

REPORT OF RECEIPTS AND DISBURSEMENTS
 BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1 / 11

1. NAME OF COMMITTEE (in full) BROWNBAC FOR PRESIDENT INC	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported PO BOX 2008 2436 SW CAMELOT PL	2. IDENTIFICATION NUMBER C00430694
CITY, STATE, and ZIP CODE TOPEKA KS 66601	3. IS THIS REPORT FOR : <input type="checkbox"/> Primary <input type="checkbox"/> General

4. TYPE OF REPORT (Check here if this is a Termination Report.)

<input type="checkbox"/> April 15 Quarterly Report <input type="checkbox"/> July 15 Quarterly Report <input type="checkbox"/> October 15 Quarterly Report <input type="checkbox"/> January 31 Year End Report	Monthly Report Due On: <input checked="" type="checkbox"/> February 20 <input type="checkbox"/> June 20 <input type="checkbox"/> October 20 <input type="checkbox"/> March 20 <input type="checkbox"/> July 20 <input type="checkbox"/> November 20 <input type="checkbox"/> April 20 <input type="checkbox"/> August 20 <input type="checkbox"/> December 20 <input type="checkbox"/> May 20 <input type="checkbox"/> September 20 <input type="checkbox"/> January 31
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Twelfth day report preceding _____ (Type of Election)
 election on _____ in the State of _____

Thirtieth day report following the General Election on _____
 on _____

IS THIS REPORT AN AMENDMENT YES NO

5. COVERING PERIOD	FROM 01/01/2008	THROUGH 01/31/2008
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SUMMARY		
6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	5324.12
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	10515.80
8. SUBTOTAL (Lines 6 and 7)	.....	15839.92
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	.....	7784.87
10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	.....	8055.05
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	.....	0.00
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	.....	26160.43
13. EXPENDITURES SUBJECT TO LIMITATION	.....	4183209.84
NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES		
14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	.....	3580597.17
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2)	.....	4183209.84

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.

Type or Print Name of Treasurer T.C. Anderson	Date 06/23/2009
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Signature of Treasurer

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

For further information contact:	Federal Election Commission 999 E Street, N.W. Washington, DC 20463	Toll Free 800-424-9530 Local 202-694-1100
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FEC FORM 3P
(01/2001)

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

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(PAGE 2, FEC FORM 3P)

Name of committee (in full) BROWBACK FOR PRESIDENT INC		Report Covering the Period From: 01/01/2008 To: 01/31/2008	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00	
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	0.00	3603905.17	
(b) Political Party Committees	0.00	300.00	
(c) Other Political Committees	0.00	49435.00	
(d) The Candidate	0.00	0.00	
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))	0.00	3653640.17	
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	575000.00	
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00	
(b) Other Loans	0.00	0.00	
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	0.00	
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	515.80	120181.19	
(b) Fundraising	0.00	0.00	
(c) Legal and Accounting	0.00	0.00	
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))	515.80	120181.19	
21. OTHER RECEIPTS (Dividend, Interest, etc.)	10000.00	35822.29	
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	10515.80	4384643.65	
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES	7784.87	4303391.03	
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00	
25. FUNDRAISING DISBURSEMENTS	0.00	0.00	
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	0.00	0.00	
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	0.00	0.00	
(b) Other Repayments	0.00	0.00	
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	0.00	0.00	
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	0.00	73043.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees	0.00	0.00	
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	0.00	73043.00	
29. OTHER DISBURSEMENTS	0.00	97.00	
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	7784.87	4376531.03	
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00		

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

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1. NAME OF COMMITTEE (in full) BROWNBACK FOR PRESIDENT INC					
ADDRESS (number and street) PO BOX 2008 2436 SW CAMELOT PL					
CITY, STATE, and ZIP CODE TOPEKA KS 66601			2. IDENTIFICATION NUMBER C00430694		

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	0.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachussetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	0.00

Form/Schedule : **F3PA**

Transaction ID :

This amended report is being filed to reflect the debt to Martin Gillespie which is more fully explained in the memo attached to our amended January 31, 2008, year-end report. T.C. Anderson, Treasurer.

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5 / 11
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
BROWBACK FOR PRESIDENT INC

A.

Full Name (Last, First, Middle Initial) James Dickerson, Jr.		Date of Receipt
Mailing Address Greenbaum, Doll & McDonald 2800 Chemed Center		<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 0 1 / 0 4 / 2 0 0 8
City State Zip Code Cincinnati OH 45202		Amount of Each Receipt this Period 320.31
FEC ID number of contributing federal political committee.		
Name of Employer Information Requested	Occupation Information Requested	Check returned. Campaign paid
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 320.31	
		Transaction ID: SA20A.4924

B.

Full Name (Last, First, Middle Initial) Verizon		Date of Receipt
Mailing Address 3011 Hungary Springs Road 4th Floor		<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 0 1 / 0 2 / 2 0 0 8
City State Zip Code Richmond VA 23228		Amount of Each Receipt this Period 5.21
FEC ID number of contributing federal political committee.		
Name of Employer	Occupation	Balance due from final bill.
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1050.20	
		Transaction ID: SA20A.4922

SUBTOTAL of Receipts This Page (optional)	325.52
TOTAL This Period (last page this line number only)	325.52

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 11
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
BROWBACK FOR PRESIDENT INC

A.	Full Name (Last, First, Middle Initial) Nova List Company		Date of Receipt
	Mailing Address Suite 450		<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/>
	City	State	Zip Code
	Herndon	VA	20171
	FEC ID number of contributing federal political committee.		<input type="text" value="5000.00"/>
	Name of Employer		Occupation
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="27516.03"/>	Wire transfer of mailing list
			Transaction ID: SA21.4926

