17</td></tr></table>	398.17																		
398.17																					
	Candidate Name BLACK REPUBLICAN PAC	002 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) MR EDWARD J COUSAR	Transaction ID: SB21B.86088 Date of Disbursement																			
	Mailing Address PO BOX 96613	<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>6</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	1	7	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6	/	1	7	/	2	0	1	0												
	City WASHINGTON State DC Zip Code 20090	Amount of Each Disbursement this Period																			
	Purpose of Disbursement POSTAGE REIMBURSEMENT	<table border="1"><tr><td>33.00</td></tr></table>	33.00																		
33.00																					
	Candidate Name BLACK REPUBLICAN PAC	001 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) ELECTRONIC REPORTING SYSTEMS INC	Transaction ID: SB21B.86089 Date of Disbursement																			
	Mailing Address 683 BERRYVILLE AVE	<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>4</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	8	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4	/	0	8	/	2	0	1	0												
	City WINCHESTER State VA Zip Code 22601	Amount of Each Disbursement this Period																			
	Purpose of Disbursement ELECTRONIC DISCLOSURE REPORTING	<table border="1"><tr><td>1692.80</td></tr></table>	1692.80																		
1692.80																					
	Candidate Name BLACK REPUBLICAN PAC	001 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>2123.97</td></tr></table>	2123.97
2123.97		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td> </td></tr></table>	

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

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

FOR LINE NUMBER: (check only one)

<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 REPUBLICAN PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK <hr/> Mailing Address 11325 RANDOM HILLS DR <hr/> City FAIRFAX State VA Zip Code 22030 <hr/> Purpose of Disbursement MERCHANT SERVICE CHARGE <hr/> Candidate Name BLACK REPUBLICAN PAC <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.86090 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 146.70
<b>B.</b>	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK <hr/> Mailing Address 11325 RANDOM HILLS DR <hr/> City FAIRFAX State VA Zip Code 22030 <hr/> Purpose of Disbursement AMEX COLLECTION FEE <hr/> Candidate Name BLACK REPUBLICAN PAC <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.86091 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 4.95
<b>C.</b>	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK <hr/> Mailing Address 11325 RANDOM HILLS DR <hr/> City FAIRFAX State VA Zip Code 22030 <hr/> Purpose of Disbursement SERVICE CHARGE <hr/> Candidate Name BLACK REPUBLICAN PAC <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.86092 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 117.25

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>268.90</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

<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 REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.86093 Date of Disbursement
	Mailing Address 11325 RANDOM HILLS DR	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement AMEX DISCOUNT FEE	<input type="text" value="34.66"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.86094 Date of Disbursement
	Mailing Address 11325 RANDOM HILLS DR	<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement MERCHANT SERVICE CHARGE	<input type="text" value="70.00"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.86095 Date of Disbursement
	Mailing Address 11325 RANDOM HILLS DR	<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement MERCHANT SERVICE CHARGE	<input type="text" value="120.33"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="224.99"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.86096
	Mailing Address 11325 RANDOM HILLS DR	Date of Disbursement 05 / 24 / 2010
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period 4.95
	Purpose of Disbursement AMEX COLLECTION FEE	001 Category/Type
	Candidate Name BLACK REPUBLICAN PAC	
	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) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.86097
	Mailing Address 11325 RANDOM HILLS DR	Date of Disbursement 05 / 28 / 2010
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period 51.63
	Purpose of Disbursement SERVICE CHARGE	001 Category/Type
	Candidate Name BLACK REPUBLICAN PAC	
	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) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.86098
	Mailing Address 11325 RANDOM HILLS DR	Date of Disbursement 05 / 28 / 2010
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period 27.04
	Purpose of Disbursement AMEX DISCOUNT FEE	001 Category/Type
	Candidate Name BLACK REPUBLICAN PAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>83.62</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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 REPUBLICAN PAC

<b>A.</b> Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK <hr/> Mailing Address 11325 RANDOM HILLS DR <hr/> City FAIRFAX State VA Zip Code 22030 <hr/> Purpose of Disbursement MERCHANT SERVICE CHARGE Candidate Name BLACK REPUBLICAN PAC <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.86099 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 143.05
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK <hr/> Mailing Address 11325 RANDOM HILLS DR <hr/> City FAIRFAX State VA Zip Code 22030 <hr/> Purpose of Disbursement SERVICE CHARGE Candidate Name BLACK REPUBLICAN PAC <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.86100 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 122.39
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK <hr/> Mailing Address 11325 RANDOM HILLS DR <hr/> City FAIRFAX State VA Zip Code 22030 <hr/> Purpose of Disbursement AMEX COLLECTION FEE Candidate Name BLACK REPUBLICAN PAC <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.90221 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 4.95
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	270.39
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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 REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
SERVICE CHARGE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.90223

Date of Disbursement

06 / 30 / 2010

Amount of Each Disbursement this Period

28.32

001  
Category/  
Type

B.