B.	Full Name (Last, First, Middle Initial) Nova List Company		Date of Receipt
	Mailing Address Suite 450		<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/>
	City	State	Zip Code
	Herndon	VA	20171
	FEC ID number of contributing federal political committee.		<input type="text" value="5000.00"/>
	Name of Employer		Occupation
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="32516.03"/>	Wire transfer of mail list ren
			Transaction ID: SA21.4925

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="10000.00"/>

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BROWBACK FOR PRESIDENT INC

A.	Full Name (Last, First, Middle Initial) ADP EasyPay	Transaction ID: SB23.4927 Date of Disbursement
	Mailing Address 100 Northwest Pt. Blvd.	<input type="text" value="01"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City Elk Grove Village State IL Zip Code 60007	Amount of Each Disbursement this Period
	Purpose of Disbursement Yearend Information Statements, W-2s	<input type="text" value="140.15"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ADP EasyPay	Transaction ID: SB23.4928 Date of Disbursement
	Mailing Address 100 Northwest Pt. Blvd.	<input type="text" value="01"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City Elk Grove Village State IL Zip Code 60007	Amount of Each Disbursement this Period
	Purpose of Disbursement Fees	<input type="text" value="74.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ADP EasyPay	Transaction ID: SB23.5033 Date of Disbursement
	Mailing Address 100 Northwest Pt. Blvd.	<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City Elk Grove Village State IL Zip Code 60007	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll taxes for November	<input type="text" value="1474.82"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1688.97"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BROWBACK FOR PRESIDENT INC

A.	Full Name (Last, First, Middle Initial) ADP EasyPay Mailing Address 100 Northwest Pt. Blvd. City Elk Grove Village State IL Zip Code 60007 Purpose of Disbursement Payroll fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4929 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 8 Amount of Each Disbursement this Period 56.50 Category/Type
B.	Full Name (Last, First, Middle Initial) AT&T Mailing Address P.O. Box 930170 City Dallas State TX Zip Code 75393-0170 Purpose of Disbursement Telephone service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4931 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 4 / 2 0 0 8 Amount of Each Disbursement this Period 41.09 Category/Type
C.	Full Name (Last, First, Middle Initial) Cash Vault Mailing Address Government Office Complex City Washington State DC Zip Code 20004 Purpose of Disbursement Credit card expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4920 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 8 Amount of Each Disbursement this Period 79.92 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	97.59
TOTAL This Period (last page this line number only) ▶	

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BROWBACK FOR PRESIDENT INC

A.	Full Name (Last, First, Middle Initial) Core First Bank & Trust	Transaction ID: SB23.4932 Date of Disbursement
	Mailing Address P.O. Box 5049	<input type="text" value="01"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City Topeka State KS Zip Code 66605	Amount of Each Disbursement this Period
	Purpose of Disbursement Stop payment fee	<input type="text" value="24.00"/>
	Candidate Name	<input type="text" value=""/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Core First Bank & Trust	Transaction ID: SB23.4933 Date of Disbursement
	Mailing Address P.O. Box 5049	<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City Topeka State KS Zip Code 66605	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank service charge	<input type="text" value="9.71"/>
	Candidate Name	<input type="text" value=""/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rob Wasinger	Transaction ID: SB23.5034 Date of Disbursement
	Mailing Address 10638 Timberidge Rd.	<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City Fairfax Station State VA Zip Code 22039-2406	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary Due November 2007	<input type="text" value="5910.42"/>
	Candidate Name	<input type="text" value="101"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5944.13"/>
TOTAL This Period (last page this line number only)	<input type="text" value="7730.69"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 BROWNBACK FOR PRESIDENT INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ADP EasyPay			Nature of Debt (Purpose): Payroll taxes due for October
Mailing Address 100 Northwest Pt. Blvd.			
City Elk Grove Village	State IL	ZIP Code 60007	

Outstanding Balance Beginning This Period <input type="text" value="3857.45"/>		Transaction ID: SD12.5011	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3857.45"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ADP EasyPay			Nature of Debt (Purpose): Payroll taxes due for November 2007
Mailing Address 100 Northwest Pt. Blvd.			
City Elk Grove Village	State IL	ZIP Code 60007	

Outstanding Balance Beginning This Period <input type="text" value="1474.82"/>		Transaction ID: SD12.5012	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1474.82"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor HSP Direct			Nature of Debt (Purpose): Direct Mail Piece Expenses
Mailing Address 13755 Sunrise Valley Dr. Suite 450			
City Herndon	State VA	ZIP Code 20171	

Outstanding Balance Beginning This Period <input type="text" value="6619.04"/>		Transaction ID: SD12.5014	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6619.04"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="10476.49"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 BROWNBAC FOR PRESIDENT INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sunrise Data Services	Nature of Debt (Purpose): Data Services
Mailing Address 13755 Sunrise Valley Drive Suite 450	
City State ZIP Code Herndon VA 20171	

Outstanding Balance Beginning This Period 1204.14	Transaction ID: SD12.5013	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1204.14

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rob Wasinger	Nature of Debt (Purpose): Salary due October 5, 2007
Mailing Address 10638 Timberidge Rd.	
City State ZIP Code Fairfax Station VA 22039-2406	

Outstanding Balance Beginning This Period 14479.80	Transaction ID: SD12.5016	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 14479.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rob Wasinger	Nature of Debt (Purpose): Salary Due Nov. 5, 2007
Mailing Address 10638 Timberidge Rd.	
City State ZIP Code Fairfax Station VA 22039-2406	

Outstanding Balance Beginning This Period 5910.42	Transaction ID: SD12.5015	
Amount Incurred This Period 0.00	Payment This Period 5910.42	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	15683.94
2) TOTALS This Period (last page this line number only).....	26160.43
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	26160.43