Full Name (Last, First, Middle Initial)  
LEGACY LISTS INC

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City State Zip Code  
WASHINGTON DC 20005

Purpose of Disbursement  
DIRECT MAIL - LIST RENTALS

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.86101

Date of Disbursement

05 / 06 / 2010

Amount of Each Disbursement this Period

633.88

003  
Category/  
Type

C.

Full Name (Last, First, Middle Initial)  
LEGACY LISTS INC

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City State Zip Code  
WASHINGTON DC 20005

Purpose of Disbursement  
DIRECT MAIL - LIST RENTALS

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.86102

Date of Disbursement

06 / 10 / 2010

Amount of Each Disbursement this Period

100.00

003  
Category/  
Type

SUBTOTAL of Disbursements This Page (optional) ▶

762.20

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 44 / 47

<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 REPUBLICAN PAC

<b>A.</b> Full Name (Last, First, Middle Initial) LEGACY LISTS INC <hr/> Mailing Address 1155 - 15TH STREET NW SUITE 410 <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement DIRECT MAIL - LIST RENTALS <hr/> Candidate Name BLACK REPUBLICAN PAC <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.86103 Date of Disbursement MM / DD / YYYY 06 / 10 / 2010
	Amount of Each Disbursement this Period 1061.80
<b>B.</b> Full Name (Last, First, Middle Initial) WASHINGTON INTELLIGENCE BUREAU <hr/> Mailing Address 4128 PEPSI PLACE <hr/> City CHANTILLY State VA Zip Code 20151 <hr/> Purpose of Disbursement CAGING & ESCROW SERVICES <hr/> Candidate Name BLACK REPUBLICAN PAC <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.86104 Date of Disbursement MM / DD / YYYY 04 / 15 / 2010
	Amount of Each Disbursement this Period 777.90

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

1839.70

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

87920.56

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)  
LES PHILLIP FOR CONGRESS

Transaction ID: SB23.86105

Date of Disbursement

Mailing Address 12060 COUNTYLINE ROAD STE J 277

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	0

City MADISON State AL Zip Code 35756

Amount of Each Disbursement this Period

4000.00
---------

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011
Category/ Type

Candidate Name  
LESTER S PHILLIP

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: AL District: 05

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

4000.00
---------

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

4000.00
---------

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
BASE CONNECT, INC.

Nature of Debt (Purpose):  
DIRECT MAIL FUNDRAISING FOR BRPAC

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City State ZIP Code  
WASHINGTON DC 20005

Outstanding Balance Beginning This Period **Transaction ID: SD10.4113**  
44038.95

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

0.00 5262.84 38776.11

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ELECTRONIC REPORTING SYSTEMS INC

Nature of Debt (Purpose):  
ELECTRONIC DISCLOSURE REPORTING

Mailing Address 683 BERRYVILLE AVE

City State ZIP Code  
WINCHESTER VA 22601

Outstanding Balance Beginning This Period **Transaction ID: SD10.63979**  
2172.26

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

0.00 1692.80 479.46

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LEGACY LISTS INC

Nature of Debt (Purpose):  
FUNDRAISING LIST RENTALS FOR BRPAC

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City State ZIP Code  
WASHINGTON DC 20005

Outstanding Balance Beginning This Period **Transaction ID: SD10.4117**  
23229.19

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

0.00 1795.68 21433.51

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	60689.08
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> MACKENZIE & COMPANY			Nature of Debt (Purpose): CONSULTING - COMPLIANCE
Mailing Address 3464 S UTAH ST			
City ARLINGTON	State VA	ZIP Code 22206	

Outstanding Balance Beginning This Period 3000.00		<b>Transaction ID: SD10.72919</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3000.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> PATTON-KIEHL GROUP			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address PO BOX 590			
City THORNBURG	State VA	ZIP Code 22565	

Outstanding Balance Beginning This Period 189.95		<b>Transaction ID: SD10.63997</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 189.95	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> WEST END PRINTING CO			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address 1609 SHERWOOD AVE			
City RICHMOND	State VA	ZIP Code 23220	

Outstanding Balance Beginning This Period 200.00		<b>Transaction ID: SD10.23902</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	3389.95
<b>2) TOTALS</b> This Period (last page this line number only).....	64079.03
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	64079.03